

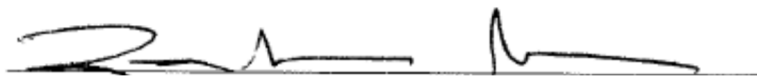
Department of Behavioural Sciences and Learning

Division of Psychology 2024 Annual Report

Σ Ψ'24



This is the 12th annual report of the publications from the division of Psychology at the Department of Behavioural Sciences and Learning, Linköping University, Sweden. The psychology division has several researchers and research groups. We cover a broad range of topics within psychology, including cognitive, developmental, social, health and clinical psychology. Different research methods are also represented. Researchers at the division work closely with other universities both nationally and internationally. We hope that the annual report will give an overview of the research conducted here and that it can be useful for students, researchers and other colleagues who are interested in psychology and the research we do here in Linköping.

A handwritten signature in black ink, consisting of a series of connected loops and strokes, positioned above a horizontal line.

*Gerhard Andersson, PhD, professor
Editor for the Annual Report 2024*

Peer-reviewed articles, book chapters and books¹

Andersson, G. (2024). The latest developments with internet-based psychological treatments for depression. *Expert Review of Neurotherapeutics*, 24, 171–176.

Internet-based psychological treatments for depression have been around for more than 20 years. There has been a continuous line of research with new research questions being asked and studies conducted. In this paper, the author reviews studies with a focus on papers published from 2020 and onwards based on a Medline and Scopus search. Internet-based cognitive behavior therapy (ICBT) programs have been developed and tested for adolescents, older adults, immigrant groups and to handle a societal crisis (e.g. COVID-19). ICBT works in regular clinical settings and long-term effects can be obtained. Studies on different treatment orientations and approaches such as acceptance commitment therapy, unified protocol, and tailored treatments have been conducted. Effects on quality-of-life measures, knowledge acquisition and ecological momentary assessment as a research tool have been reported. Factorial design trials and individual patient data meta-analysis are increasingly used in association with internet intervention research. Finally, prediction studies and recent advances in artificial intelligence are mentioned. Internet-delivered treatments are effective, in particular if therapist guidance is provided. More target groups have been covered but there are many remaining challenges including how new tools like artificial intelligence will be used when treating depression.

Andersson, G. (2024). Innovating CBT and answering new questions. The role of internet-delivered CBT. *International Journal of Cognitive Therapy*, 17, 179–190.

Internet-delivered cognitive behavior therapy (ICBT) was developed in the late 1990s, and since then, a large number of studies have been conducted. Many programs have been developed and sometimes implemented, and ICBT has become a major way to investigate and innovate CBT including important questions regarding mechanisms and moderating factors. The aim of this narrative review was to comment on the treatment format, the evidence behind ICBT, innovations, and finally challenges. ICBT has been developed and tested for a range of conditions including both psychiatric and somatic health problems and also transdiagnostic problems like loneliness and poor self-esteem. Meta-analytic reviews suggest that guided ICBT can be as effective as face-to-face CBT and by using individual patient data meta-analytic methods (IPDMA), it is

¹ Member of the division in italics.

now possible have better power for the search of moderators. There are also several reports of how well ICBT works in regular clinical settings, mostly replicating the results reported in efficacy studies. Cost-effectiveness has also been documented as well as studies using qualitative methodology to document client and clinician experiences. In terms of innovation, there are now studies on problems for which there is limited previous face-to-face research, and one major advancement is the use of factorial design trials in which more than one independent variable is tested. Finally, ICBT has the potential to be useful in times of crisis, with the COVID-19 pandemic being one recent example. Future challenges include use of artificial intelligence in both treatment development and possibly treatment delivery. Another urgent priority is to reach less favored parts of the world as most studies and programs have been tested and implemented in Western countries. In conclusion, ICBT is now an established as a way to develop, test, and deliver CBT.

Andersson, G. (2024). Psykoterapi och psykologisk behandling. In J. Herlofson, L. Ekselius, & M. Åsberg (Eds.), Psykiatri (3 ed., pp. 527-535). Lund: Studentlitteratur.

In this chapter a review is presented on different forms of psychological treatments, including psychotherapy orientations. Evidence from systematic reviews is covered as well and also the combined effect of medication and psychotherapy.

Andersson, H., Nieminen, K., Malmquist, A., & Grundström, H. (2024). Trauma-informed support after a complicated childbirth: An early intervention to reduce symptoms of post-traumatic stress and mental illness. Sexual and Reproductive Healthcare, 41, 101002.

Women who experience obstetric interventions and complications during childbirth have an increased risk of developing postnatal post-traumatic stress and mental illness. This study aimed to test the effect of a trauma-informed support programme based on psychological first aid (PFA) to reduce the mothers' symptoms of stress, fear of childbirth (FOC), anxiety and depression after a complicated childbirth. The study population consisted of women ≥ 18 years old who had undergone a complicated childbirth (i.e. acute or emergency caesarean section, vacuum extraction, child in need of neonatal care, manual placenta removal, obstetric anal sphincter injury, shoulder dystocia or major haemorrhage (>1000 ml)). A total of 101 women participated in the study, of whom 43 received the intervention. Demographic questions and three self-assessment instruments measuring stress symptoms, FOC, anxiety and depression were answered one to three months after birth. The women in the intervention group scored

significantly lower on the stress symptom scale, with a halved median score compared to the control group. There was no significant difference between the groups regarding FOC, depression and anxiety. Our results indicate that this PFA-based support programme might reduce post-traumatic stress symptoms in women who have gone through a complicated childbirth. With further studies in a larger population, this support programme has the potential to contribute to improved maternal care optimizing postnatal mental health.

Andersson, H., Svensson, E., Magnusson, A., *Holmqvist, R., & Zetterqvist, M.* (2024). Young adults looking back at their experiences of treatment and care for nonsuicidal self-injury during adolescence: a qualitative study. *Child and Adolescent Psychiatry and Mental Health, 18*, 16.

Nonsuicidal self-injury (NSSI) is associated with stigma, and negative attitudes among healthcare professionals toward NSSI have been reported. A person-centered approach that focuses on how individuals with lived experience of NSSI perceive the treatment and care they receive is invaluable in reducing barriers to help-seeking and improving treatment and mental healthcare services. The aim of the current qualitative study was to explore the perceptions of young adults when they look back upon their experiences of psychiatric treatment for NSSI during adolescence. Twenty-six individuals with lived experience of NSSI who were in contact with child and adolescent psychiatry during adolescence were interviewed. The interviews were analyzed using thematic analysis. Three main themes were developed: Changed perceptions in retrospect, The importance of a collaborative conceptualization and Lasting impression of the relationship. Participants' perception of themselves as well as the treatment changed over time. The importance of a joint understanding of NSSI and an agreed-upon treatment focus was emphasized. The relationship to the mental health professionals, and experiences of how NSSI was communicated, were salient several years later. Healthcare professionals need to communicate about NSSI in a respectful manner and include the perspective of the adolescent with lived experience of NSSI in a joint conceptualization of NSSI and treatment focus.

Andersson, P. A., Vartanova, I., Västfjäll, D., Tinghög, G., Strimling, P., Wu, J., ... & Eriksson, K. (2024). Anger and disgust shape judgments of social sanctions across cultures, especially in high individual autonomy societies. *Scientific Reports, 14*, 5591.

When someone violates a social norm, others may think that some sanction would be appropriate. We examine how the experience of emotions like anger and disgust relate to the judged appropriateness of sanctions, in a pre-registered

analysis of data from a large-scale study in 56 societies. Across the world, we find that individuals who experience anger and disgust over a norm violation are more likely to endorse confrontation, ostracism and, to a smaller extent, gossip. Moreover, we find that the experience of anger is consistently the strongest predictor of judgments of confrontation, compared to other emotions. Although the link between state-based emotions and judgments may seem universal, its strength varies across countries. Aligned with theoretical predictions, this link is stronger in societies, and among individuals, that place higher value on individual autonomy. Thus, autonomy values may increase the role that emotions play in guiding judgments of social sanctions.

Aspeqvist, E., Andersson, H., Korhonen, L., *Dahlström, Ö.*, & Zetterqvist, M. (2024). Measurement and stratification of nonsuicidal self-injury in adolescents. *BMC Psychiatry*, 24, 107.

Nonsuicidal self-injury (NSSI) is highly prevalent in adolescents. In survey and interview studies assessing NSSI, methods of assessment have been shown to influence prevalence estimates. However, knowledge of which groups of adolescents that are identified with different measurement methods is lacking, and the characteristics of identified groups are yet to be investigated. Further, only a handful of studies have been carried out using exploratory methods to identify subgroups among adolescents with NSSI. The performance of two prevalence measures (single-item vs. behavioral checklist) in the same cross-sectional community sample (n = 266, age M = 14.21, 58.3% female) of adolescents was compared regarding prevalence estimates and also characterization of the identified groups with lifetime NSSI prevalence. A cluster analysis was carried out in the same sample. Identified clusters were compared to the two groups defined using the prevalence measures. A total of 118 (44.4%) participants acknowledged having engaged in NSSI at least once. Of these, a group of 55 (20.7%) adolescents confirmed NSSI on a single item and 63 (23.7%) adolescents confirmed NSSI only on a behavioral checklist, while denying NSSI on the single item. Groups differed significantly, with the single-item group being more severely affected and having higher mean scores on difficulties in emotion regulation, self-criticism, number of methods, higher frequency of NSSI, higher rates of suicidal ideation and suicidal behavior and lower mean score on health-related quality of life. All cases with higher severity were not identified by the single-item question. Cluster analysis identified three clusters, two of which fit well with the groups identified by single-item and behavioral checklist measures. When investigating NSSI prevalence in adolescents, findings are influenced by the researchers' choice of measures. The present study provides some directions toward what kind of influence to expect given the type of measure used, both with

regards to the size of the identified group and its composition. Implications for future research as well as clinical and preventive work are discussed.

Aspeqvist, E., Münger, A.-C., Andersson, H., Korhonen, L., Baetens, I., *Dahlström, Ö.*, & Zetterqvist, M. (2024). Adolescents' experiences of a whole-school preventive intervention addressing mental health and nonsuicidal self-injury: A qualitative study. *BMC Public Health*, *24*, 3350.

Programs for mental health promotion and prevention of nonsuicidal self-injury (NSSI) in schools have gained increased focus during the last decades, but less is known about adolescents' experiences of such interventions. A whole-school preventive intervention targeting mental health and NSSI was delivered to six secondary schools. Adolescents participated in the Youth Aware of Mental Health program combined with an NSSI- focused psychoeducation module. Caregivers and teachers were given online psychoeducation on NSSI, and school health care staff were given a workshop on self-injury. Eleven group interviews (n = 65 participants) were conducted with adolescents (ages 13–15 years, 65% females) exploring participant experiences. Interviews were analyzed using thematic analysis and interpreted in light of a biopsychosocial understanding of adolescence. The analysis generated two main themes. The first theme, Mental health in the context of adolescence, centered around adolescents' conception of mental health, after having taken part in the intervention, framed in a context of coping with external stressors. The dilemma of autonomy versus help-seeking was also identified as part of the first main theme. The second theme, The who, when, what, and how of the intervention, described adolescents' experiences of the intervention. This theme included increased awareness and knowledge of mental ill-health. The participants generally agreed that the topics included are important to adolescents and emphasized that the content needs to be relatable. Several factors that influence how a school-based program is received by adolescents were identified, such as who should be targeted and when. Adolescents also identified challenges and gave recommendations for future similar projects. Adolescents generally perceived addressing mental health and NSSI in schools as important. Helpseeking initiatives need to be balanced against adolescents' need for autonomy when planning mental health prevention and intervention.

Asutay, E., Karlsson, H., & Västfjäll, D. (2024). Affect and impact neglect in sustainable decision-making. Emotion Review, 16(4), 276-278.

In a recent special section on Sustainability and Emotion, Schneider and van der Linden present how sustainability science could benefit from affective science to address important unanswered questions about the psychological and affective antecedents of people's engagement in relatively high-impact sustainable behaviors. Here, we underline the importance of combining the motivational role of positive affect with an impact-focused research agenda to understand the causal role of affect in sustainable decision-making and to develop communication strategies harnessing affective mechanisms to promote impactful sustainable behaviors. We present potential links connecting affective experience with perceived impact and adoption of sustainable behaviors. Finally, we argue for communication strategies aiming to enhance positive affect associated with high-impact behaviors.

Asutay, E., & Västfjäll, D. (2024). Affective integration in experience, judgment, and decision-making. Communications Psychology, 2, 126.

The role of affect in value-based judgment and decision-making has attracted increasing interest in recent decades. Most previous approaches neglect the temporal dependence of mental states leading to mapping a relatively well-defined, but largely static, feeling state to a behavioral tendency. In contrast, we posit that expected and experienced consequences of actions are integrated over time into a unified overall affective experience reflecting current resources under current demands. This affective integration is shaped by context and continually modulates judgments and decisions. Changes in affective states modulate evaluation of new information (affect-as-information), signal changes in the environment (affect-as-a-spotlight) and influence behavioral tendencies in relation to goals (affect-as-motivation). We advocate for an approach that integrates affective dynamics into decision-making paradigms. This dynamical account identifies the key variables explaining how changes in affect influence information processing may provide us with new insights into the role of affect in value-based judgment and decision-making.

Atzor, M.-C., Andersson, G., von Lersner, U., & Weise, C. (2024). Effectiveness of internet-based training on psychotherapists' transcultural competence: A randomized controlled trial. *Journal of Cross-Cultural Psychology, 55*, 260-277.

Treating culturally diverse patients (CDPs) presents considerable challenges for psychotherapists, including language barriers, differing beliefs, and insecurities. Improving their transcultural competence requires training, but empirical evidence is lacking. This 6-week randomized controlled trial evaluated the impact of standardized internet-based training on psychotherapists' transcultural competence (i.e., awareness, engagement, and handling challenges). Demographic data were collected before training. Transcultural competence was measured at pre-training, post-training, and 3-month follow-up. Training satisfaction was assessed at post-training and follow-up visits. In the guided training group (GTG; $n = 83$), psychotherapists received hands-on training with practical exercises, weekly knowledge assessments, and online feedback. The second condition comprised a non-guided control group (CG; $n = 90$) that received only text-based training. Primary analyses on both intent-to-treat ($n = 173$) and completer analyses ($n = 95$) indicated significant improvements in transcultural awareness and engagement after 6 weeks of training for both groups. Significant within-group improvements were noted, as evidenced by large Cohen's d effect sizes for both groups. No between-group differences were observed. Qualitative assessments revealed that GTG participants evaluated the training's concept and content significantly more positively than CG participants and felt significantly less insecure about treating CDPs. Such training could pave the way for the long-term development of innovative, culturally sensitive mental health care services that more effectively meet the needs of CDPs.

Bendelin, N., Gerdle, B., & Andersson, G. (2024). Hurdles and potentials when implementing internet-delivered acceptance and commitment therapy for chronic pain: A retrospective appraisal using the quality implementation framework. *Scandinavian Journal of Pain, 24*, 20220139.

Internet-delivered psychological interventions can be regarded as evidence-based practices and have been implemented in psychiatric and somatic care at primary and specialist levels. However, challenges as low adherence and poor routinization, have arisen during attempts to implement internet-delivered interventions in chronic pain settings. Internet-delivered Acceptance and Commitment Therapy (IACT) has been found to be helpful for chronic pain patients and might aid in developing pain rehabilitation services. However, the integration of IACT into standard health care has not yet been described from an

implementation science perspective. The aim of this hybrid 1 effectiveness-implementation study was to evaluate the process of implementing IACT in a pain rehabilitation setting, to guide future implementation initiatives. In this retrospective study we described actions taken during an implementation initiative, in which IACT was delivered as part of an interdisciplinary pain rehabilitation program (IPRP) at a specialist level clinic. All documents relevant to the study were reviewed and coded using the Quality Improvement Framework (QIF), focusing on adoption, appropriateness and sustainability. The QIF-analysis of implementation actions resulted in two categories: facilitators and challenges for implementation. Sustainability may be facilitated by sensitivity to the changing needs of a clinical setting and challenged by unfitting capacity building. Appropriateness might be challenged by an insufficient needs assessment and facilitated by aligning routines for communication with the clinic's existing infrastructure. Adoption may be facilitated by staff key champions and an ability to adapt to occurring hurdles. Possible influential factors, hypotheses and key process challenges are presented in a logic model to guide future initiatives. Sustainable implementation may depend on both the continuity of facilitating implementation actions and flexibility to the changing needs and interests of patients, caregivers and organization. We conclude that the use of theories, models and frameworks (TMF) as well as a logic model may ease design, planning and evaluation of an implementation process. Lastly, we suggest that IACT may be appropriate for IPRP when given before or after IPRP, focusing on psychiatric comorbidities.

Bergman Nordgren, L., Ludvigsson, M., Silfvernagel, K., Törnbage, L., Sävås, L., Söderqvist, S., Dinnetz, S., Henrichsén, P., Larsson, J., Ström, H., Lindh, M., Berger, T., & Andersson, G. (2024). Tailored internet-delivered cognitive behavior therapy for depression in older adults: a randomized controlled trial. *BMC Geriatrics*, 24, 998.

Depression is a common and serious problem in older adults, but few have access to psychological treatments. Internet-delivered Cognitive Behavioral Therapy (ICBT) has the potential to improve access and has been found to be effective in adults with depression. The aim of this study was to examine the effects of tailored ICBT for depression in older adults aged 65 years or older. We also investigated if cognitive flexibility could predict outcome. Following online recruitment from the community, included participants were randomly allocated to either ten weeks of clinician guided ICBT (n = 50) or to an active control group in the form of non-directive support (n = 51). Primary depression outcome was the Geriatric Depression Scale (GDS-15). Several secondary outcomes were used, such as the Beck Depression Inventory (BDI-II) and the Patient Health Questionnaire (PHQ-9). Both treatment and active control groups significantly

reduced their levels of depression, and the treatment group showed significantly greater improvement on the GDS-15 and BDI-II, but not on the PHQ-9. Between-group effect sizes as Cohen's d were 0.78 (CI95% 0.36-1.20) on the GDS-15 and 0.53 (CI95% 0.11-0.94) on the BDI-II. Tailored ICBT is superior to an active control for older adults with depression. Between-group effects were smaller than in previous RCTs, most likely because of the use of an active control condition. Cognitive flexibility did not predict outcome. We conclude that ICBT can be used for older adults with depression, and thus increase access to psychotherapy for this group.

Bergvall, H., Linde, J., Alfonsson, S., Sunnhed, R., Barber, J. P., Lundgren, T., Andersson, G., & Bohman, B. (2024). Quality of cognitive-behavioural therapy in routine psychiatric care: Therapist adherence and competence, and patient outcomes for depression and anxiety disorders. *BMC Psychiatry*, 24, 887.

Quality of care is essential for the dissemination of evidence-based practices, yet therapist adherence and competence are seldom assessed. We examined the quality of delivery of cognitive-behavioural therapy (CBT) in routine psychiatric care for depression and anxiety disorders, considering therapist adherence and competence, and therapy effectiveness, as well as their associations. Twenty-nine therapists recruited 85 patients with a principal diagnosis of depression or anxiety disorder from two routine psychiatric outpatient clinics in Stockholm, Sweden. Therapist adherence was assessed mid-CBT by observers and post-CBT by patients and therapists, respectively, using an instrument developed as part of the present study. Therapist competence was assessed using role-plays with a standardised patient. Patients rated symptoms, functional impairment, and global health pre- and post-CBT. Linear mixed models were used to analyse associations. Therapist adherence was high according to patients, moderate to high according to therapists, and moderate according to observers. Most therapists demonstrated competence in CBT, as assessed using the Cognitive Therapy Scale-Revised ($M = 40.5$, $SD = 6.5$; 76% passed the ≥ 36 points competence threshold). Patients improved significantly from pre- to post-CBT across outcome measures (Cohen's $ds = 0.80 - 1.36$). Neither therapist adherence nor competence was associated with patient outcomes. In routine psychiatric care, therapists delivered CBT with adherence, competence, and improvements for patients with depression and anxiety disorders, on par with previous research results in controlled settings. The implications for quality assessment and improvement are discussed.

Berman, A. H., Topooco, N., Lindfors, P., Bendtsen, M., Lindner, P., Molander, O., Kraepelin, M., Sundström, C., Talebizadeh, N., Engström, K., Vlaescu, G., Andersson, G., & Andersson, C. (2024). Transdiagnostic and tailored internet intervention to improve mental health among university students: Research protocol for a randomized controlled trial. *Trials*, 25, 158.

Emerging adulthood is often associated with mental health problems. About one in three university students report symptoms of depression and anxiety that can negatively affect their developmental trajectory concerning work, intimate relationships, and health. This can interfere with academic performance, as mood and anxiety disorders are key predictors of dropout from higher education. A treatment gap exists, where a considerable proportion of students do not seek help for mood and anxiety symptoms. Offering internet interventions to students with mental health problems could reduce the treatment gap, increase mental health, and improve academic performance. A meta-analysis on internet interventions for university students showed small effects for depression and none for anxiety. Larger trials are recommended to further explore effects of guidance, transdiagnostic approaches, and individual treatment components. This study will offer 1200 university students in Sweden participation in a three-armed randomized controlled trial (RCT) evaluating a guided or unguided transdiagnostic internet intervention for mild to moderate depression and anxiety, where the waitlist control group accesses the intervention at 6-month follow-up. Students reporting suicidal ideation/behaviors will be excluded and referred to treatment within the existing healthcare system. An embedded study within the trial (SWAT) will assess at week 3 of 8 whether participants in the guided and unguided groups are at higher risk of failing to benefit from treatment. Those at risk will be randomized to an adaptive treatment strategy, or to continue the treatment as originally randomized. Primary outcomes are symptoms of depression and anxiety. Follow-ups will occur at post-treatment and at 6-, 12-, and 24-month post-randomization. Between-group outcome analyses will be reported, and qualitative interviews about treatment experiences are planned. This study investigates the effects of a transdiagnostic internet intervention among university students in Sweden, with an adaptive treatment strategy employed during the course of treatment to minimize the risk of treatment failure. The study will contribute knowledge about longitudinal trajectories of mental health and well-being following treatment, taking into account possible gender differences in responsiveness to treatment. With time, effective internet interventions could make treatment for mental health issues more widely accessible to the student group.

Bertills, K., & Björk, M. (2024). Facilitating regular physical education for students with disability—PE teachers' views. Frontiers in Sports and Active Living, 6, 1400192.

The objective of this study is to describe how Physical Education (PE) teachers work to facilitate participation for students with disability in compulsory, mainstream inclusive, secondary school. Inclusive school-based Physical Education (PE) is an important context for students to share the benefits of physical activities with peers, especially for students with disability whose opportunities for participation in extracurricular physical activity are limited. Two focus group interviews were performed with eight experienced PE teachers who teach students with disability in regular PE. Qualitative content analysis was used to analyze the interviews. Two themes emerged, the importance of having a structured and welcoming environment and the need to adapt the PE environment. Student mastery experiences is emphasized and achieved by teaching approaches encouraging peer collaboration before physical performance and competition. Key aspects to participation for students with disabilities are inclusive mindsets, proper preparation, and adaptations. Special arrangements when participation in-class is not possible require regular and close teacher-student communication and, when needed, additional support. Experiences of participation are important matters for further advancement of equality and social inclusion for students with disability. Schools need to develop support structures to provide students with disability with “real-life” experiences that optimize participation.

Bertills, K., Elvstrand, H., & Lago, L. (2024). Praktisknära forskning och skolutveckling—en modell för samverkan. Venue, 26, 5.

Artikeln beskriver arbetsprocessen i det praktisknära ULF-projektet Tillgängliga lärmiljöer med fokus på skolans sociala miljö. Projektet består av sex olika lokala aktionsforskningsprojekt som skedde i samarbete mellan tre forskare vid Linköpings universitet och sex yrkesverksamma mellanstadielärare från tre kommuner. I artikeln diskuteras styrkor, utmaningar och framgångsfaktorer i en arbetsprocess som sker i växelverkan mellan ett övergripande forskningsprojekt och olika skolutvecklingsprojekt. Resultaten ger följande implikationer för hur vetenskap och beprövad erfarenhet kan samverka för att utveckla skolans verksamhet: Modellen för arbetsprocessen illustrerar ett framgångsrikt tillvägagångssätt som kan vägleda skolforskning såväl som lokala skolprojekt. Hållbara förändringar möjliggörs genom en gemensam kunskapsbas, noggranna förberedelser och kontinuerlig återkoppling under skolprojektets olika faser: kartläggning, genomförande och uppföljning. Forskarnas närvaro vid uppstart av skolprojekten ger projektledarna pondus att leda och tyngd åt det lokala skolprojektet, vilket förstärks med en skolledning som visar intresse och stöttar.

Kontinuerliga träffar med forskare/kollegor i samma situation erbjuder ett värdefullt sammanhang för inspiration, ledning, energi och styrka i den utmanande uppgiften att leda sina kollegor. Regelbunden återkoppling fördjupar kunskap, ger vägledning, stöd och nya perspektiv samt säkerställer att skolforskning och skolprojekt bibehåller fokus och utvecklas över tid. Inplanerad tid för kollegialt samarbete och reflektion med samma ledare under lång tid utvecklar möteskulturen till att bli mer strukturerad, fokuserad och nyanserad. Rektors stöd för att arbeta med en gemensam vision med tydliga mål som utgår från den egna verksamhetens utmaningar motiverar och engagerar personalen.

Beskow, J., & Sarkohi, A. (2024). Suicidalitet i siffror, nya tolkningar. I Sarkohi, A., & Beskow, J. (red.). *Ögonblick av suicidalitet*. Studentlitteratur.

Det finns näst intill oändligt med information om suicidalitet lokalt, internationellt och historiskt. Vi har valt ut några, för detta kapitel, särskilt relevanta bilder. Suicidstatistiken är väl utvecklad i Sverige, liksom i många andra västländer, och därmed relativt pålitlig. I övriga delar av världen pågår en metodutveckling som ännu lämnar mycket att önska. I en del länder räknar man inte ens antalet självmord. För en så rättvisande bild som möjligt och ökad jämförbarhet anges dels det absoluta antalet suicid, dels det relativa antalet, suicidtalet, det vill säga antalet suicid per 100 000 invånare, ibland fördelat på ålder och kön. Jämförelser försvåras av att suicidtalet i Världshälsoorganisationens (WHO) statistik är beräknat på hela befolkningen, vilket gör att barn under 15 år, en åldersgrupp som starkt varierar i storlek men sällan begår suicid, påverkar talen i stor utsträckning och minskar jämförbarheten. Sverige, som enbart beräknar suicidtalet på alla som är 15 år eller äldre (15+), får därför jämförelsevis högre dödstal än de länder som räknar suicidtalet på hela befolkningen. En annan svårighet vid jämförelser är att suicid enligt WHO och i de flesta andra länder bara omfattar de dödsfall där man är helt säker på att det verkligen är ett suicid. Möjligheten att klassificera ett dödsfall som ”osäkert” infördes 1969 (Socialstyrelsen, 2006), och andelen osäkra dödsfall har i Sverige varit påfallande hög, drygt 20 procent. År 2019 var det 19 procent av totalantalet (Nationellt centrum för suicidforskning och prevention, NASP, 2021). I statistik från många länder ligger andelen osäkra dödsfall lägre, ibland bara på några få procent. Vi måste kritiskt granska hur statistiken redovisas, analyseras och tolkas. Hänsyn bör alltid tas till historia samt till rådande kontext och kultur.

Beskow, J., & Sarkohi, A. (2024). Evolutionärt perspektiv på suicid. I Sarkohi, A., & Beskow, J. (red.). *Ögonblick av suicidalitet*. Studentlitteratur.

För att bättre förstå suicidalitet samt veta hur vi skulle kunna förebygga det måste vi se fenomenet utifrån olika perspektiv. Här görs ett försök att belysa det utifrån ett evolutionärt perspektiv. Evolutionen och samhällsutvecklingen påverkar människors livsvillkor och deras hälsa/ohälsa. Ohälsan kan i sin tur vara antingen en bakomliggande eller mellanliggande faktor som skulle kunna leda till suicidalitet. Genom en djupare förståelse av hur Homo sapiens utvecklades genom årmiljonerna kan vi få perspektiv på hur vi förhåller oss till oss själva och vår roll i relation till den övriga naturen och därmed också till liv, naturlig död eller suicidalitet. Vi kan alltså genom att förstå evolutionens grundläggande principer öka kvalitet och effektivitet i vårt evolutionära arbete och skapa både en önskvärd språkutveckling och till sist en ny form av suicidprevention som tar större hänsyn till vilka vi är och hur vi blivit sådana som vi är. Det handlar mycket om utvecklingen av synen på oss själva och vår plats i förhållande till övriga levande varelser och till naturen. I detta kapitel försöker vi bland annat redogöra för och resonera kring individens individuella utvecklingsmöjligheter (ontogener) samt kring effekten av samhällsutvecklingen på suicidaliteten. Vidare resonerar vi kring huruvida suicid går att ärva, och om det är ett mänskligt förekommande fenomen eller om det också förekommer hos djur, hur vi skapar vår värld genom den så kallade intersubjektiva väven och hur vårt byggande av mind, jaget och självet kan påverka vårt förhållningssätt och viljan att leva eller dö.

Beskow, J., & Sarkohi, A. (2024). Hjärnans struktur, funktion och dess betydelse vid suicidalitet. I Sarkohi, A., & Beskow, J. (red.). I *Ögonblick av suicidalitet*. Studentlitteratur.

Nervsystemet består av det perifera och det centrala nervsystemet. Det senare kallas också "hjärnan", och det är det som detta kapitel huvudsakligen handlar om. Hjärnans struktur och funktion, både neurobiokemisk, perceptuell och kognitiv, påverkar vår hälsa. Vår perception (sinnesförnimmelserna) är hjärnans input för bearbetningen inne i hjärnan samt de exekutiva funktionerna, det vill säga hjärnans output. Dessa processer påverkar vår problemlösningsförmåga och anpassningsförmåga och i slutändan vår hälsa. Sämre problemlösningsförmåga, missanpassning och bristande socialt engagemang kan i värsta fall leda till suicidalitet. Vi behöver därför utöka vår förståelse för hjärnans struktur och funktion. I detta kapitel kommer vi att i korta drag beskriva nervsystemet och våra olika sinnen samt bland annat presentera det så kallade sociala engagemangssystemet. Det senare är en grundförutsättning för skapandet av ett

välfungerande socialt band, ett välmående och därmed för det suicidpreventiva arbetet. Ett utökat och förbättrat socialt band kan bidra med ny energi och ny information, vilka har betydelse för att man ska kunna hantera suicidalitet på ett rationellt sätt. I detta kapitel diskuterar vi betydelsen av socialt och psykologiskt revir i sociala sammanhang samt i arbete med suicidala personer.

Beskow, J., & Sarkohi, A. (2024). Ny förståelseram för suicidalitet I Sarkohi, A., & Beskow, J. (red.). *Ögonblick av suicidalitet*. Studentlitteratur.

Genom denna bok vill vi ge en djupare förståelse för suicidalitetens natur. Därför har vi valt ordet "förståelseram" i titeln på detta kapitel. Vi har undvikit referenser; de finns på andra ställen i boken. Boken har tillkommit som en reaktion på den sänkning av suicidtalet som skett under åren 1980–2000. Då planade suicidtalet ut och nu sjunker det mycket långsammare än tidigare. Samtidigt har avtabueringen gjort det möjligt att öppet tala om suicidalitet, ge det stöd som behövs till suicidala personer och deras närstående samt inrikta forskningen på delvis nya områden. Alla som kommer i kontakt med suicidalitet, de som tänker på suicid som en utväg för egen del och de som möter dessa personer bör ha en gemensam föreställningsram. En sådan struktur underlättar orientering, stabilitet och trygghet. Det kommer att ta tid innan vi är där. Detta är bara början. Hur mycket av föreställningsramen som ska presenteras för en patient samt när och hur är en fråga om tajmning. I början är det viktigt att arbeta konkret här och nu med stöd av ramen och de olika modellerna i boken. På sikt behöver suicidala personer få lära sig förståelseramen på ett eller annat sätt, som stöd i att självständigt förstå och hantera sina liv. I detta kapitel försöker vi redogöra för förståelseramen sammanfattad i tolv principer, samt ge tips till hjälparen om hur man ska bemöta suicidala personer och tips till den suicidale om hur hen ska förhålla sig till sig själv och sina suicidtankar. Slutligen ges tips om hur man ska gå till väga för att söka hjälp.

Beukes, E., Andersson, G., & Manchain, V. (2024). The indirect effect of an internet-based intervention on third-party disability for significant others of individuals with tinnitus. *Audiology Research*, 14, 809–821.

This study aimed to investigate whether Internet-based cognitive behavioural therapy intervention (ICBT) for individuals with tinnitus had an indirect effect on the third-party disability noticed by significant others (SOs). Significant Others Questionnaire (CTSOQ). Individuals with tinnitus completed standardized self-reported outcome measures for tinnitus severity, anxiety, depression, insomnia, hearing-related quality of life, tinnitus cognitions, hearing disability, and hyperacusis. In total, 194 pairs of individuals with tinnitus and their SOs

participated. The impact of third-party disability experienced by SOs was significantly reduced after individuals with tinnitus undertook the ICBT intervention ($d = 0.41$). This reduced SOs with severe difficulties from 52% to 35%. The remaining impact was mild for 30% and moderate for 35%. SOs with higher baseline difficulties and SOs who were partners (e.g., spouses) were less likely to notice indirect benefits from intervention undertaken by their family members. There was a moderate positive correlation between the post-intervention CTSOQs and the clinical variables of tinnitus severity and depression. Third-party disability may be reduced as an indirect effect of individuals with tinnitus undertaking ICBT. Including SOs of individuals with tinnitus within the rehabilitation process may add additional benefits, and such involvement should be encouraged.

Blomberg, S., Rosander, M., & Einarsen, S. V. (2024). Role ambiguity as an antecedent to workplace bullying: Hostile work climate and supportive leadership as intermediate factors. Scandinavian Journal of Management, 40, 101328.

Previous studies have shown role stress to be an important antecedent of workplace bullying. The present study investigated when and how a long-term effect of role ambiguity on exposure to bullying may be present. Based on the work environment hypothesis, we hypothesized that (a) there is a long-term effect of role ambiguity on exposure of bullying, (b) that this relationship is mediated by hostile work climate, and (c) moderated by supportive leadership. Using a three-wave design, with a time lag of 41–45 months, we showed support for all three hypotheses. The study underscores the importance of clear work-related roles as well as the importance of supportive leadership to prevent the onset of bullying following role stress and hostile climates.

Della Casa, V., Gubello, A., Malmquist, A., Mezzalana, S., Bonato, M., Simonelli, A., Gatta, M. & Miscioscia, M. (2024). Minority stress, self-awareness, and coping strategies during the Covid-19 pandemic among Italian transgender young adults. Healthcare, 12, 132.

The security measures implemented in response to the COVID-19 emergency have caused complex consequences. The aim of the present study is to examine the repercussions of the pandemic on individuals belonging to gender identity minority groups, who have experienced heightened levels of stress in comparison to the general population. Online interviews with 12 transgender participants who resided in Italy during the pandemic were conducted and subsequently analyzed following the thematic analysis methodology. The majority of the participants reported an increase in stress levels primarily attributed to the lack of acceptance

and support within their familial environments, obstacles encountered in accessing specialized healthcare services, and a lack of support from the broader LGBTQ+ community. Despite these challenges, several participants developed effective coping strategies and a subset of them also benefited from multiple resilience factors, including familial support and assistance from mental health professionals. The outcomes of the present study indicate that the COVID-19 pandemic, while fostering certain protective factors within this population, has also given rise to new and critical mental health concerns. These findings hold significant implications for professionals working with transgender populations, highlighting the necessity of addressing these emerging mental health issues.

Della Casa, V., Malmquist, A., & Mezzalana, S., Miscioscia, M. (2024). The role of family support for the well-being of Italian LGBTQ+ young adults during the Covid-19 pandemic: A qualitative study. *LGBTQ+ Family, 20*, 216-232.

Family acceptance or rejection has mediating effects on the mental health of LGBTQ+ young adults. Restrictive measures imposed during the COVID-19 pandemic forced many of these individuals to exclusively interface with their family of origin, with significant consequences on their psychological well-being. This study aims to explore, from a qualitative perspective, the subjective experience of Italian LGBTQ+ young adults during the COVID-19-related home isolation. An online semi-structured interview with 13 questions was administered to a sample of 25 participants. Inclusion criteria consisted of being aged 18 years or older and having spent at least one of the three pandemic waves with the family of origin in Italy. The interviews have been processed using the Thematic Analysis methodology. The findings of the present work showed that Italian LGBTQ+ young adults perceived increased distress due to a lack of privacy and acceptance from their family members, which led to forced coming-out and repression of free expression. However, some participants perceived greater psychological well-being because they experienced the family environment as safe and supportive to explore their minority identities. The presence of coping strategies also emerged, such as resilience and avoidance.

DiLuigi, G., Claréus, B., *Mejias Nihlén, T., Malmquist, A., Wurm, M. & Lundberg, T.* (2023). Psychometric exploration of the Swedish translation of the Sexual Orientation Microaggressions Scale (SOMS), and a commentary on validity of the construct of microaggressions. *Journal of Homosexuality, 71*, 3230-3253.

The aim of the present study was to assess the psychometric properties of a Swedish translation of the Sexual Orientation Microaggressions Scale (SOMS) in a convenience sample of 267 Swedish LGB+ people (Mean age = 36.41). Testing suggested some strengths in terms of factor structure and 2-week test-retest reliability ($ICC > .79$). Also, internal consistency ($\alpha = .80-.91$) and convergent validity were supported for most subscales. However, the Assumption of Deviance subscale was associated with low response variability and internal consistency ($\alpha = .35$), and the correlational pattern between the Environmental Microaggressions subscale and mental health variables diverged from the overall trend. Furthermore, measurement invariance between homo- and bisexual participants was not supported for most subscales, and although microaggressions would be theoretically irrelevant to a small comparison sample of heterosexual people ($N = 76$, Mean age = 40.43), metric invariance of the Environmental Microaggressions subscale was supported in comparison to LGB+ people. We argue that these limitations suggest a restricted applicability of the SOMS in a Swedish context, and this has consequences for the definition and operationalization of the construct of microaggressions as a whole. Therefore, more research on the latent properties of microaggressions in Swedish as well as in other contexts is required.

Doell, K. C., Todorova, B., Vlasceanu, M., Bak Coleman, J. B., Pronizius, E., Schumann, P., Azevedo, F., Patel, Y., Berkebile-Wineberg, M. M., Brick, C., Lange, F., Grayson, S. J., Pei, Y., Chakroff, A., van den Broek, K. L., Lamm, C., Vlasceanu, D., Constantino, S. M., Rathje, S., Goldwert, D., *Västfjäll, D., ... Van Bavel, J. J.* (2024). The International Climate Psychology Collaboration: Climate change-related data collected from 63 countries. *Scientific Data, 11*, 1066.

Climate change is currently one of humanity's greatest threats. To help scholars understand the psychology of climate change, we conducted an online quasi-experimental survey on 59,508 participants from 63 countries (collected between July 2022 and July 2023). In a between-subjects design, we tested 11 interventions designed to promote climate change mitigation across four outcomes: climate change belief, support for climate policies, willingness to share

information on social media, and performance on an effortful pro-environmental behavioural task. Participants also reported their demographic information (e.g., age, gender) and several other independent variables (e.g., political orientation, perceptions about the scientific consensus). In the no-intervention control group, we also measured important additional variables, such as environmentalist identity and trust in climate science. We report the collaboration procedure, study design, raw and cleaned data, all survey materials, relevant analysis scripts, and data visualisations. This dataset can be used to further the understanding of psychological, demographic, and national-level factors related to individual-level climate action and how these differ across countries.

Dore, R. A., Jing, M., Taylor, G., Madigan, S., Samudra, P. G., Sundqvist, A. S., & Xu, Y. (2024). Digital media use and language development in early childhood. In D. A. Christakis & L. Hale (Eds.), *Handbook of children and screens: Digital media, development, and well-being from birth through adolescence*. (pp. 39-45). Springer.

The pervasiveness of digital media and the importance of language skills underscore a pressing need to understand the role of media in language development. Historically, research has focused on the quantity of children's media use but there has been a recent focus on content (i.e., the kinds of media that children use), context (i.e., who children use media with), and interactivity (i.e., whether children watch content passively or can respond contingently) as well as technoference (i.e., adult technology use around children). Meta-analyses suggest that while associations between media quantity and early language skills are either negative or null, both educational content (intending to convey knowledge) and co-use (use with others) are often associated with stronger skills, whereas adult technology use can disrupt parent-child interactions. Some researchers have also argued that interactive media that can respond contingently to children may support language, although more research is needed. Here, we focus on these aspects of media use and their associations with children's language development in early childhood (0-6 years). We review the current literature, propose important directions for future research, and provide recommendations for researchers in this area and for various stakeholder groups. The pervasiveness of digital media and the importance of language skills underscore a pressing need to understand the role of media in language development. Historically, research has focused on the quantity of children's media use but there has been a recent focus on content (i.e., the kinds of media that children use), context (i.e., who children use media with), and interactivity (i.e., whether children watch content passively or can respond contingently) as well as technoference (i.e., adult technology use around children). Meta-analyses suggest that while associations between media quantity and early language skills

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Doukani, A., Quartagno, M., Sera, F., Free, C., Kakuma, R., Riper, H., Kleiboer, A., Cerga-Pashoja, A., Botella, C., van Schaik, D., Chevreul, K., Hazo, J.-B., Matynia, M., Krieger, T., Topooco, N., Berger, T., Draisma, S., Mathiasen, K., *Vernmark, K.*, Urech, A., *Andersson, G.*, Baños, R., Araya, R., & Titzler, I. (2024). Comparison of the working alliance in blended cognitive behavioral therapy and treatment as usual for depression in Europe: Secondary data analysis from the E-COMPARED randomized controlled trial. *Journal of Medical Internet Research*, 26, e47515.

Increasing interest has centered on the psychotherapeutic working alliance as a means of understanding clinical change in digital mental health interventions in recent years. However, little is understood about how and to what extent a digital mental health program can have an impact on the working alliance and clinical outcomes in a blended (therapist plus digital program) cognitive behavioral therapy (bCBT) intervention for depression. This study aimed to test the difference in working alliance scores between bCBT and treatment as usual (TAU), examine the association between working alliance and depression severity scores in both arms, and test for an interaction between system usability and working alliance with regard to the association between working alliance and depression scores in bCBT at 3-month assessments. We conducted a secondary data analysis of the E-COMPARED (European Comparative Effectiveness Research on Blended Depression Treatment versus Treatment-as-usual) trial, which compared bCBT with TAU across 9 European countries. Data were collected in primary care and specialized services between April 2015 and December 2017. Eligible participants aged 18 years or older and diagnosed with major depressive disorder were randomized to either bCBT (n=476) or TAU (n=467). bCBT consisted of 6-20 sessions of bCBT (involving face-to-face sessions with a therapist and an internet-based program). TAU consisted of usual care for depression. The main outcomes were scores of the working alliance (Working Alliance Inventory-Short Revised-Client [WAI-SR-C]) and depressive symptoms (Patient Health Questionnaire-9 [PHQ-9]) at 3 months after

randomization. Other variables included system usability scores (System Usability Scale-Client [SUS-C]) at 3 months and baseline demographic information. Data from baseline and 3-month assessments were analyzed using linear regression models that adjusted for a set of baseline variables. Of the 945 included participants, 644 (68.2%) were female, and the mean age was 38.96 years (IQR 38). bCBT was associated with higher composite WAI-SR-C scores compared to TAU ($B=5.67$, 95% CI 4.48-6.86). There was an inverse association between WAI-SR-C and PHQ-9 in bCBT ($B=-0.12$, 95% CI -0.17 to -0.06) and TAU ($B=-0.06$, 95% CI -0.11 to -0.02), in which as WAI-SR-C scores increased, PHQ-9 scores decreased. Finally, there was a significant interaction between SUS-C and WAI-SR-C with regard to an inverse association between higher WAI-SR-C scores and lower PHQ-9 scores in bCBT ($b=-0.030$, 95% CI -0.05 to -0.01; $p=.005$). To our knowledge, this is the first study to show that bCBT may enhance the client working alliance when compared to evidence-based routine care for depression that services reported offering. The working alliance in bCBT was also associated with clinical improvements that appear to be enhanced by good program usability. Our findings add further weight to the view that the addition of internet-delivered CBT to face-to-face CBT may positively augment experiences of the working alliance.

Eimontas, J., Gegieckaitė, G., Arcimavičiūtė, L., Lapė, D., Amaliūtė, G., Andersson, G., & Lesinskas, E. (2024). The role of significant others in the process of internet-delivered intervention for tinnitus: a qualitative study. *Procedia Computer Science*, 248, 97-103.

Internet-delivered interventions for tinnitus have been found to be efficacious in reducing tinnitus distress. Additionally, various client, therapist, and intervention factors related to good outcomes in internet-delivered interventions have been studied. However, the role that other people play in the processes of internet-delivered treatments has received less attention. The aim of this study was to investigate how participants receiving an internet-delivered psychological treatment for tinnitus perceived the role of significant others in the process of their treatment. In total, 14 participants of an internet-delivered CBT and mindfulness-based psychological interventions for tinnitus were interviewed using a semi-structured interview after the completion of treatment. They were asked a series of questions, including if they told anyone about their participation in the intervention. Interviews were recorded, transcribed, and then coded using the method of thematic analysis. Two main themes with three and four sub-themes for each main theme were derived from the data. A) Other people know: 1. Support; 2. Neutrality; 3. Autonomy; 4. Misunderstood. B) Other people do not know: 1. Underappreciated; 2. Hiding; 3. Stigma. Results show that other people played various roles in the participants' efforts to complete the internet-

delivered intervention. Some themes were found to be closely related to tinnitus, whereas others were more general. Other people may play a significant role in the treatment process when engaging in internet-delivered interventions, whether actively or passively, as reported by the participants. Stigma and previous negative experiences of not being understood after sharing information about tinnitus were among the few of the reasons for not involving others. In contrast, participants also talked about the positive impact of surrounding people who encouraged and supported their participation in the intervention. Further studies should examine how significant others may impact the engagement with the intervention and possibly the overall effects on treatment outcome. Social support has been shown to be an important factor in treatment success in previous studies. The present study demonstrated participants' experiences with involving significant others with their tinnitus treatment. Strategies for how to meaningfully include surrounding people in internet-delivered treatments need to be investigated as this could increase treatment efficacy.

Erlandsson, A., Dickert, S., Moche, H., Västfjäll, D., & Chapman, C. (2024). Beneficiary effects in prosocial decision making: Understanding unequal valuations of lives. European Review of Social Psychology, 35, 293–340.

To understand human prosocial behaviour, one must consider not only the helpers and the requesters, but also the characteristics of the beneficiaries. To this aim, this article reviews research on beneficiary effects in prosocial decision making, which implies that some human lives are valued higher than others. We focus on eight beneficiary attributes that increase willingness to help: (1) Temporal proximity, (2) Young age, (3) Female gender, (4) Misery, (5) Innocence, (6) Ingroup, (7) Identifiability (8) High proportion. We demonstrate that different psychological mechanisms explain different beneficiary effects, that the size and direction of beneficiary effects varies as a function of response mode (separate evaluation, joint evaluation, or forced choice), and outcome measure (attitudes or helping behaviour). We propose that beneficiary attributes differ in their evaluability, justifiability, and prominence, and conclude by discussing theoretical, moral, and applied aspects of beneficiary effects.

Falkenström, F., Bjerén, J., Björklund, F., *Holmqvist, R.*, & Ekeblad, A. (2024). Patient attachment and reflective functioning as predictors for therapist in-session feelings. *Journal of Counseling Psychology*, *71*, 190–201.

Therapists' in-session feelings in psychotherapy can be seen as indications of the development of the therapeutic relationship and the therapeutic process. To manage them appropriately, it is important to know to what extent they may be influenced by patients' pretreatment characteristics. This study aims to improve the understanding of therapists' emotional reactions in the psychotherapeutic setting by investigating if patients' pretreatment mentalization ability and attachment style predicted therapist in-session feelings. In a sample of 87 therapy dyads treated with interpersonal psychotherapy and cognitive behavioral therapy for depression, patient attachment was measured using self-reported Experiences in Close Relationships (ECR) and mentalization using Reflective Functioning (RF). ECR and RF were hypothesized to predict therapist feelings measured by the Feeling Word Checklist-24 at different treatment phases over the full course of treatment. Treatment method, patient age, gender, and pretreatment depression were evaluated as potential confounders. Multilevel modeling was used to analyze the data. Lower RF in patients predicted more negative therapist feelings in the mid- to late-treatment phases and less positive feelings in the late-treatment phase. Self-reported attachment anxiety or avoidance did not predict therapist feelings. Findings indicate that patients' ability to mentalize is important to consider when conducting psychotherapy, as it can influence therapists' feelings in the therapeutic process. Limitations of the present study's approach are discussed, and directions for future research are considered.

Ferm, M., *Lindegaard, T.*, & *Sarkohi, A.* (2024). Att leva i dödsskugga – närståendes erfarenheter av suicidalitet. I *Sarkohi, A.*, & *Beskow, J.* (red.). *Ögonblick av suicidalitet*. Studentlitteratur.

I detta kapitel beskriver också vanliga reaktioner på suicid, att leva vidare efter självmord, efterlevandes reaktioner på det mest fruktade beskedet, kris och sorgreaktioner samt sorgbearbetning och råd till medmänniskor. Vidare går vi igenom Margits egna erfarenheter av suicid som förälder till sonen Martin. Martin, född 1971 i Peru, adopterades till Margits familj när han var drygt fyra månader gammal och blev deras tredje barn. När de i början av 1990-talet sökte hjälp inom vården bedömdes Martin ha en depression. Under nära två år hade Martin tankar om att ta sitt liv. Familjen sökte hjälp och gjorde allt de kunde, men det räckte inte. I december 1992 tog Martin sitt liv, 21 år gammal. Att vara närstående efter det att en nära anhörig gjort suicidförsök eller tagit sitt liv är ett svårt psykiskt trauma, som tar lång tid att läka. Det är många som berörs när en

person tar sitt liv eller försöker att göra det. Undersökningar visar att minst fem närstående i genomsnitt berörs av en fullbordad suicid eller suicidförsök. För Sveriges del innebär det årligen cirka 100 000 närstående till personer som suiciderat eller försökt suicidera. Att endast en handfull individer berörs är dessutom lågt räknat, ofta berörs betydligt fler och under lång tid. Förutom att återge Margits egen berättelse om att leva i självmordets närhet försöker vi beskriva närståendes vanligaste reaktioner på suicid samt hur man kan gå vidare efter ett suicid. Slutligen ges en del konkreta råd om hur man kan stötta någon som sörjer en anhörig som gått bort i suicid.

Ferm, M., Söderberg, K., & Sarkohi, A. (2024). Suicidalitet och patientsäkerhet. I Sarkohi, A., & Beskow, J. (red.). *Ögonblick av suicidalitet. Studentlitteratur*.

Omhändertagandet av patienter som söker vård på grund av psykisk ohälsa bör förbättras på olika sätt, bland annat behöver vårdkvaliteten säkerställas, samarbetet med patienter, deras närstående och andra vårdgrannar utökas samt forskning och fortbildning bli vanligare. Ett välfungerande patientsäkerhetsarbete kan leda till minskat lidande och minskad mortalitet i förtid bland annat genom suicid. Det bidrar också till att minska samhällskostnaderna. Patientsäkerhetsarbetet bör ses som en del i det suicidpreventiva arbetet. Ett aktivt arbete med patientsäkerheten innebär en bättre, tryggare och likvärdig vård för suicidala patienter. Med utgångspunkt i patientsäkerhetsarbete presenterar vi en översiktlig genomgång av patienters rättigheter i lagar och föreskrifter. Vidare argumenterar vi för att patientsäkerhetsarbetet generellt bör övergå från re-aktivt till pro-aktivt systemtänkande samt att tidiga uttryck för suicidalitet bör uppmärksammas. Suicidriskbedömningar, som inkluderar alltmer av den suicidala personens egen bearbetning och förståelse av sin suicidalitet, har ett terapeutiskt inslag och bör på sikt ge säkrare bedömningar. Därutöver beskrivs metoder och verktyg som kan användas i patientsäkerhetsarbetet. En aktuell lägesrapport om hur det ser ut i Sverige i dag samt en beskrivning av kunskaps- och organisationsutveckling i framtiden finns med, liksom förbättringsförslag från författarna.

Fischer, V. J., Andersson, G., Billieux, J., Infanti, A., & Vögele, C. (2024). The role of emotion regulation strategies for sexual function and mental health: a cluster analytical approach. *Journal of Sex & Marital Therapy*, 50, 123-136.

We investigated distinct profiles in emotion regulation strategies (reappraisal and suppression) and their associations with sexual function and mental health. The online survey sample consisted of 5436 adult participants. The gender stratified

cluster analysis resulted in a four-cluster solution for both men and women. Better sexual function and mental health scores were found for participants with high cognitive reappraisal and low expressive suppression. High expressive suppression was associated with higher anxiety and depression and worse sexual function. Sexological care should take into account the assessment of emotion regulation abilities and emotion regulation training interventions to support reappraisal strategies.

Fischer, V. J., Holz, M. R., Billieux, J., Andersson, G., & Vögele, C. (2024). Web-based emotion regulation training for sexual health: Randomized controlled trial. *JMIR Formative Research*, 8, e50850.

Effective emotional regulation (ER) skills are important for sexual function, as they impact emotional awareness and expression during sexual activity, and therefore, satisfaction and distress. Emotion regulation interventions may offer a promising approach to improve sexual health. Web-based emotion regulation may be a therapeutic strategy for men and women with sexual health concerns. Nevertheless, there is a scarcity of intervention trials investigating its effects in this context, much less using the internet. This study aims to investigate the effects of a web-based emotion regulation training program for sexual function in both men and women. The participants were recruited based on their self-reported sexual problems, which for men was defined by a score of <25 on the International Index Erectile Function (IIEF) and for women by a score of <26.55 on the Female Sexual Function Index (FSFI). The final sample included 60 participants who were randomized to either a web-based emotion regulation training for sexual function or to a waitlist control group. The treatment consisted of an 8-week web-based emotion regulation training for sexual function. The participants were assessed at baseline, post intervention, and the 3-month follow-up. Of the 60 participants included, only 6 completed all 3 assessment points (n=5, 20% in the treatment group and n=1, 5% in the waitlist control group) after receiving the intervention. At follow-up, there were no significant differences between groups in any measure. Among the intervention completers, large-to-moderate within-group effect sizes were observed between the assessment points on measures of emotion regulation, depression, lubrication, orgasm, thoughts of sexual failure, and abuse during sexual activity. The adherence rate was very low, limiting the generalizability of the findings. Participants who completed the intervention showed improvements in both sexual function domains and emotion regulation. Nonetheless, due to a high dropout rate, this trial failed to collect sufficient data to allow for any conclusions to be drawn on treatment effects.

Fors, M., Öberg, B., Enthoven, P., Schröder, K., Hesser, H., Hedevik, H. & Abbott, A. (2024). Are illness perceptions and patient self-care enablement mediators of treatment effect in best practice physiotherapy low back pain care? Secondary mediation analyses in the BetterBack trial. *Physiotherapy Theory and Practice*, 40, 1737–1750.

A best practice physiotherapy model of care (BetterBack MoC) for low back pain (LBP) aimed to improve patients' illness perceptions and self-care enablement, according to the Common-Sense Model of Self-Regulation (CSM). To confirm if illness perceptions and patient self-care enablement, in line with the CSM, are mediators of treatment effects on disability and pain of the BetterBack MoC for patients with LBP compared to routine primary care. A secondary aim was to explore if illness perceptions and patient self-care enablement are mediators of guideline adherent care. Pre-planned single mediation analyses tested whether hypothesized mediators at 3 months mediated the treatment effect of the MoC (n = 264) compared to routine care (n = 203) on disability and pain at 6 months. Secondary mediation analyses compared guideline adherent care with non-adherent care. No indirect effects were identified. The BetterBack intervention did not have superior effects over routine care on the hypothesized mediators. Illness perceptions and self-care enablement were significantly associated with disability and pain at 6 months. Secondary analyses showed significant indirect effects of guideline adherent care through tested mediators. Despite no indirect effects, patients' illness perceptions and self-care enablement were associated with disability and back pain intensity outcomes and are potentially relevant treatment targets.

Frick, M. A., Hesser, H., & Sonuga-Barke, E. (2024). Pervasive versus situational childhood ADHD: latent classes and their clinical characteristics, based on parent and teacher ratings in a large longitudinal population sample. *European Child and Adolescent Psychiatry*, 33, 2253–2256.

Attention-deficit/hyperactivity disorder (ADHD) diagnoses require symptoms to be present in two settings. Low levels of concordance between symptoms rated at home and school raise questions regarding this approach. The aim was to examine whether there are sub-groups with context-specific expressions of ADHD symptoms (i.e., at home or school only) with clinically significant problems sufficient to support a new diagnostic formulation. We applied latent class transition analysis to parent and teacher data (N = 10,476) from the Avon Longitudinal Study of Parents and Children (ALSPAC), collected at ages 8, 10, and 20 years. We examined the short-term stability of emergent classes and their

childhood and adult-associated risk profiles. In addition to an Unaffected class (~ 45%), there was a Pervasive Combined class with elevated inattentive and hyperactive/impulsive symptoms at both home and school (~ 11%) and three classes with situational expressions; School Combined (~ 9%), Home Combined (~ 18%), and School Inattentive (~ 16%). Stability ranged from 0.27 to 0.78. The Pervasive Combined class was most symptomatic and impaired. School inattentive also displayed clinical symptom levels, whereas the School and Home Combined classes displayed subclinical levels. Different profiles regarding sex, cognition, conduct problems, and substance use emerged for the three situational classes. Distinct groupings of pervasive and situational ADHD expressions are identifiable in the general population. The isolation of a stable and burdensome Pervasive Combined class lends support to the current diagnostic approach. However, there are indications of situational expressions of ADHD with clinical symptom levels and associated difficulties.

Garcia, D. (2024). The big, the dark, and the biopsychosocial shades of harmony: Personality traits and harmony in life. Behavioral Sciences, 14, 873.

Our current understanding of the relationship between personality traits and subjective well-being, or happiness, is limited to the conceptualization of subjective well-being being as life satisfaction and a positive affective experience (i.e., the presence of positive emotions and the absence of negative ones). Thus, lacking the sense of acceptance, balance, adaptation, and self-transcendent unity (i.e., harmony in life) that is appreciated as part of the good life in many ancient and modern cultures. Moreover, most studies use the Big Five Model to understand which personality traits predict subjective well-being. Here, I examine the predictive power of personality on harmony in life using the Big Five Model, the Dark Triad, and Cloninger's Biopsychosocial Model. The present study utilized past published data from three cross-sectional studies. In each separate sample, participants self-reported personality by answering the Big Five Inventory (N1 = 297), or the Short Dark Triad (N2 = 1,876), or the Temperament and Character Inventory (N3 = 436). All participants (N Total = 3,698) answered to the Harmony in Life Scale. The traits in the Biopsychosocial Model explained the highest variance in harmony in life ($R^2 = .435$, $F(7, 428) = 47.136$, $p < .001$), followed by the Big Five ($R^2 = .341$, $F(5, 291) = 30.110$, $p < .001$) and the Dark Triad ($R^2 = .096$, $F(3, 1872) = 66.055$, $p < .001$). The key significant predictors were Self-Directedness, Self-Transcendence, and Harm Avoidance from the Biopsychosocial Model, and Agreeableness, Conscientiousness, and Neuroticism from the Big Five. Narcissism was the only predictor of the Dark Triad, albeit this relationship was very small. The findings underscore the importance of a multidimensional approach for understanding subjective well-being and the

inclusion of harmony in life as its third component. The Biopsychosocial Model's inclusion of both temperament and character dimensions provided the most comprehensive understanding of harmony in life. While positive traits like Agreeableness, Self-Directedness, and Self-Transcendence enhance harmony, negative traits like Neuroticism and Harm Avoidance diminish it. Moreover, research only including “dark traits” might give the impression that an inflated sense of self-importance, a deep need for admiration, and a lack of empathy for others (i.e., Narcissism) is predictive of balance in life. However, this association was not only extremely low, but it can be interpreted as misguided since the results using the other models showed that helpful, empathetic, kind and self-transcendent behavior predicted harmony. These results suggest that interventions aimed at enhancing well-being should consider a broad range of personality traits, especially those that are not present in the Big Five Model, thus, advocating for a biopsychosocial approach to well-being interventions.

Garcia, D., Cloninger, K. M., Granjard, A., Lester, N., & Cloninger, C. R. (2024). Personality and health: Understanding the whole person (body, mind, and psyche). In M. Frota, K. Rolim, A. Brilhante, & T. Daniele (Eds.), Arte, Humanização e Saúde. (pp. 47-85). Rio de Janeiro: PoD Editora. [Brazilian Portuguese].

As most practitioners know, each person makes their own choices and has their own unconscious emotional, thought, and behavioral patterns (i.e., their own outlook). This can make it difficult for many of us to follow good advice and make the right choices regarding our own health. Matters get more complicated by the fact that health is not merely the absence of disease but rather the presence of physical, mental, social, and spiritual well-being. These health dimensions are interconnected and connected to society's health and Earth's ecology. Therefore, we need a scientific biopsychosocial approach to who we are, what motivate us, how we find meaning and creativity and intelligently adapt to life—that is a scientific holistic model of our personality. In this chapter, we briefly describe the theoretical foundation and usefulness of Cloninger's biopsychosocial model of personality, which in contrast to other models of personality is based on the scientific study of the evolution of the human brain and therefore comprise all aspects of being human as a complex adaptive system: body, mind, and psyche. Essentially, human personality has evolved across three major learning and memory systems in a long series of steps through evolution: the procedural system, responsible for behavioral conditioning of habits and skills; the propositional system, responsible for intentionality including executive self-control for attaining goals, semantic learning of facts, and abstract symbolization; and the episodic system, responsible for self-awareness including a person's own life narrative and identity. We also present a cross-sectional study aiming to show

how investigating combinations of personality traits, rather than single traits, is a better approach to understand personality's role on self-reported health, subjective well-being, flourishing, and the extent to which people feel hindered by their own physical, mental, and social health.

Garcia, D., Kazemitabar, M., Björk, E., Medeiros da Costa Daniele, T., Mihailovic, M., Cloninger, K. M., Frota, M. A., & Cloninger, C. R. (2024). Nursing students' personality (temperament and character), burnout symptoms, and health and well-being. International Journal of Nursing Studies, 6, 100206.

About 9 million nurses will be needed by 2030. To face these unprecedented times, governments/institutions focus on educating as many nursing students as possible. This strategy is clouded by burnout and lack of both health and well-being among students and by the fact that personality is one of the major determinants of these health outcomes. Nevertheless, recent findings show that personality is a complex adaptive system (i.e., nonlinear) and that combinations of people's temperament and character traits (i.e., joint personality networks) might provide further information to understand its development, academic burnout, and lack of health and well-being. Our aims were to investigate the linear relationship between nursing students' personality, burnout, health, and well-being; investigate the linear mediational effects of personality and burnout on health and well-being; and investigate differences in these health outcomes between/within students with distinct joint personality networks (i.e., nonlinear relationships). Swedish nursing students (189 women, 29 men) responded to the Temperament and Character Inventory, The Maslach Burnout Inventory-General Survey for Students, and the Public Health Surveillance Well-Being Scale. We conducted correlation analyses and Structural Equation Modeling and, for the nonlinear relationships, Latent Profile Analysis and Latent Class Analysis for clustering and then Analyses of Variance for differences in health outcomes between/within students with distinct personality networks. This study was not pre-registered. High levels of health and well-being and low burnout symptoms (low Emotional Exhaustion, low Cynicism, and high Academic Efficacy) were associated with low Harm Avoidance and high Self-Directedness. Some personality traits were associated with specific health outcomes (e.g., high Self-Transcendence-high Emotional Exhaustion and high Persistence-high Academic Efficacy) and their effects on health and well-being were mediated by specific burnout symptoms. Cynicism and Emotional Exhaustion predicted low levels of health and well-being, Academic Efficacy predicted high levels, and Cynicism lead both directly and indirectly to low levels of health and well-being through Emotional Exhaustion. We found two joint personality networks: students with an Organized/Reliable combination who reported being less emotionally

exhausted by their studies, less cynical towards education, higher self-efficacy regarding their academic work/skills, and better health and well-being compared to nursing students with an Emotional/Unreliable combination. The coherence of temperament-character, rather than single traits, seems to determine students' health outcomes. Thus, nursing education might need to focus on helping students to develop professional skills and health-related abilities (e.g., self-acceptance and spiritual-acceptance), by supporting self-awareness.

Garcia, D., & Sikström, S. (2024). The ten words free will inventory (10WFWI). In T. Shackelford (Ed.), Encyclopedia of Religious Psychology and Behavior (pp. 1-6). Springer.

The Ten Words Free Will Inventory (10WFWI) is an instrument for assessment of people's notion and sense of free will. It was designed by D. Garcia (Rosenberg et al., 2015a) to ask individuals to generate descriptive words and narratives about free will and to evaluate their own sense of freedom of will. It contains four questions, two of them asking participants to write down 10 words that they relate to the notion of free will (a) and 10 words they relate to the lack of free will (b). The third question (c) asks participants to evaluate the extent of their own free will using an 11-point Likert scale (0 = No free will, 10 = Absolute free will) and the fourth question (d) asks participants to freely describe one example when they have exercised their free will. The 10WFWI was designed for quantitative analyses using natural language processing methods (Sikström & Garcia, 2020), but the responses can also be analyzed using mixed methods. The 10WFWI has been translated in different languages (e.g., Arabic, Italian, Japanese, Spanish, Swedish) and is available in shorter versions as well (e.g., three or five words instead of 10)

Gentili, C., Rickardsson, J., Holmström, L., Wicksell, R. K., Hesser, H. & Zetterqvist, V. (2024). Exploring psychological flexibility as in-treatment behaviour during internet-delivered acceptance and commitment therapy for paediatric chronic pain: Occurrence and relation to outcome. Journal of Contextual Behavioral Science, 31, 100725.

Acceptance and Commitment Therapy has gained preliminary evidence for paediatric chronic pain. Several studies show that psychological flexibility/inflexibility is a process driving treatment change in ACT for chronic pain. The literature supporting psychological flexibility as a change process in ACT is typically based on self-report. The aim of the present study was to investigate psychological flexibility (i.e. acceptance, defusion, values formulation and committed action) as in-treatment behaviour during internet-

delivered Acceptance and Commitment Therapy for paediatric chronic pain, by having two independent observers rating patient written statements. The sample was self-recruited and consisted of 28 girls between ages 13 and 17 years. Results showed that psychological flexibility could be operationalised as in-treatment behaviours and reliably assessed using observer ratings. Also, data illustrated a within subject variability in ratings of acceptance and defusion, with a considerable difference in degree of acceptance or defusion evoked by different experiential exercises. Furthermore, analyses showed that a higher average degree of acceptance in patient statements during the early phase of treatment was related to larger treatment effects. Defusion, values formulation and committed action showed no significant influence on outcome. Results should be interpreted with caution due to the small sample size.

Grant, M. D., Markowitz, D. M., Sherman, D. K., Flores, A., Dickert, S., Eom, K., Jiga-Boy, G. M., Kogut, T., Mayorga, M., Oonk, D., Pedersen, E. J., Pereira, B., Rubaltelli, E., Slovic, P., *Västfjäll, D.*, & Van Boven, L. (2024). Ideological diversity of media consumption predicts COVID-19 vaccination. *Scientific Reports*, *14*, 28948.

This study examines the relationship between respondents' vaccine hesitancy, reported media consumption patterns, ideological leanings, and trust in science. A large-scale survey conducted in the US in 2022 (N = 1,646) assessed self-reported COVID-19 vaccination, trust in science, and reported media consumption. Findings show that, regardless of personal ideology, individuals who consumed less conservative media and had a more ideologically diverse media diet were more likely to be fully vaccinated and boosted. Additionally, consuming more conservative media was negatively associated with trust in science, but this relationship was weaker among those with a more ideologically diverse media diet. By incorporating data from an earlier wave of the survey in the summer of 2020, before COVID-19 vaccines were available, we found that a less conservative and more ideologically diverse media diet in 2022 predicted vaccination behavior in 2022, controlling for prior vaccine intentions and media consumption in 2020. A similar survey conducted in the UK in the summer of 2020 paralleled patterns in the US regarding vaccine intentions and media consumption. These results suggest that an ideologically diverse media diet is associated with reduced vaccine hesitancy. Public health initiatives might benefit from encouraging ideologically diverse media consumption.

Gråd, E., Erlandsson, A., & Tinghög, G. (2024). Do nudges crowd out prosocial behavior? *Behavioural Public Policy*, 8, 107–120.

Both theory on motivational crowding and recent empirical evidence suggest that nudging may sometimes backfire and actually crowd out prosocial behavior, due to decreased intrinsic motivation and warm glow. In this study, we tested this claim by investigating the effects of three types of nudges (default nudge, social norm nudge, and moral nudge) on donations to charity in a preregistered online experiment ($N = 1098$). Furthermore, we manipulated the transparency of the nudges across conditions by explicitly informing subjects of the nudges that were used. Our results show no indication that nudges crowd out prosocial behavior; instead, all three nudges increased donations. The positive effects of the nudges were driven by the subjects who did not perceive the nudges as attempts to manipulate their behavior, while donations among subjects who felt that the nudges were manipulative remained unaffected. Subjects' self-reported happiness with their choice also remained unaffected. Thus, we find no indication that nudges crowded out warm glow when acting altruistically. Generally, our results are good news for the proponents of nudges in public policy, since they suggest that concerns about unintended motivational crowding effects on prosocial behavior have been overstated.

Guerra, M., Berglind, D., Kazemitabar, M., Lindskär, E., Schütz, E., Casimiro, D., & Garcia, D. (2024). Evaluation of an integration community project for asylum seekers in Sweden: Physical activity adherence and changes in character traits and life satisfaction. *Scientific Reports*, 14, 21438.

Asylum seekers' traumatic experiences in combination with discrimination, social isolation, and exclusion in the host country leads to low adherence from health and integration initiatives. Along with their inability to seek health care and physical inactivity, this situation increases their mental illness and, most importantly, decreases their well-being. In fact, the lack of well-being (e.g., life satisfaction) is a better marker of mortality and morbidity than the presence of mental illness. In this context, one of the major single determinants of well-being is character, a dimension of personality that stands for self-regulation, adaptation, and intentional conscious behavior (i.e., goals and values). Host countries often implement integration initiatives including activities aiming to attenuate mental illness, but only a handful are evaluated and reported, with even fewer addressing character development, increases in life satisfaction, or adherence. Our aim was to evaluate the integration initiative "Health for Everyone – Sport, Culture, and Integration", a 10-week physical activity community project. Specifically, we investigated changes in life satisfaction and character traits (i.e., Self-

Directedness, Cooperativeness, and Self-Transcendence) and if these variables, at baseline, predicted adherence and changes in physiological health (i.e., cardiorespiratory fitness, skeletal muscle mass, body fat mass, and visceral fat). Participants (n = 269) answered (pre and post measurements) the Satisfaction with Life Scale, the Short Character Inventory, and undertook physiological tests. In addition, their attendance to the physical activity sessions was registered throughout the project (i.e., adherence). Participants showed no significant increases in Self-Directedness, Cooperativeness, or life satisfaction, but significant decreases in Self-Transcendence. Moreover, higher life satisfaction and lower Self-Transcendence at baseline predicted higher adherence to the activity. However, neither character traits nor life satisfaction predicted changes in physiological health. We argue that low frequency physical activity initiatives may improve this population's physical health because participants probably have a sedentary life and low levels of physical health due to their asylum conditions (e.g., unemployment, low income, poor housing and social network). Furthermore, physical activity per se may not improve the well-being of asylum seekers. Hence, promoting well-being and character development might require person-centered initiatives focusing on the whole individual in order to fit programmes to the needs and life situation of this population.

Halaj, A., Strauss, A. Y., Zlotnick, E., Zalaznik, D., Fradkin, I., Andersson, G., Ebert, D. D., & Huppert, J. D. (2024). Clinical and cognitive insight in panic disorder: Phenomenology and treatment effects in Internet cognitive behavior therapy. *Journal of Psychiatric Research, 172*, 164-170.

Clinical observations suggest that individuals with panic disorder (PD) vary in their beliefs about the causes of their panic attacks. Some attribute these attacks to psychological factors, while others to physiological or medical factors. These beliefs also extend to whether individuals perceive panic attacks as dangerous. In other areas of psychiatric nosology, these phenomena are commonly called clinical insight (recognition of disorder and the need for treatment) and cognitive insight (the ability to reflect on one's beliefs). Despite its importance, limited research exists on insight in PD and its relation to symptoms and treatment outcomes. This study examines clinical and cognitive insight in 83 patients with PD who received internet-based cognitive behavioral therapy, investigating their relationship with symptoms, treatment outcomes, and changes in insight. We assessed patients using interview and self-report measures of insight and symptoms. Clinical and cognitive insight were correlated and both constructs improved significantly during treatment. Good clinical insight pretreatment was positively correlated with more severe pretreatment symptoms. Pretreatment clinical and cognitive insight were not correlated with symptom change or

attrition. Greater change in clinical and cognitive insight was related to greater change in symptoms. The findings highlight the significance of clinical and cognitive insight in PD, and the importance of distinguishing between them. This suggests the need to develop interventions according to patients' level of insight, particularly focusing on those lacking insight. Further research is essential to advance our understanding of the relationship between insight and the phenomenology and treatment of PD.

Hallin, N. (2024). Perceptions of and behaviour toward religious people and atheists in Sweden and the USA. Linköping Studies in Arts and Science 883, Linköping Studies in Behavioural Science 259, Linköping University.

Religiosity has been present in societies throughout history and several theories hold that religion serves to foster trust and a sense of community within the religious ingroup. In many societies today, it is not uncommon to lack religious beliefs and religion is no longer a natural part of everyday life. The studies included in this thesis investigated how religious groups perceive each other or how generous they are to each other, both in the more secular Sweden and in the more religious USA. Paper 1 examined Swedes' perceptions of atheists and religious people. Specifically, how often they associated atheists or religious people with extreme immoral behaviour by making a conjunction error. Previous studies using the same methodological paradigm have found that more people associate atheists, rather than religious people, with immoral behaviour. We found no significant association between target (atheist or religious person) and conjunction errors, indicating that Swedes do not associate immoral behaviour with atheists to a greater degree than they associate immoral behaviour with religious people. We compared the results to those presented in a previous study and found that the Swedish participants in our study made significantly fewer conjunction errors when the target was an atheist than a sample from the USA. They also made significantly more conjunction errors when the target was a religious person than a Finnish sample and the American sample. The results suggests that anti-atheist bias is lower in Sweden compared to the USA, but anti-religious bias is higher than in both Finland and the USA. However, it is also possible that the type of sample used affected the results – we recruited participants from social media while the other two samples were solely or mainly student samples. The study shows that the clear anti-atheist bias found in similar studies is not universal. Paper 2 investigated Christians' and atheists' perceptions of Christian, Muslim, and atheist job applicants in four studies, two with Swedish samples (studies 1 and 3) and two with samples from the USA (studies 2 and 4). Participants rated the perceived competence and likeability of a target applicant (Christian, Muslim, or atheist) and a control applicant (with no information about

religious affiliation). In the last two studies, participants also specified if they would have hired the target or control applicant. Participants generally rated the control applicant as being more competent (USA) and more likeable (Sweden and USA) than the target applicant. Both Christian and atheist participants rated targets with the same religious affiliation higher in likeability than targets from one or both religious outgroups in two of the studies. The only significant difference in competence ratings between the targets were in study 3, where Christians rated Muslims as less competent than Christians. However, Christians' likeability ratings in study 3 did not differ between targets. More atheists in study 3 hired the control applicant than the Christian applicant, but no other group differed in which applicant they hired. In conclusion, when people perceived one religious group to be more likeable, it was their ingroup. However, these results do not translate to perceptions of competence and seldom to hiring decisions.

Paper 3 investigated generosity toward religious ingroup and outgroup members in three studies conducted in Sweden (study 1), the USA (study 2), and Egypt and Lebanon (study 3), using an adapted Dictator Game. Participants allocated a sum of money between themselves and three potential recipients. In the most relevant round, these were a Christian, a Muslim, and an atheist. We found that in studies 1 and 2, there was no significant difference in overall generosity between religious people, agnostics, and atheists in the rounds where they did not know the religious affiliation of the recipients. In the round where they knew the affiliation of recipients, religious people gave significantly more than atheists (studies 1 and 2) and agnostics (study 2). Study 3 had too few agnostics and atheists to compare their generosity to that of religious people. Christians, Muslims, and atheists in all three studies gave significantly more money to their respective religious ingroups than to the outgroup that was given the largest amount. This ingroup generosity was found in the other rounds as well. However, the ingroup minus outgroup amount was larger in the religion round compared to most other rounds. The exceptions were the ideology round in study 1 and 2, which did not differ significantly from the religion round. In study 2, the difference between ingroup and outgroup generosity was larger for Muslim participants than for Christians and atheists. In conclusion, religious people seem to be more generous only when they know the religious affiliation of recipients, but atheists, Muslims, and Christians are all more generous toward religious ingroup members than toward outgroup members. The papers together show that religious affiliation is an important group category that affects perceived likeability and generosity in several contexts.

Hallin, N., Moche, H., Andersson, G., & Västfjäll, D. (2024). Who is generous and to whom? Generosity among Christians, Muslims, and atheists in the USA, Sweden, Egypt, and Lebanon. *Judgment and Decision Making, 19*, e16.

Are religious people more generous than non-religious people? If so, are they more generous in general or mainly to members of their religious ingroup (i.e., parochially generous)? Also, do levels of parochial generosity differ between Christians, Muslims, and atheists? This paper examined these questions by using a novel design of the Dictator Game, where participants in multiple rounds decided how much money to keep for themselves and give to three other players, of whom some information is revealed. Three studies (N = 1,719) with a Swedish sample, an American sample, and a sample from Egypt and Lebanon were conducted. We found that religious people were more generous compared to non-religious people when information about players' religious affiliation was available, but not when it was not available. The results suggest that if religious people are more generous, this mainly occurs when religious information is salient. We also found evidence of parochial generosity among Christians, Muslims, and atheists as all three groups gave more to their religious ingroup than to both of their outgroups. However, Muslims seemed to differ from Christians and atheists by giving more to their ingroup than the other two groups gave to their respective ingroups in the USA and possibly in Sweden.

Hamatani, S., Matsumoto, K., Lindner, P., Shimizu, E., Mizuno, Y., & Andersson, G. (2024). Reliability and validity of a Japanese version of the Brunnsviken Brief Quality of life scale. *Psychiatry and Clinical Neurosciences Reports, 3*, e170.

The Brunnsviken Brief Quality of Life Scale (BBQ) is a popular quality of life measure, indexing satisfaction with and importance of six empirically selected life domains. Whether these domains hold cross-cultural validity remains largely unexplored. The current study developed and psychometrically validated a Japanese version of the BBQ (BBQ-J). Data were collected from 637 Japanese individuals aged between 20 and 87 years. We used *t*-tests, Pearson product-rate correlation coefficients, a reliability analysis, a confirmatory factor analysis, and an exploratory factor analysis to analyze the data, with 637 participants in all analyses. There were no statistically significant gender differences on the BBQ-J. Confirmatory factor analysis of the BBQ-J revealed a 1-factor structure with six items. Convergent validity was confirmed by its association with life satisfaction, and negative convergent validity was confirmed by its negative correlation with depressive symptoms. Cronbach's alpha of the BBQ-J showed high internal consistency. Similar to the original version, the Japanese version of

the BBQ is a valid and reliable self-administered measure of subjective quality of life for use in clinical and research settings.

Hammar Chiriac, E. (2024). Individual reflection papers as a means to support individual assessment in group examinations in problem-based learning. Journal of Problem Based Learning in Higher Education, 12, 141–153.

Even though using group examinations aligns well with the epistemology of problem-based learning (PBL), the dilemma of using joint learning while simultaneously fulfilling individual assessment requirements in higher education make group examinations difficult to use. In this study, the aim was to explore whether an individual reflection paper (IRP) can act as a means to support individual assessment in group examinations in PBL. 152 IRPs were used to assess whether a particular group of students had acquired theoretical and analytical knowledge that would affect results on a group examination. Overall, completed IRPs clearly showed a concurrence between the students' acquired and requested theoretical and analytical knowledge on the examination, except on a few occasions. These findings are promising and suggest that IRPs can act as a means to support individual assessment in group examinations in PBL and that it is possible to combine joint learning in tutorial groups with individual group work assessment.

Hammar Chiriac, E., Forsberg, C., & Thornberg, R. (2024). Teacher teams: A safe place to work on creating and maintaining a positive school climate. Social Psychology of Education, 27, 1775–1795.

Creating and sustaining a positive school climate is not done in isolation but requires continuous ongoing work by several people within the school, and one of the most important actors are the teachers. In order to fulfil this very important task, the teachers need to collaborate with colleagues at school in an organized manner. In this study we aim to explore and analyse teachers' perspectives on how their teacher team might be linked to their school climate work, and what team characteristics facilitate their work to create and maintain a positive and supportive climate within their school. To understand teachers' comprehension of their team, we applied a social psychology framework, using social interdependence theory and the concept of psychological safety. Data were collected by means of 14 semi-structured focus group interviews with 73 teachers from two compulsory schools in southeast Sweden. The findings revealed that teachers perceived the team as the most significant support structure when it comes to school climate work. According to them, the team was associated with shared responsibility, support and help, as well as safety and an open climate. By

elucidating teachers' insider perspectives regarding their working conditions aligned to their work with school climate, we conclude that well-functioning teacher teams are experienced as a safe place to work on creating and maintaining a positive school climate.

Heimann, M. (2024). Bebisens kulturella hjärna – om minnen och härmningar. I Y. Mårtens (red.), Barnens 1000 första dagar (s. 87–96). Ordfront.

I kapitlet beskrivs hur människan lär sig om sin kultur från första början, något som inte enbart beror på vår språkförmåga utan i lika hög grad på vår förmåga att imitera. Redan från födelsen kan barnet känna igen ansikten, lukter, röster men även härma vuxnas ansiktsmimik. Förmågor som spädbarnet använder för att lära sig om världen. Barnets hjärna är förberedd för att analysera de språkljud som det möter och har förutsättningar att lära sig alla språk. Det lilla barnet observerar, tar in det som händer och lagrar dessa erfarenheter i ett långtidsminne för händelser som fungerar redan tidigt. Barn lär sig effektivast i samspel med vuxna men även av egen utforskande aktivitet. Det är däremot inte lika lätt att lära sig från skärmar så det fungerar bäst om man till exempel läser sagor på vanligt sätt. Förskolebarnet är också starkt påverkat av nuet har svårt att styra sin uppmärksamhet. Nya händelser fångar medvetandet och kan få barnet att plötsligt lämna den uppgift eller lek som är för handen.

Holmer, E., Rönnberg, J., Asutay, E., Tirado, C., & Ekberg, M. (2024). Facial mimicry interference reduces working memory accuracy for facial emotional expressions. PLoS ONE, 19, e0306313.

Facial mimicry, the tendency to imitate facial expressions of other individuals, has been shown to play a critical role in the processing of emotion expressions. At the same time, there is evidence suggesting that its role might change when the cognitive demands of the situation increase. In such situations, understanding another person is dependent on working memory. However, whether facial mimicry influences working memory representations for facial emotion expressions is not fully understood. In the present study, we experimentally interfered with facial mimicry by using established behavioral procedures, and investigated how this interference influenced working memory recall for facial emotion expressions. Healthy, young adults (N = 36) performed an emotion expression n-back paradigm with two levels of working memory load, low (1-back) and high (2-back), and three levels of mimicry interference: high, low, and no interference. Results showed that, after controlling for block order and individual differences in the perceived valence and arousal of the stimuli, the high level of mimicry interference impaired accuracy when working memory load was

low (1-back) but, unexpectedly, not when load was high (2-back). Working memory load had a detrimental effect on performance in all three mimicry conditions. We conclude that facial mimicry might support working memory for emotion expressions when task load is low, but that the supporting effect possibly is reduced when the task becomes more cognitively challenging.

Karlsson, E., Manchaiah, V., Mäki-Torkko, E., Granberg, S., Gustafsson, J., *Dahlström, Ö.*, & Widén, S. (2024). Hearing and Functioning in Everyday Life questionnaire: Psychometric evaluation and revision. *American Journal of Audiology*, 33, 330–342.

The aim of the current study was to explore the construct validity and internal consistency reliability of the International Classification of Functioning, Disability and Health (ICF)–based original English version of the Hearing and Functioning in Everyday Life Questionnaire (HFEQ) and to revise the HFEQ based on the results. This study used a cross-sectional survey design. The data were collected using an online survey. Adults with self-reported hearing disability ($n = 513$) from the United States were included. The ICF components of body functions, activity and participation, and environmental factors were tested as the underlying structure of the HFEQ using confirmatory factor analysis and then adjusted by triangulation with previous content validation. The results of the current study confirmed the ICF components of body functions, activity and participation, and environmental factors as underlying constructs of the HFEQ. However, after triangulation with previous content validation, fine adjustments were made. The revised version of the HFEQ includes two removed items and a fine-tuned factor structure. The results confirm that the structure of the HFEQ aligns with the ICF, and the overall results indicate that HFEQ has acceptable construct validity and internal consistency.

Karlsson, H., Erlandsson, A., Asutay, E., & Västfjäll, D. (2024). The role of environmental mental imagery in impact beliefs about climate change mitigation and pro-environmental intentions. *Current Research in Ecological and Social Psychology*, 6, 100181.

People are aware that climate change is happening, yet many do not act on this information. Increasing the awareness that some pro-environmental behaviors have a larger impact than others has the potential to be a piece of the puzzle needed to increase climate action. The current study aims to create an intervention, by combining feedback about the efficacy of pro-environmental behaviors and a novel mental imagery task, intended to help people update their impact beliefs and increase their intention to engage in pro-environmental behavior. The participants ($N = 1012$) were recruited online and randomized to

one of three conditions: 1) Environmentally themed mental imagery in combination with efficacy feedback; 2) Efficacy feedback only; 3) Control. As predicted, we found that efficacy feedback affected the intention to act pro-environmentally, however, the intention to act increased more when the feedback was combined with a mental imagery task. In addition, we found that combining the two interventions increased the perceived impact of pro-environmental behaviors to a higher degree than efficacy feedback alone. Mediation analyses indicated that the change of impact beliefs mediated the change in pro-environmental intention in the combination condition, but not in the other conditions. These results suggest the potential aggregated effect of using mental imagery with efficacy feedback in behavioral interventions aimed at mitigating climate change.

Keevallik, L., Hofstetter, E., Löfgren, A., & Wiggins, S. (2024). Repetition for real-time coordination of action: Lexical and non-lexical vocalizations in collaborative time management. *Discourse Studies*, 26, 334-357.

Repetition has often been argued to be a semiotic device that iconically signifies 'more content', such as intensity and plurality. However, through multimodal interaction analysis of materials in English, Estonian, and Swedish, this paper demonstrates how self-repetition is used to coordinate actions across participants and temporally organize the ongoing activity. The data are taken from infant mealtimes, pilates classes, dance training, board games, rock climbing, and opera rehearsals. Repetition of both lexical and non-lexical tokens can prolong, postpone, and generally organize segments of action as well as co-create rhythms and moves in a moment-by-moment reflexive relationship with other (non-vocalizing) participants. A crucial feature of repetitions is that they can be flexibly extended to fit the other's public performance, its launching, continuation, and projectable completion. We argue that the iconicity of repetition emerges through its indexical relationship to other bodies, as a real-time jointly achieved phenomenon.

Klittmark, S., Niit, J.K.P, Nerström, E., Grundström, H., Nieminen, K., Wells, M.B., & Malmquist, A. (2024). LGBTQ parents' needs for support postpartum following a complicated birth: A matter of reproductive justice. *Journal of Lesbian Studies*, 28, 701-718.

LBTQ people have increased risks of complications during birth, risks potentially driven by minority stress and increased levels of mental illness and fear of childbirth. With the aim of exploring reproductive injustices in postpartum care for LBTQ people, we analyzed qualitative interviews where 22 LBTQ birth and

non-birth parents shared their experiences of support needs during the postpartum period after births where complications had arisen. Results point to the importance of providing an LBTQ safe space, which includes the need to feel safe regarding one's gender or sexual identity, by avoiding cisheteronormative assumptions and using inclusive language. In the context of recently experiencing birth complications, parents needed a space where they were able to focus on physical and mental healing. The results further show the need for validation of the non-birth parent and inclusive breast/chest-feeding support. Results emphasize the need for more psychosocial support around the birth experience, including better medical support and information during the whole process of childbirth.

*Koch, F-S., Sundqvist, A., Birberg-Thornberg, U., Barr, R., & Heimann, M. (2024). Toddler's memory and media – Picture book reading and watching video content are associated with memory at two years of age. *Infancy, 29*, 729-749.*

Memory develops across the course of the first years of life and is influenced by daily experiences, such as exposure to media like books and television. Memory as tapped by Deferred imitation (DI) requires that toddlers form a representation of the target actions that they can later use to reproduce the actions and in addition to measuring memory for real live events, it can also be used to measure memory for events viewed through media. Toddlers are frequently exposed to multiple forms of digital media in addition to more traditional forms of picture book reading. In a within-subjects design, memory was assessed with a DI task in 2-year-olds (n = 89) using the Frankfurt Imitation Test. Deferred imitation was assessed after live and video demonstrations. Parents completed a survey about children's media use. Picture book reading for less than 30 min a day predicted lower memory scores for actions demonstrated live. Watching video content for more than 1 h a day predicted lower memory scores for actions demonstrated on video. Results are interpreted in terms of individual differences in experiences of traditional and digital media and the development of symbolic understanding

*Käll, A., & Andersson, G. (2024). Suicidal ideation following internet-delivered tailored CBT for depression - A secondary analysis of a factorial design trial. *Frontiers in Psychiatry, 15*, 1341495.*

Suicidal ideation is common in major depressive disorder (MDD) and a risk factor for suicidal behavior. Although it can be reduced with psychological treatments, the risks often make clinicians hesitant to offer treatment. This concerns remote treatment options, such as internet-delivered cognitive behavior therapy (ICBT), which may be considered unsafe. Although previous studies

indicate that ICBT can reduce self-reported suicidal ideation both as primary and indirect treatment target, questions remain about under what circumstances ICBT can be offered as the primary treatment. In this secondary report, we investigated the importance of different treatment factors in reducing suicidal ideation via ICBT, including different kinds of therapist support. We analyzed data from 197 participants from a factorial trial of ICBT for symptoms of MDD. Before inclusion all participants completed a structured clinical interview where obvious suicidal intent lead to exclusion. Suicidal ideation was assessed at pre- and posttreatment using one item of the PHQ-9 and one from BDI-II. The data were analyzed using generalized linear models. The pre- to posttreatment comparisons showed decreases in the reporting of suicidal ideation. Findings were consistent across the two measures that was used. There was no effect of support format and content tailoring. The findings suggest that ICBT can help alleviate suicidal ideation even when it is not the focus of the treatment. This was the case regardless of mode of therapist support, who tailored the treatment content, and if case supervision was available or not.

Käll, A., Biliunaite, I., & Andersson, G. (2024). Internet-delivered cognitive behavior therapy for affective disorders, anxiety disorders, and somatic conditions: An updated systematic umbrella review. Digital Health, 10. doi:10.1177/20552076241287643

Internet-delivered cognitive behaviour therapy (ICBT), which can involve guidance from a clinician, continues to be a way to deliver psychological treatments. A previous umbrella review identified moderate-to-large effect sizes favouring ICBT compared to control conditions when treating major depression and anxiety disorders. Given the rapid developments in the field, an updated umbrella review of available meta-analyses can show other conditions and subpopulations for which ICBT is effective. The aim of the study was to provide an expanded overview of the efficacy of ICBT for a broader range of adult psychiatric and somatic conditions. We conducted an updated search of the literature since the publication of the previous umbrella review back in 2019 and up until March 2024. Five different search engines were used (Medline (OVID), Scopus, Web of Science, Cochrane library and CINAHL). The search was expanded to include additional psychiatric conditions (e.g., suicidal ideation) and somatic conditions (e.g., tinnitus and chronic pain). Of the 6509 identified articles, 39 meta-analyses met the inclusion criteria. In these meta-analyses 19 unique outcomes were represented. The most common outcome was symptoms of major depressive disorder, followed by symptoms of anxiety. Effect sizes for the comparisons against control conditions ranged between small (e.g., SMD = 0.10 for stress in employees) to large (e.g., SMD = 1.20 for depressive symptoms among older adults). ICBT can generally reduce symptoms of a wide range of

conditions including both psychiatric and somatic conditions, as well as other mental health problems. This updated review of available meta-analyses also indicated that ICBT has been successful in treating symptoms in different subpopulations such as older adults and students. However, some knowledge gaps remain, including the use of ICBT for psychotic disorders, and the quality of the available meta-analyses' points to a need for more stringent methodological procedures.

Lafta, M. S., Mwinyi, J., Affatato, O., Rukh, G., Dang, J., *Andersson, G.*, & Schiöth, H. B. (2024). Exploring sex differences: insights into gene expression, neuroanatomy, neurochemistry, cognition, and pathology. *Frontiers in Neuroscience, 18*, 1340108.

Increased knowledge about sex differences is important for development of individualized treatments against many diseases as well as understanding behavioral and pathological differences. This review summarizes sex chromosome effects on gene expression, epigenetics, and hormones in relation to the brain. We explore neuroanatomy, neurochemistry, cognition, and brain pathology aiming to explain the current state of the art. While some domains exhibit strong differences, others reveal subtle differences whose overall significance warrants clarification. We hope that the current review increases awareness and serves as a basis for the planning of future studies that consider both sexes equally regarding similarities and differences.

Lagerberg, H., Boswell, J., Constantino, M., *Andersson, G.*, & Carlbring, P. (2024). Does practice make perfect? The effects of an eight-week manualized deliberate practice course with peer feedback on patient-rated working alliance in adults: A pilot randomized controlled trial. *Clinical Psychology in Europe, 6*, e12353.

Deliberate Practice (DP), which underscores the importance of expert mentorship, personalized learning objectives, feedback, and repetition, has been suggested as a method to enhance the effectiveness of therapists. The study tested the efficacy of an eight-week, structured, group-based online course, enriched with peer feedback, for 37 Cognitive Behavioral Therapists. The goal was to assess whether this intervention could boost the quality of therapist-patient alliances, as compared to a control group. To measure this, therapists had their patients anonymously fill out the Session Alliance Inventory both before and after the course. The trial encompassed 120 patient alliance ratings at baseline and 64 at the post-course measurement. The DP course was comprised of a 75-minute remote video workshop each week for eight weeks, supplemented by related study materials. Each workshop focused on a specific skill, such as responding to

client resistance, and included 55 minutes of concentrated role-play activities, providing ample opportunities for repetition and feedback. Using a linear mixed model we did not find an effect on patient alliance ratings. However, we observed a trend ($p = .054$) indicating that the DP group decreased their alliance ratings (Cohen's $d = -0.40$), while the control group demonstrated an increase in their scores ($d = 0.49$). This pilot study did not find support for DP leading to better patient-rated alliance compared to a waitlist control. However, the study had several methodological limitations. Further and more rigorous investigation of the effects of DP on patient outcomes is recommended.

Lago, L., Bertills, K., & Elvstrand, H. (2024). Mina tillgängliga vuxna: Gästredaktionell introduktion. *Venue*, 27, 1.

Att skapa stödjande lärmiljöer är betydelsefullt för att elever ska lyckas och må bra i skolan. I beskrivningen av vad en lärmiljö är framhålls ofta tre aspekter, den fysiska, den pedagogiska och den sociala aspekten. I det tvååriga ULF-projektet Tillgängliga lärmiljöer låg fokus på sociala aspekter och hur skolans vuxna kan bli mer tillgängliga för eleverna. I denna övergripande text introduceras utgångspunkterna för projektet, den aktionsforskningsmodell som vi arbetat efter samt gemensamma resultat från sex lokala aktionsforskningsprojekt. I sex lokala aktionsforskningsprojekt har yrkesverksamma 4-6-lärare och tre forskare vid Linköpings universitet arbetat med att kartlägga och förändra lärares/personals förhållningssätt för att bli mer tillgängliga för eleverna. Resultaten implicerar följande: Att förändra personalens tillgänglighet handlar inte främst om att implementera nya arbetssätt utan mycket kan åstadkommas genom att synliggöra och justera personalens förhållningssätt, agerande och organisering. Elevers perspektiv har potential att synliggöra viktiga aspekter samt möjliga förändringar som lärare/personal kan arbeta utifrån. Skolpersonals delaktighet i utvecklingsarbete är en viktig aspekt för positiv förändring. Inkludering av all berörd personal, exempelvis olika lärarkategorier och resurspersonal, är en viktig framgångsfaktor för förändring.

Larsson, J., Bjureberg, J., Zhao, X. & Hesser, H. (2024). The inner workings of anger: A network analysis of anger and emotion regulation. *Journal of Clinical Psychology*, 80, 437–455.

This study aimed to investigate the interrelations between emotion regulation strategies and different types of anger using network analysis. Method: Data were drawn from a cross-sectional sample of 538 adults (55% females; mean age = 39.8 years, $SD = 12.3$) seeking treatment for anger. Data were collected between March and November 2019 in Sweden. Participants completed measures of anger problems (anger expression, anger suppression, angry reactions, anger

rumination, trait anger, hostility, physical aggression, and verbal aggression) and emotion regulation (cognitive reappraisal, expressive suppression, anger relaxation, and five mindfulness strategies). To determine whether distinct clusters of anger nodes would emerge, exploratory graph analysis was employed. Based on clustering of nodes, we estimated separate networks including all measures of emotion regulation. Two clusters emerged: one consisting primarily of cognitive components of anger, and another of behavioral. Across networks, anger nodes were strongly interconnected, and anger rumination and anger suppression were especially influential. Several direct links were found between specific emotion regulation strategies and cognitive components of anger, whereas most strategies were only indirectly related to angry behavior. Cognitive reappraisal showed no direct link with any of the anger nodes. Our findings reveal potential pathways by which different emotion regulation strategies may influence different types of anger, which could serve as therapeutic targets.

Leiler, A., Meurling, J., Rondung, E., Shahnavaz, S., Andersson, G., & Bjärtå, A. (2024). Unrecognized grief - Prevalence and comorbidity of prolonged grief among refugees in Sweden. *Journal of Migration and Health, 10*, 100274.

Refugees often experience multiple losses. Despite this, and even though the loss is often due to unnatural causes and violent killings, the presence of Prolonged Grief (PG) among refugees may be obscured by other diagnoses such as depression and post-traumatic stress disorder (PTSD). In this cross-sectional study, we assessed the prevalence of PG and its comorbidity with depression and PTSD among 679 adult refugees in Sweden. Results showed that 401 (59.06 %) individuals had lost someone close to them, whom they were grieving intensely. Of these, 76 individuals (18.95 % of 401) fulfilled the criteria for PG. In the full sample, 304 individuals fulfilled the criteria for depression and 56 (18.42 % of 304) of these individuals also fulfilled the criteria for PG. Similarly, 315 fulfilled the criteria for PTSD. Among these individuals, 201 reported loss and 64 (20.32 % of 315) also fulfilled the criteria for PG. The results indicate that behind symptoms of depression and PTSD, there may be a layer of grief. This needs to be considered if we are to provide accurate and effective assessments and interventions for refugees.

Lind, A., Cao, Y., Hesser, H., Hårdstedt, M., Jansson, S. P. O., Lernmark, Å., Sundqvist, M. Tevell, S., Cheng-ting, T., Wahlberg, J., & Jendle, J. (2024). Anxiety, depression and quality of life in relation to SARS-CoV-2 antibodies in individuals living with diabetes during the second wave of COVID-19. *Diabetes Epidemiology and Management, 13*, 100194.

The objective was to compare anxiety, depression, and quality of life (QoL) in individuals living with type 1 (T1D) and type 2 (T2D) diabetes with matched controls during the second wave of the COVID-19 pandemic. Via randomization, individuals living with diabetes T1D (n = 203) and T2D (n = 413), were identified during February-July 2021 through health-care registers. Population controls (n = 282) were matched for age, gender, and residential area. Questionnaires included self-assessment of anxiety, depression, QoL, and demographics in relation to SARS-CoV-2 exposure. Blood was collected through home-capillary sampling, and SARS-CoV-2 Nucleocapsid (NCP) and Spike antibodies (SC2_S1) were determined by multiplex Antibody Detection by Agglutination-PCR (ADAP) assays. Younger age and health issues were related to anxiety, depression, and QoL, with no differences between the study groups. Female gender was associated with anxiety, while obesity was associated with lower QoL. The SARS-CoV-2 NCP seroprevalence was higher in T1D (8.9 %) compared to T2D (3.9 %) and controls (4.0 %), while the SARS-CoV-2 SC2_S1 seroprevalence was higher for controls (25.5 %) compared to T1D (16.8 %) and T2D (14.0 %). A higher SARS-CoV-2 infection rate in T1D may be explained by younger age and higher employment rate, and the associated increased risk for viral exposure.

Lindhe, N., Berg, M., Andersson, K., & Andersson, G. (2024). Experiences of undergoing internet-delivered cognitive behavioural therapy for climate change-related distress: A qualitative study. *BMC Psychiatry, 24*, 775.

Internet-delivered cognitive behavioural therapy (ICBT) has previously shown promise in effectively treating climate change-related distress. The aim of the present study was to investigate participants' experiences of undergoing a novel ICBT program targeting psychological symptoms associated with climate change. Telephone interviews were conducted with nine participants who had received eight weeks of ICBT for climate change-related distress. A semi-structured interview guide was used to gather information about participants' experiences of undergoing treatment. Data were transcribed and analyzed using thematic analysis. The thematic analysis resulted in three overarching themes: (1)

Same old feelings, brand new strategies, (2) Bumps in the road, and (3) Personalized climate engagement. Participants experienced that they had developed new coping strategies for handling their emotions, encountered challenges during the treatment period, and adapted their pro-environmental behaviour to their individual needs and circumstances. The results indicate that participants were able to utilize the treatment material in different ways, resulting in a variety of emotional, cognitive, and behavioural changes. While the treatment was generally described as helpful, participants also raised some concerns regarding the treatment format. These findings can inform further development of ICBT targeting psychological symptoms associated with climate change.

Lindqvist Bagge, A. S., *Holmqvist, R., Skoog, T., & Hildebrand Karlén, M.* (2024). Learning a practical psychotherapeutic skill in higher education in Sweden: A conceptual paper concerning the importance of constructive alignment when teaching therapeutic alliance. *Clinical Psychology in Europe, 6*, e12037.

In addition to theoretical education, clinical psychology programs should include practical skills training. This skill training may be tied to specific assessment and treatment methods; other skills, such as the ability to create a collaborative alliance with patients, are more generic. Previous research has shown that the ability to build a therapeutic alliance (TA) is often not systematically taught in clinical psychology programs and it is uncertain how this competence is examined. A lack of competence in establishing TA on the part of the psychologist might diminish the effects of psychotherapy. To meet the Bologna Declaration, European universities need to demonstrate constructive alignment, i.e. a relationship between elements of the course content and intended learning outcomes in course documents, and show how the acquired knowledge, abilities, and approaches are assessed. This conceptual paper reviewed the syllabuses for universities in Sweden offering the five-year clinical psychology program to illustrate how higher education in Sweden adheres to the Bologna recommendation on constructive alignment when teaching TA to future clinical psychologists. Only two universities out of all eleven universities in Sweden offering a psychology program described satisfactory constructive alignment concerning TA. This conceptual paper raises awareness of the importance of pedagogic structure when teaching TA in higher education by pointing to the prevailing lack of constructive alignment in teaching TA. The increased awareness will hopefully lead to improved structuring in the teaching of TA.

Loughlin, J. A., Das, V., Manchaiah, V., Beukes, E. W., Andersson, G., & Shekhawat, G. S. (2024). The positive side of living with tinnitus: A cross-sectional study. *International Journal of Audiology*, 63, 358-365.

The aim of the current study was to examine the presence of positive experiences reported by individuals with tinnitus in the United States. The study used a cross-sectional survey design. The data were analysed using qualitative (content analysis) and quantitative (*t*-test or Chi-square test) analyses. Study participants were individuals participating in clinical trials involving Internet-based cognitive behavioural therapy (ICBT) for tinnitus. A total of 439 respondents, 211 (48.1%) male and 228 (51.9%) female responded, and data were collected via an online questionnaire. Of the 439 participants, 164 (i.e. 37.4%) reported at least one positive experience. Younger participants and those with lower hearing disability were more likely to report positive experiences. The responses were categorised into six categories: Outlook (*n* = 139), Personal development (*n* = 42), Treatment-related (*n* = 42), Coping (*n* = 29), Support (*n* = 19), and Disease-specific (*n* = 19). The ability of individuals with chronic tinnitus to identify positive experiences may give insights regarding acceptance and coping with tinnitus as well as the temperament of individuals reporting positive experiences. Considering these variables may help when planning individualised rehabilitation programs.

Lundberg, T., Malmquist, A., & Wurm, M. (2024). Exploring reflexive methodology as a pluralist approach to enhance mixed methods research on coping and livability among LGBTQ people in Sweden. *Qualitative Research in Psychology*, 21, 328-356.

The article explores the use of reflexive methodology to enhance mixed methods queer psychological research in Sweden, by analysing data from a qualitative research project on how LGBTQ people cope with minority stress from four epistemological perspectives. A descriptive, hermeneutically and phenomenologically inspired analysis showed that coping should be understood from temporal perspective, where ‘microcoping’ covers strategies used in specific here and now-situations, and ‘macrocoping’ addresses general strategies used over time. We suggest that this differentiation is explored in further research. The analysis then included a theoretically driven perspective using feminist theories and discursive perspectives. Three themes resulted describing different types of constant ongoing work, ‘existential’, ‘relational’ and ‘reflexive’, that participants utilized to carve out a livable existence in the world. We suggest that reflexive methodology can help produce results that can be useful in a local as well as an international context and in relation to different audiences.

Lundqvist, C. (2024). Prevalence of harassment, abuse, and mental health among current and retired senior Swedish cheerleaders. Journal of Sports Sciences, 42, 1673–1684.

This study examined the prevalence of non-accidental violence, focusing on experienced harassment and abuse (HA), and mental health among current and retired Swedish competitive cheerleaders. An online survey was distributed to current and retired athletes in the Swedish cheerleading federation. The survey assessed perceived coach–athlete relationship, sport psychological safety, resilience, mental health, and experienced HA within the cheerleading environment. A total of 284 athletes (men = 5; women = 278; gender not disclosed = 1; current athletes = 211; retired athletes = 73) completed the survey. Psychological abuse was the most frequently reported HA form (current athletes = 21.6%; retired athletes = 53.5%), followed by neglect (current athletes = 5.4%; retired athletes = 26.8%) and physical abuse (current athletes = 3.9%; retired athletes = 12.7%). A high-quality coach–athlete relationship was identified as a protective factor for HA. Additionally, 33.1% and 8.9% of participants displayed scores indicating anxiety and depression caseness, while 63.8% reported a high level of wellbeing. Anxiety/depression scores above clinical cut-off were linked to injury episodes and a high level of wellbeing to a mentally healthy environment. Resilience was found to protect mental health overall. The high occurrence of reported psychological abuse and indications of anxiety/depression related to injury episodes suggest a need of attention towards prevention and athlete protection strategies in cheerleading environments.

Lundqvist, C. (2024). Burning for success makes me burnout as a coach. In S. Chroni, P. Olusoga, K. Dieffenbach, & G. Kenttä (Eds.), Coaching stories: Navigating storms, triumphs, and transformations in sport (pp. 288-297). Routledge.

Coach burnout is a state of physical, emotional, and mental exhaustion resulting from chronic stress and a prolonged sense of overwhelm. Burnout can result in negative consequences for the coach's personal well-being, reduced satisfaction in the coaching role, and also impact the athletes they work with. High-performance coaching is complex and burnout symptoms are common. In high-performance environments, coaches can be exposed to several risk-factors known for burnout, including an elevated number of unpredictable stressors, a high workload, and significant organizational responsibility combined with work insecurity. In this chapter the story of a successful high-performance coach named Sarah is presented. Sarah's journey in elite sport is described along with the psychosocial challenges she faces. Based on the case description of Sarah and current research, this chapter explains how burnout can be understood and

expressed among coaches and provides examples of evidence-informed strategies for prevention and treatment. In the final part of the chapter, practical recommendations are presented to provide guidance for professionals working in sports environments (e.g., managers, coach developers, educators, sports psychologists) on how to approach and support a coach displaying burnout symptoms.

Lundqvist, C., Gregson, W., Bonanno, D., Lolli, L., & Di Salvo, V. (2024). A worldwide survey of perspectives on demands, resources, and barriers influencing the youth-to-senior transition in academy football players. International Journal of Sports Science & Coaching, 19, 162-170.

The youth-to-first team phase presents a number of challenges in the careers of modern football players with stagnation, inconsistent performance and dropout being reported. The aim of this study was to investigate the perception of staff involved in professional academy football clubs around the globe, with a particular focus on youth and first team transition demands, resources as well as transitions barriers and coping among male academy football players. Participants from 29 male youth academies distributed across 29 countries took part in the survey. Our main findings suggested training and match intensity reported as being greater at the senior-level and also pressure from parents. The majority of respondents indicated their clubs having long-term strategy for player development and specific roles supporting successful player transitions. Exposure to different playing styles was deemed important to prepare players for the first team. Likewise, having the academy and the first team training on the same site was perceived to ease the transition, with the majority of respondents indicating that players are able to cope with the pressure of first team training and games. Perceptions on whether staff do not have the skills/resources to prepare players for the changes in environment and culture when players move from youth-to-senior level were unclear. Collectively, our study extends previous transition research on youth football academies suggesting the importance of a club-based playing philosophy to prepare players for the first team demands and challenges.

Lundqvist, C., Kolbeinsson, Ö., Asratian, A. Wadey, D.T. (2024). Untangling the relationships between age, gender, type of sport, perfectionistic self-presentation, and motivation on body satisfaction. A cross-sectional study on aesthetic and non-aesthetic female and male athletes aged 10 to 22. BMJ Open Sport and Exercise Medicine, 10, e001975.

The aim was to explore the relationships between age, gender, type of sport, perfectionistic self-presentation and motivation on body satisfaction among young athletes in one aesthetic sport (gymnastics) and one non-aesthetic sport (basketball). The study hypothesise that (1) age, gender and type of sport (aesthetic or non-aesthetic) will predict body satisfaction scores, (2) autonomous motivation will positively be related to body satisfaction and (3) perfectionistic self-presentation will negatively be related to body satisfaction. Cross-sectional design. 209 athletes (132 gymnasts and 77 basketball players) aged 10–22 (median=13) years were recruited. After data screening, 200 athletes were included in analyses (females: n=155; males: n=45). Participants completed an online survey, which assessed demographic information, athlete motivation (Behavioural Regulation in Sport Questionnaire), perfectionistic self-presentation (Perfectionistic Self-Presentation Scale—Junior Form) and body satisfaction (Body Appreciation Scale-2). Hierarchical multiple regression showed age, self-assigned gender, and two facets of perfectionistic self-presentation (ie, perfectionistic presentation and non-disclosure of imperfection) to predict reported levels of body satisfaction significantly. Subsequently, adding motivational variables did not improve the model. A moderation analysis showed that the relationship between non-disclosure of imperfection and body satisfaction was significantly moderated by gender. Two facets of perfectionistic self-presentation were associated with reported body satisfaction. Additionally, the relationship between non-disclosure of imperfection and body satisfaction appears to differ between female and male athletes. Researchers should move beyond sport types and identify factors (eg, perfectionistic self-presentation) at the individual and environmental levels that can protect young athletes' body satisfaction.

Lundqvist, C., Schary, D. P., Jacobsson, J., Korhonen, L., & Timpka, T. (2024). Aligning categories of mental health conditions with intervention types in high-performance sports: A narrative cornerstone review and classification framework. *Journal of Science and Medicine in Sport*, 27, 525–531.

Epidemiological studies suggest that psychiatric disorders are as prevalent amongst high-performance athletes as in general populations, challenging the myth of invulnerability. Despite efforts of sport organisations to highlight the significance of athletes' mental health, it is still many times tough to combine the sport performance ethos with a discourse on mental health. This narrative cornerstone review examines challenges related to definitions and classifications of athlete mental health in high-performance sports and how these influence assessments and the implementation of interventions. We discuss challenges with concept creep and psychiatrisation and outline their consequences for sport healthcare professionals. Based on this, we present a framework that aligns different categories of athlete mental health conditions (from the reduction of wellbeing to psychiatric disorders) with intervention types (from the provision of supporting environments to pharmacotherapy). We conclude that researchers and sport practitioners need to carefully consider conceptual creep and the risk of pathologising normal and healthy, albeit emotionally aversive, reactions to athlete lifeworld events when assessing athlete mental health. A clear separation of terminology denoting the athlete's resources to handle the lifeworld (including salutogenic factors) and terms describing psychiatric conditions and their management is necessary to avoid misguidance in intervention planning.

Lundqvist, C., Wig, J., Schary, D.P. (2024). Swedish elite athletes' experiences of psychological treatments provided by licensed psychologists and psychotherapists: An interview study. *BMJ Open Sport and Exercise Medicine*, 10, e002044.

This study explores elite athletes' experiences of psychotherapy administered by Swedish licensed psychologists or psychotherapists with and without specialisation in elite sports, addressing the research question: What do elite athletes experience as important for psychotherapy effectiveness when seeking treatment from a licensed clinical psychologist or psychotherapist? Five elite athletes (self-assigned women=4, self-assigned men=1; age range: 20–34 years) from three sports (fencing: n=2, handball: n=2, triathlon: n=1) volunteered to participate in interviews. All athletes had worked with more than one licensed psychologists/psychotherapist, either through a regional healthcare or an elite sports specialised clinic while being national or international elite sports level athletes. Data were inductively analysed by the use of reflexive thematic analysis.

Trust and professionalism to the psychologist/psychotherapist were generated as an overarching theme. Themes created during data analysis included the psychologist/psychotherapist's (a) understanding of elite sports and of both the person and the athlete, (b) psychotherapeutic behaviours or skills (ie, holistic problem assessment, communication, empathy, validation, confidentiality, therapeutic alliance, goal-oriented content and ability to tailor psychotherapy to the athlete) and (c) conditions for psychotherapy (time, accessibility and appropriate support). Participants expressed difficulties in differentiating between qualified and unqualified mental health support providers. Mental health services originating within the sport context were perceived to improve accessibility and the possibility of regular sessions. Mental health services provided outside the immediate sporting context, with the psychologist/psychotherapist not being overly involved in sports, was however perceived to enable a more objective and holistic assessment of both non-sport and sport-related concerns impacting on athlete mental health. We conclude that sports organisations must facilitate athletes' access to psychological treatment, and additionally ensure that practitioners working with psychotherapy have professional expertise and are appropriately qualified. Sports organisations should also systematically evaluate mental health services to ensure quality and that they are up to date with best practices.

Maj, A., Matyni, M., Michalak, N., Bis, A., & Andersson, G. (2024). New in Town - an internet-based self-efficacy intervention for internal migrants: a randomized controlled trial. *PLoS One*, *19*, e0299638.

Migration is a profound life transition that may threaten migrants' well-being and mental health. Results of several studies suggest that social self-efficacy beliefs may be beneficial for the psychological adjustment of migrants, buffering the effect of specific stressors related to migration, helping them reduce anxiety levels, and providing support in forming of new social bonds and better integration with a new community or culture. The primary purpose of this randomized controlled trial was to examine the effectiveness of the New in Town internet-based self-efficacy intervention for internal migrants in Poland.

Participants were 158 internal adult migrants who had changed residence in the last 6 months. They were randomized into two groups: an experimental group (receiving an internet-based self-efficacy intervention), and a waiting list control group. We examined if the intervention was effective in enhancing participants' social self-efficacy (primary outcome), general self-efficacy, social support, satisfaction with life, and reduced reported loneliness (secondary outcomes). Outcome measures were assessed at baseline (Time 1) and 3-weeks later (Time 2). The dropout rate was 50.6%. Initially, we planned to gather follow-up data also 8-weeks after baseline (Time 3). However, due to health and safety reasons

related to the COVID-19 pandemic, we decided to stop the trial. Finally, we included in our analysis only data gathered before the COVID-19 pandemic at Time 1 and Time 2. A total of 159 individuals who met the study's inclusion criteria and completed the baseline assessment were randomly assigned to either the experimental group (n = 80) or the waiting list control group (n = 79). Nevertheless, one participant assigned to the control group was excluded from the analyses because they withdrew their consent to participate after being randomized. The study results suggest that compared to the waitlist control group (n = 78), participants in the experimental group (n = 80) reported a higher level of general self-efficacy beliefs at Time 2 (Cohen's $d = 0.47$; 95% CI: 0.15-0.79). However, there were no statistically significant effects on social self-efficacy, social support, satisfaction with life, and loneliness. The study offers preliminary support for the effectiveness of an internet-based self-efficacy intervention designed for internal migrants on general self-efficacy beliefs.

*Malmquist, A., Miscioscia, M., Leal, D., Tasker, F., Bredenberg, C., Gubello, A., Gato, J., Houghton, M., & Wurm, M. (2024). "Under house arrest": Mental health and minority stress experiences of LGBTQ+ young adults during the COVID-19 pandemic in Europe. *Sexuality Research and Social Policy, 21*, 969-984.*

Increased rates of mental health issues among LGBTQ+ people have been reported during the COVID-19 pandemic, particularly among young people. Semi-structured interviews were conducted in 2021 with 61 young adult LGBTQ+ people residing in France, Italy, Portugal, Sweden, and the UK. Each interview was summarized on a template covering the participants' experiences of pandemic restrictions, mental health, and minority stress during this period. A thematic analysis was conducted on the templates. The pandemic restrictions had a large impact on the participants' lives, leaving them stuck at home. Not having access to the LGBTQ+ community was an additional stress, as this is a venue for support. Half of the participants had suffered from mental health issues during the pandemic. Those who were living in non-affirmative households had a particularly difficult time and experienced overwhelming stress. Increased feelings of gender dysphoria were seen among trans participants due to the lack of access to gender-affirming healthcare. Most participants experienced less distal minority stress than usual due to social isolation restrictions. The COVID-19 pandemic and the associated social restrictions had a large impact on the lives of LGBTQ+ young adults. Many experience worse mental health, although relief from distal minority stress was common. Policy makers must consider the needs of LGBTQ+ young adults as they seek to explore and establish their gender and/or sexual identity. During a pandemic, it is particularly important to help young LGBTQ+ people to engage with the LGBTQ+ community.

Manchaiah, V., Beukes, E. W., Andersson, G., Bateman, E., Swanepoel, D. W., Ulher, K., & Nagaraj, V. (2024). Individuals with tinnitus report more positive experiences following internet-based cognitive behavioral therapy. *Clinics and Practice, 14*, 1615–1624.

This study aimed to examine whether individuals with chronic tinnitus report more positive experiences following internet-based cognitive behavioral therapy (CBT). A mixed-methods design was used, nested in clinical trials evaluating internet interventions for tinnitus. Participants ($n = 164$) completed online questionnaires (both structured and open-ended) providing demographic information as well as health variables (e.g., tinnitus distress, anxiety, depression, insomnia). An open-ended question listing positive effects or outcomes related to having tinnitus was also included. Responses to the open-ended questions were analyzed using qualitative content analysis. Of the 164 eligible participants, 32.3% ($n = 53$) provided at least 1 positive experience both at pre- and post-intervention, with 9.1% ($n = 19$) providing positive experiences only at pre-intervention, 49 (29.9%) providing positive experiences only at post-intervention, and 28.7% ($n = 47$) of the participants did not provide any positive experiences on either measurement occasion. Significantly more positive experiences were reported following the intervention in the overall sample ($p < 0.0001$, paired sample t -test). In addition, participants who reported positive experiences in both pre- and post-intervention also reported more positive experiences following intervention ($p = 0.008$, paired sample t -test). Internet-based CBT can help individuals with tinnitus to think more positively by changing unhelpful thought patterns. Open-ended questions can supplement structured questionnaires to measure treatment outcomes.

Mechler, J., Lindqvist, K., Magnusson, K., Ringström, A., J, D. K., Alvinzi, P., Kassius, L., Sowa, J., Andersson, G., Philips, B., & Carlbring, P. (2024). Guided and unguided internet-delivered psychodynamic therapy for social anxiety disorder: A randomized controlled trial. *NPJ Mental Health Research, 3*, 21.

Social Anxiety Disorder (SAD) is highly prevalent and debilitating disorder. Treatments exist but are not accessible and/or helpful for all patients, indicating a need for accessible treatment alternatives. The aim of the present trial was to evaluate internet-delivered psychodynamic therapy (IPDT) with and without therapist guidance, compared to a waitlist control condition, in the treatment of adults with SAD. In this randomized, clinical trial, we tested whether IPDT was superior to a waitlist control, and whether IPDT with therapeutic guidance was superior to unguided IPDT. Participants were recruited nationwide in Sweden.

Eligible participants were ≥ 18 years old and scoring ≥ 60 on the Liebowitz Social Anxiety Scale self-report (LSAS-SR) whilst not fulfilling any of the exclusion criteria. Included participants were randomly assigned to IPDT with guidance ($n = 60$), IPDT without guidance ($n = 61$), or waitlist ($n = 60$). The IPDT intervention comprised eight self-help modules based on affect-focused dynamic therapy, delivered over 8 weeks on a secure online platform. The primary outcome was SAD symptoms severity measured weekly by the LSAS-SR. Primary analyses were calculated on an intention-to-treat sample including all participants randomly assigned. Secondary outcomes were depressive symptoms, generalized anxiety, quality of life, emotion regulation and defensive functioning. At post-treatment, both active treatments were superior to the waitlist condition with guided treatment exhibiting larger between group effects than unguided treatment ($d = 1.07$ 95% CI [0.72, 1.43], $p < .001$ and $d = 0.61$, 95% CI [0.25, 0.98], $p = .0018$) on the LSAS-SR respectively. Guided IPDT lead to larger improvements than unguided IPDT ($d = 0.46$, 95% CI [0.11, 0.80], $p < .01$). At post-treatment, guided IPDT was superior to waitlist on all secondary outcome measures. Unguided IPDT was superior to waitlist on depressive symptoms and general anxiety, but not on emotion regulation, self-compassion or quality of life. Guided IPDT was superior to unguided PDT on depressive symptoms, with a trend towards superiority on a measure of generalized anxiety. At six and twelve month follow-up there were no significant differences between guided and unguided IPDT. In conclusion, IPDT shows promising effects in the treatment of SAD, with larger benefits from guided IPDT compared to non-guided, at least at post-treatment. This finding increases the range of accessible and effective treatment alternatives for adults suffering from SAD.

Mendes-Santos, C., Nóbrega, C., Quinta-Gomes, A. L., Weiderpass, E., Santana, R., & Andersson, G. (2024). Validation of the Portuguese version of the Supportive Care Needs Survey Short-Form questionnaire (SCNS-SF34-Pt) and the Breast Cancer Supplementary Module (SCNS-BR8-Pt). *Journal of Psychosocial Oncology*, 42, 486–505.

This study aimed to test the psychometric properties of the Portuguese Supportive Care Needs Survey-Short Form-34 (SCNS-SF34-Pt) and its breast cancer-specific complementary module (SCNS-BR8-Pt). A further aim was to characterize Portuguese Breast Cancer Survivors' (BCS) unmet supportive care needs, using these measures. A convenient sample of BCS was recruited from five hospitals in Portugal and invited to complete SCNS-SF34-Pt and SCNS-BR8-Pt, EORTCQLQC30 and QLQBR23, the Generalized Anxiety Disorder, and the Patient Health-Questionnaire. The validity (i.e. convergent, discriminant and convergent validity) and reliability of SCNS-SF34-Pt and SCNS-BR8-Pt were statistically evaluated. BCS' unmet supportive care needs were descriptively

assessed. 336 BCS participated in the study. A four-factor solution was produced for SCNS-SF34-Pt. This solution included the Physical and daily living needs, Psychological needs, Sexuality needs, and Health system, information, and patient support needs dimensions (73% of the total variance; Cronbach's $\alpha = .82$ to $.97$). SCNS-SF34-Pt demonstrated good convergent validity. It could also discriminate between known groups regarding age, disease staging, treatment performed, and ECOG performance status. SCNS-BR8-Pt revealed a single-factor structure (62% of the total variance; Cronbach's $\alpha = .91$). Portuguese BCS' most prevalent unmet supportive care needs were associated with the Psychological, and Physical and daily living domains. Fear of cancer spreading, the inability to do things as usual, and lack of energy/tiredness were perceived as issues requiring further supportive care. SCNS-SF34-Pt and the SCNS-BR8-Pt are valid and reliable tools to assess Portuguese BCS' unmet supportive care needs. Fear of cancer spreading and lack of energy/tiredness concerns should be a target of supportive care services.

Moche, H., Karlsson, H., & Västfjäll, D. (2024). Victim identifiability, numbers of victims, and unit asking in charitable giving. PLoS ONE, 19, e0300863.

This study examines the identifiable victim effect (being more willing to help an identified victim than an unidentified), the singularity effect (i.e., being more willing to help a single identified victim than a group of identified victims), and unit asking (first asking donors for their willingness to donate for one unit and then asking for donations for multiple units) in charitable giving. In five studies ($N = 7996$), we vary the level of identifiability, singularity, and group size. We find that unit asking is making people more sensitive to the number of people in need. Further, while the level of identifiability influences affective reactions, this effect does not extend to donations and, thus, is not affected by unit asking. We do, however, find an “emotion asking effect” where asking donors to rate their affect before donating increase donation levels (compared to donors asked to rate affect after). Emotion asking was attenuated when combined with unit asking.

Molander, P., Novo, M., Ringqvist, Å., Hållstam, A., Hesser, H., Löfgren, M., Stålnacke, B.-M., & Gerdle, B. (2024). Interdisciplinary pain rehabilitation for patients with Ehlers-Danlos syndrome and hypermobility spectrum disorders. *Journal of Rehabilitation Medicine*, 56, 12431.

The present study combined a supervised machine learning framework with an unsupervised method, finite mixture modeling, to identify prognostically meaningful subgroups of diverse chronic pain patients undergoing interdisciplinary treatment. Questionnaire data collected at pre-treatment and 1-year follow up from 11,995 patients from the Swedish Quality Registry for Pain Rehabilitation were used. Indicators measuring pain characteristics, psychological aspects, and social functioning and general health status were used to form subgroups, and pain interference at follow-up was used for the selection and the performance evaluation of models. A nested cross-validation procedure was used for determining the number of classes (inner cross-validation) and the prediction accuracy of the selected model among unseen cases (outer cross-validation). A four-class solution was identified as the optimal model. Identified subgroups were separable on indicators, predictive of long-term outcomes, and related to background characteristics. Results are discussed in relation to previous clustering attempts of patients with diverse chronic pain conditions. Our analytical approach, as the first to combine mixture modeling with supervised, targeted learning, provides a promising framework that can be further extended and optimized for improving accurate prognosis in pain treatment and identifying clinically meaningful subgroups among chronic pain patients.

Mourad, G., Lundgren, J., Andersson, G., & Johansson, P. (2024). Healthcare use in patients with cardiovascular disease and depressive symptoms – the impact of a nurse-led internet-delivered cognitive behavioural therapy program. A secondary analysis of a RCT. *Internet Interventions*, 35, 100696.

Depressive symptoms in patients with cardiovascular disease (CVD) can lead to increased healthcare use. In a randomized controlled trial, we reported that a 9-week internet-delivered cognitive behavioural therapy (iCBT) program ($n = 72$) compared to an online discussion forum (ODF) ($n = 72$) had moderate to large effect on depression in CVD outpatients. In this secondary analysis, we aimed to describe and compare the effect of iCBT compared to ODF regarding healthcare use and to identify factors impacting healthcare use in these groups. Data on healthcare use were retrieved from care data registries in five hospitals in Southeastern Sweden. The year prior to intervention, the iCBT group had a mean

of 31 outpatient clinic/primary care contacts per patient compared with 21 contacts the year after. The corresponding numbers for the ODF group were 37 and 25. The decrease was 32 % in both groups and did not differ significantly ($p = 0.261$ and $p = 0.354$) between the groups. Regarding hospital admissions, the iCBT group had 0.8 admissions per patient the year before and 0.6 the year after the intervention, a decrease by 25 %, whereas the ODF group had 1.1 and 0.6 admissions respectively, a decrease by 45 %. The difference was not statistically significant ($p = 0.270$ and $p = 0.883$) between the groups. Improvement in depressive symptoms post intervention were significantly (Beta = 0.459, $p = 0.047$) associated with a decrease in number of outpatient contacts in the iCBT group. In the ODF group, better mental health-related quality of life post intervention was significantly (Beta = -0.429, $p = 0.045$) associated with a decrease in number of hospital admissions. Reduced depressive symptom scores following intervention were associated with lower outpatient service use, but iCBT was not superior compared to ODF. This implicates that reducing depression in CVD patients, regardless of the type of internet-delivered intervention used, is important since it may reduce healthcare use in these patients.

Nielsen, M. B., Einarsen, S. V., Parveen, S., & Rosander, M. (2024). Witnessing workplace bullying - A systematic review and meta-analysis of individual health and well-being outcomes. *Aggression and Violent Behavior, 75*, 101908.

Through a systematic review and meta-analysis of research on individual health and well-being outcomes this paper examines the consequences of witnessing, and thereby being a bystander to, workplace bullying. The review was limited to peer-reviewed primary observational studies with cross-sectional or prospective research design which included findings on outcomes among witnesses to bullying. The review identified 24 relevant studies from 13 countries. Eighty-eight percent of the studies were published from 2010 and onwards. Most studies used cross-sectional single source data from non-probability samples, mainly comprising female respondents from Western countries. Although cross-sectional findings indicated significant associations between witnessing bullying and outcomes such as mental health, job dissatisfaction, and turnover intent, the review show that we need to consider reverse causation, the witness's own exposure to bullying, their proximity and identification with the target, as well as their helping behavior, to understand the true magnitude of the association. Witnessing and being a bystander to bullying is a complex phenomenon and the magnitude of the outcomes relies on a range of third variables and indirect relationships. There is a need for more research to fully understand the consequences of witnessing bullying in the workplace.

Nima, A. A., Garcia, D., Sikström, S., & Cloninger, K. M. (2024). The ABC of happiness: Validation of a tridimensional model of subjective well-being (affect, cognition, and behavior) using bifactor polytomous multidimensional item response theory. *Heliyon*, *10*, e24386.

Happiness is often conceptualized as subjective well-being, which comprises people's evaluations of emotional experiences (i.e., the affective dimension: positive and negative feelings and emotions) and judgements of a self-imposed ideal (i.e., the cognitive dimension: life satisfaction). Recent research has established these two dimensions as primary parts of a higher order factor. However, theoretical, conceptual, and empirical work suggest that people's evaluations of harmony in their life (i.e., the sense of balance and capacity to behave and adapt with both acceptance and flexibility to inter- and intrapersonal circumstances) constitutes a third dimension (i.e., the behavioral dimension). This tridimensional conceptualization of subjective well-being has recently been verified using Unidimensional Item Response Theory (UIRT) and Classical Test Theory (CTT). Here, we use a recently developed and more robust approach that combines these two methods (i.e., Multidimensional Item Response Theory, MIRT) to simultaneously address the complex interactions and multidimensionality behind how people feel, think, and behave in relation to happiness in their life. A total of 435 participants (197 males and 238 females) with an age mean of 44.84 (sd =13.36) responded to the Positive Affect Negative Affect Schedule (10 positive affect items, 10 negative affect items), the Satisfaction with Life Scale (five items), and the Harmony in life Scale (five items). We used Bifactor-Graded Response MIRT for the main analyses. At the general level, each of the 30 items had a strong capacity to discriminate between respondents across all three dimensions of subjective well-being. The investigation of different parameters (e.g., marginal slopes, ECV, IECV) strongly reflected the multidimensionality of subjective well-being at the item, the scale, and the model level. Indeed, subjective well-being could explain 64% of the common variance in the whole model. Moreover, most of the items measuring positive affect (8/10) and life satisfaction (4/5) and all the items measuring harmony in life (5/5) accounted for a larger amount of variance of subjective well-being compared to that of their respective individual dimensions. The negative affect items, however, measured its own individual concept to a larger extent rather than subjective well-being. Thus, suggesting that the experience of negative affect is a more independent dimension within the whole subjective well-being model. We also found that specific items (e.g., "Alert", "Distressed", "Irritable", "I am satisfied with my life") were the recurrent exceptions in our results. Last but not the least, experiencing high levels in one dimension seems to compensate for low levels in the others and vice versa. As expected, the three subjective well-being dimensions do not work separately. Interestingly, the order

and magnitude of the effect by each dimension on subjective well-being mirror how people define happiness in their life: first as harmony, second as satisfaction, third as positive emotions, and fourth, albeit to a much lesser degree, as negative emotions. Ergo, we argue that subjective well-being functions as a complex biopsychosocial adaptive system mirroring our attitude towards life in these three dimensions (A: affective dimension; B: behavioral dimension; C: cognitive dimension). Ergo, researchers and practitioners need to take in to account all three to fully understand, measure, and promote people's experience of the happy life. Moreover, our results also suggest that negative affect, especially regarding high activation unpleasant emotions, need considerable changes and further analyses if it is going to be included as a construct within the affective dimension of a general subjective well-being factor.

Ojala, O., Hesser, H., Gratz, K. L., Tull, M. T., Hedman-Lagerlöf, E., Sahlin, H., Ljótsson, B., Hellner, C., & Bjurberg, J. (2024). Moderators and predictors of treatment outcome following adjunctive internet-delivered emotion regulation therapy relative to treatment as usual alone for adolescents with nonsuicidal self-injury disorder: Randomized controlled trial. *JCPP Advances*, 4, e12243.

Despite the wide-ranging negative consequences of nonsuicidal self-injury (NSSI), there are few evidence-based treatments for NSSI among adolescents and little is known about what treatments that work best for whom. The objective of this study was to investigate moderators (i.e., for whom a specific treatment works) and predictors (i.e., factors associated with treatment outcome independent of treatment type) of treatment outcome in a randomized clinical trial comparing internet-delivered emotion regulation individual therapy for adolescents (IERITA) plus treatment as usual (TAU) to TAU alone. Adolescents (N = 166; mean [SD] age = 15.0 [1.2] years) with NSSI disorder were randomized to IERITA plus TAU (n = 84) or TAU-only (n = 82). Adolescent emotion regulation difficulties, suicidality, NSSI frequency, depressive symptoms, sleep difficulties, global functioning, and age, and parental invalidation, were measured pre-treatment and investigated as moderators and predictors of treatment outcome (i.e., NSSI frequency during treatment and for 4 weeks post-treatment). A zero-inflated negative binomial generalized linear mixed effects regression model was used to estimate the rate of NSSI change as a function of both treatment condition and moderator/predictor. No significant moderators of treatment outcome were found. Parental invalidation was a significant predictor of treatment outcome regardless of treatment condition, such that high levels of parental invalidation pre-treatment were associated with a less favorable NSSI frequency. We did not find evidence of a differential treatment effect as a function of any of the examined client factors. Future research should investigate moderation in larger

samples and with sufficient statistical power to detect moderation effects of smaller magnitude. Results suggest that parental invalidation may have a negative impact on treatment response and highlight the importance of further investigating parental invalidation in the context of NSSI treatments.

Penington, E., Wild, J., Warnock-Parkes, E., Grey, N., Murray, H., Kerr, A., Stott, R., Rozental, A., Andersson, G., Clark, D. M., Tsiachristas, A., & Ehlers, A. (2024). Cost-effectiveness of therapist-assisted internet-delivered psychological therapies for PTSD differing in trauma focus in England: an economic evaluation based on the STOP-PTSD trial. *Lancet Psychiatry*, *11*, 339-347.

Although there are effective psychological treatments for post-traumatic stress disorder (PTSD), they remain inaccessible for many people. Digitally enabled therapy is a way to overcome this problem; however, there is little evidence on which forms of these therapies are most cost effective in PTSD. We aimed to assess the cost-effectiveness of the STOP-PTSD trial, which evaluated two therapist-assisted, internet-delivered cognitive behavioural therapies: cognitive therapy for PTSD (iCT-PTSD) and a programme focusing on stress management (iStress-PTSD). In this health economic evaluation, we used data from the STOP-PTSD trial (n=217), a single-blind, randomised controlled trial, to compare iCT-PTSD and iStress-PTSD in terms of resource use and health outcomes. In the trial, participants (aged ≥ 18 years) who met DSM-5 criteria for PTSD were recruited from primary care therapy services in South East England. The interventions were delivered online with therapist support for the first 12 weeks, and three telephone calls over the next 3 months. Participants completed questionnaires on symptoms, wellbeing, quality of life, and resource use at baseline, 13 weeks, 26 weeks, and 39 weeks after randomisation. We used a cost-effectiveness analysis to assess cost per quality-adjusted life year (QALY) at 39 weeks post-randomisation, from the perspective of the English National Health Service (NHS) and personal social services and on the basis of intention-to-treat for complete cases. Treatment modules and the platform design were developed with extensive input from service users: service users also advised on the trial protocol and methods, including the health economic measures. NHS costs were similar across treatment groups, but clinical outcomes were superior for iCT-PTSD compared with iStress-PTSD. The incremental cost-effectiveness ratio for NHS costs and personal social services was estimated as £1921 per QALY. iCT-PTSD had an estimated 91.6% chance of being cost effective at the £20 000 per QALY threshold. From the societal perspective, iCT-PTSD was cost saving compared with iStress-PTSD.

Persson, E., Tinghög, G., & Västfjäll, D. (2024). Intertemporal prosocial behavior: a review and research agenda. *Frontiers in Psychology, 15*, 1359447.

Research on intertemporal and prosocial decisions has largely developed in separate strands of literature. However, many of the decisions we make occur at the intersection of these two dimensions (intertemporal and prosocial). Trust is an example, where a decision today is made with the expectation that another person will reciprocate (or betray) later. A new literature is emerging to explore the role of time in these types of situations, where time and social considerations are intertwined. In many cases, time introduces (or magnifies) an element of uncertainty about future outcomes and utility that people need to deal with - what will happen, how good will it be, how will it feel. We review this emerging literature on intertemporal prosocial decision-making and discuss how new research can fill existing knowledge gaps.

Pietrabissa, G., Semonella, M., Marchesi, G., Mannarini, S., Castelnuovo, G., Andersson, G., & Rossi, A. A. (2024). Validation of the Italian version of the web screening questionnaire for common mental disorders. *Journal of Clinical Medicine, 13*, 1170.

The ever-increasing spread of Internet-based systems for common mental disorders has generated the need for brief online screening methods. This study aims to test the psychometric properties of the Web Screening Questionnaire (WSQ) to examine its suitability for screening for common mental health problems among a community sample of Italian adults. A total of 1282 subjects (F = 819; mean age = 42.05) answered the WSQ. Its discriminant characteristics were examined with other validated selected scales for measuring mental health widely used in the Italian population using sensitivity, specificity, and area under the curve (AUC), as well as positive (PPV) and negative predictive values (NPV). Most of the WSQ subscales exhibited moderate to high specificity values. Specifically, the scales of 'agoraphobia' (0.947; 95%CI [0.934, 0.960]), 'anxiety' (0.959; 95%CI [0.946, 0.970]), and 'panic disorder' (0.973; 95%CI [0.964, 0.981]) showed the highest values whilst the 'obsessive-compulsive' dimension had the lowest value at 0.838, 95%CI [0.815, 0.861]. With exceptions observed for 'depression' (0.716; 95%CI [642, 798]) and 'alcohol abuse' (0.760; 95%CI [560, 920]), instead, the WSQ demonstrated critical sensitivity values (<0.6) in all dimensions. The WSQ was appropriate for discriminating between people with and without a psychiatric condition, as it helps to confirm the absence of disorders. However, further diagnostic procedures are required, in case of a positive WSQ screening result.

Poetar, C., Dobrean, A., & Andersson, G. (2024). Preliminary efficacy of a transdiagnostic parent-led internet-delivered intervention for children with anxiety and depressive symptoms: a pilot randomized controlled trial. *Child and Adolescent Psychiatry and Mental Health*, 18, 31.

There is extensive research indicating that transdiagnostic interventions are effective for adults and children with anxiety and depressive disorders; however, limited research has been conducted on the efficacy of such programs targeting parents of children with anxiety and depressive symptoms delivered via the Internet. This study aims to investigate the preliminary efficacy of a transdiagnostic Internet-delivered intervention for Romanian parents of children with elevated anxiety and depressive symptoms. We conducted a single-blinded pilot randomized controlled trial. Forty-two parents of children with anxiety and depressive symptoms ($M_{\text{age}} = 39.79$, 78.6% women) from Romania were randomly assigned to one of the two groups, to ParentKIT, an Internet-delivered intervention based on Rational Emotive and Behavioral Therapy ($n = 21$), or to a delayed treatment condition (waitlist group) ($n = 21$). ParentKIT consisted of a brief transdiagnostic intervention delivered through nine modules with therapist guidance. A significant Group by Time effect was found for child emotional problems as reported by parents (Cohen's $d = -0.85$) and for parental self-efficacy (Cohen's $d = 0.71$). A transdiagnostic Internet-delivered intervention addressed to parents of children with elevated anxiety and depressive symptoms is a promising approach. Future research should include blind assessments as well as multiple outcome assessors and investigate the long-term efficacy of the intervention.

Pontén, M., Jonsjö, M., Vadenmark, V., Moberg, E., Grannas, D., Andersson, G., Andrews, G., Boersma, K., Hedman-Lagerlöf, E., Kleinstaeuber, M., Weise, C., Kaldo, V., Ljótsson, B., Andersson, E., Axelsson, E., & Jensen, K. (2024). Association between expectations and clinical outcomes in online versus face-to-face therapy - an individual participant data meta-analysis. *Psychological Medicine*, 54, 1207-1214.

Online treatments are increasing in number and are currently available for a wide range of clinical problems. To date little is known about the role of treatment expectations and other placebo-like mechanisms in online settings compared to traditional face-to-face treatment. To address this knowledge gap, we analyzed individual participant data from randomized clinical trials that compared online and face-to-face psychological interventions. MEDLINE (Ovid) and PsycINFO

(Ovid) were last searched on 2 February 2021. Randomized clinical trials of therapist guided online *v.* face-to-face psychological interventions for psychiatric or somatic conditions using a randomized controlled design were included. Titles, abstracts, and full texts of studies were independently screened by multiple observers. The Preferred Reporting Items for Systematic Reviews and Meta-analyses guideline was followed. Authors of the matching trials were contacted for individual participant data. Ratings from the Credibility and Expectancy Questionnaire and the primary outcome measure from each trial were used to estimate the association between expectation ratings and treatment outcomes in online *v.* face-to-face interventions, using a mixed-effects model. Of 7045 screened studies, 62 full-text articles were retrieved whereof six studies fulfilled the criteria and provided individual participant data ($n = 491$). Overall, CEQ ratings predicted clinical outcomes ($\beta = 0.27$) at end of treatment with no moderating effect of treatment modality (online *v.* face-to-face). Online treatment appears to be equally susceptible to expectancy effects as face-to-face therapy. This furthers our understanding of the importance of placebo-like factors in online treatment and may aid the improvement of healthcare in online settings.

Ramnerö, J., & Andersson, G. (2024). Psykologiska teorier och deras plats i psykiatri. In J. Herlofson, L. Ekselius, & M. Åsberg (Eds.), *Psykiatri* (3 ed., pp. 101-110). Studentlitteratur.

I kapitlet beskrivs olika psykologiska teoribildningar och hur de kan användas inom psykiatri. Inlärningspsykologi och kognitiv psykologi tas upp men även andra relevanta kunskaper som kan bidra till förståelse och behandling inom psykiatri.

Ravitz P, Sittampalam S, Bäck, M, Croswell, K., Swartz, H.A., & Singla, DR. (2024). Interpersonal psychotherapy training – digital, online educational formats. In M. Weissman, & J. Mootz (eds), *Interpersonal Psychotherapy: A Global Reach*. Oxford Academic.

This chapter discusses digital and online education formats of interpersonal psychotherapy (IPT) training. Curricular design innovations of competency-based health education have advanced digital, Internet-based pedagogy, including psychotherapy training for mental health care providers. Thus, digital, online, computer-, or smartphone app–assisted, Internet-based educational formats have the potential to improve training access and overcome geographic and practical barriers at lower cost and more convenience for learners. The chapter reviews 6 case-based, interactive, digital IPT training courses. It then mentions how digital web-based courses expanding access to training also advance the implementation

of IPT and improve patients' access to and outcomes of evidence-supported mental health care.

Reinebo, G., Björverud, L. G., Parling, T., Andersson, G., Jansson-Fröjmark, M., & Lundgren, T. (2024). Development and experiences of an internet-based acceptance and commitment training (I-ACT) intervention in ice hockey players: A qualitative feasibility study. *Frontiers in Sports and Active Living*, 6, 1297631.

Internet-based psychological interventions have increased the accessibility of evidence-based treatments in clinical psychology but are still an unexplored delivery format in sport psychology research. This study describes the development and evaluates the experiences of an internet-based acceptance and commitment therapy/training (I-ACT) intervention in ice hockey players focusing on performance enhancement and a sustainable sport participation. I-ACT consisted of seven weekly modules and the feasibility of the intervention was investigated using a qualitative research design. Four national level ice hockey players took part of I-ACT and were interviewed about their experiences using a semi-structured protocol. Interview transcripts were analyzed using qualitative content analysis. Findings suggest that the content of I-ACT was comprehensible, relevant, and that it was possible to put the psychological skills into practice. I-ACT was described as helpful to the ice hockey players either in their sport performance or in their life outside of sport. The internet-format was generally perceived as positive, flexible, and a feasible option for delivering psychological interventions in an elite sport context. Some concerns were raised regarding the timing of the intervention at the end of the season, and some players also wished for more time to complete I-ACT. It was also expressed that some of the exercises could have been better adapted for goaltenders. Further trials are needed to evaluate the effects of I-ACT on performance and mental health outcomes in various sport populations using robust quantitative research methodology. Internet-based psychological interventions are a potential future opportunity to make evidence-based practices more accessible for athletes.

Rosander, M., Blomberg, S., & Einarsen, S. V. (2024). Psychometric properties and cut-off scores for the Swedish version of the Negative Acts Questionnaire: The full scale and short version. *Scandinavian Journal of Psychology*, 65, 768–780.

The present study investigates the psychometric properties and cut-off scores of a Swedish version of the Negative Acts Questionnaire, the most frequently used instrument to measure exposure to workplace bullying. Based on a probability sample of the Swedish workforce (n = 1853), we investigate the validity of both

the full version (NAQ-R) and the short version (SNAQ). We suggest optimal cut-offs for the NAQ-R and SNAQ, and for the subscales measuring work- and person-related bullying. Based on the cut-off scores we provide estimates of prevalence in a Swedish context. The factor structure and psychometric properties are comparable to the Norwegian original and the English versions of the instrument. We also tested the criterion validity using 11 outcome and antecedent variables to bullying, and all provided support for its validity. The identified cut-off scores differentiate clearly when tested against the 11 variables used to test criterion validity in the study. The results showed that the Swedish version of the NAQ-R, including the SNAQ, is a valid measure of workplace bullying. To our knowledge, this study is the first study presenting statistical cut-offs for the NAQ-R subscales as well as investigating both the NAQ-R and the SNAQ simultaneously. The present study also provides some criticism against and suggestions for improving the NAQ-R, aiming to capture even more of the overall experience of exposure, ability to defend oneself, overall duration, and on- and offline exposure.

Rosander, M., & Nielsen, M. B. (2024). Workplace bullying in a group context: are victim reports of working conditions representative for others at the workplace? Work & Stress, 38, 115-134.

Previous research on psychosocial working conditions as risk factors of workplace bullying builds on the underlying assumption that targets' subjective reports of their psychosocial working conditions are shared by their non-bullied colleagues. This study investigates differences in perceptions of such conditions by comparing the ratings from targets of bullying, witnesses, and non-witnesses in groups with at least one target, and groups free from bullying. We also examine if known work-related risk factors predict a group level estimate of bullying with the targets excluded from the analyses. Data included 2215 employees in 195 work groups from Sweden. Targets of bullying perceived the psychosocial working conditions more negatively compared to non-exposed colleagues. In addition, non-exposed in work groups with at least one target reported their working conditions more negatively than those working in groups free from bullying. Associations between examined working conditions and group levels of bullying were significant even when the targets were excluded from the analyses, albeit less strong. The results show that working conditions are risk factors of bullying, but also indicate that previous studies may have overestimated the associations. Future research should consider differences in perceptions of targets and non-targets when investigating work-related risk factors of bullying.

Rosander, M., & Nielsen, M. B. (2024). Is there a blast radius of workplace bullying? Ripple effects on witnesses and non-witnesses. *Current Psychology*, 43, 12365-12379.

Substantial evidence points to detrimental effects of workplace bullying on the health, well-being and job attitudes among those exposed. What is less known is how bullying affects their non-exposed colleagues. In this study, we introduce the concept “blast radius of bullying” and use social information processing theory to investigate how bullying impacts targets, witnesses, and non-witnesses. We suggest three mechanisms to understand the impact bullying may have on non-targets: the working environment mechanism, secondary victimization, and emotional contagion. We hypothesized that non-exposed colleagues in groups where bullying exists would feel some impact of bullying, but that it would be smaller for those further away from the point of impact. We also investigated the association between the severity of mistreatment and outcomes for the above-mentioned categories. We used data ($n = 2215$) from 195 work groups. The results provided evidence for a blast radius of bullying, however, not as far-reaching as hypothesized as only direct observation of mistreatment was associated with negative outcomes. The severity of mistreatment was not associated with the outcomes, whereas the frequency of observation had some impact for witnesses. The study showed that also witnesses may be regarded as “co-victims”.

Rozenal, A., Shafran, R., Johansson, F., Forsström, D., Jovicic, F., Gelberg, O., Molin, K., Carlbring, P., Andersson, G., & Buhrman, M. (2024). Treating perfectionism via the internet: A randomized controlled trial comparing cognitive behavior therapy to unified protocol. *Cognitive Behaviour Therapy*, 53, 324-350.

Perfectionism can be problematic when your self-worth is dependent on achievements and leads to inflexible standards, cognitive biases, and rigid behaviors. Cognitive behavior therapy for perfectionism is shown to be effective, including for targeting psychiatric symptoms and when delivered via the Internet (iCBT-P). However, few studies have compared it to an active comparator. The current study randomly assigned 138 participants seeking help for perfectionism to iCBT-P or Internet-based Unified Protocol (iUP). Both treatments provided guidance on demand from a therapist and were eight weeks in duration. The results indicated large within-group effects of Cohen's d 2.03 (iCBT) and 2.51 (iUP) on the Clinical Perfectionism Questionnaire at post-treatment, and maintained effects at 6- and 12-month follow-up, but no between-group difference ($\beta = 0.02$, $SE = 1.04$, $p = .98$). Secondary outcomes of depression, anxiety, quality of life, self-compassion, procrastination, and stress ranged from small to large, with no differences between the conditions. Both treatments were

deemed credible, relevant, of high quality, and well-adhered by the participants. Further research needs to be conducted, but the findings could indicate a lack of specificity, perhaps suggesting there is no need to differentiate between different treatments that are transdiagnostic in nature.

Samuelsson, J., Holmer, E., Åsberg Johnels, J., Palmqvist, L., Heimann, M., Reichenberg M., & Thunberg, G. (2024). My point of view: students with intellectual and communicative disabilities express their views on speech and reading using Talking Mats. *British Journal of Learning Disabilities*, 52, 23-35.

It can be challenging for people with intellectual disabilities to convey their thoughts and opinions because of cognitive, speech and language impairments. Consequently, facilitating their ability to communicate using augmentative and alternative communication methods is essential. The picture-based framework Talking Mats has been applied in many studies and has been shown to be successful in facilitating communication and soliciting views from individuals with intellectual disabilities and communication difficulties. The aim of this study was to describe the views of students with intellectual disabilities and communication difficulties on speech and reading activities and to examine whether valence scores (from negative to positive) on these views were associated with performance on tests of their corresponding abilities. This is a cross-sectional quantitative survey study. A group of 111 students with intellectual disabilities and communication difficulties aged 7–21 were interviewed about their speech and reading activities using the visual framework Talking Mats. Their answers were scored on a three-grade like-dislike continuum and were correlated with their results on adapted tests of the corresponding abilities. The students expressed their views on speech and reading activities. The scored views on speech were positively associated with speech production, and the scored views on reading activities were positively related to reading ability. This suggests that their opinions as expressed through Talking Mats were consistent and reliable. Most students with intellectual disabilities and communicative difficulties can reliably express their own opinions of their abilities when they are provided with a clear visual structure and pictorial support, such as Talking Mats. In this study, this was seen for students with a mild intellectual disability from age seven and onwards and for students with a more severe intellectual disability from 12 years of age and onwards.

Samuelsson, J., Åsberg Johnels, J., Holmer, E., Palmqvist, L., Heimann, M., Reichenberg M., Lundälv, M., & Thunberg, G. (2024). 'To have a plan': Teachers' perceptions of working with a reading instruction combining phonics and comprehension applications for students with intellectual disability and communication difficulties. *Disability and Rehabilitation: Assistive Technology*, 19, 3039-3049.

Students with intellectual disabilities (ID) typically have difficulties with literacy learning, often not acquiring basic literacy skills. Research and practical experience indicate that when these students are provided with evidence-based instruction, including comprehension as well as phonemic strategies, literacy may develop. In this study, four pairs of teachers were interviewed regarding their perceptions of a 12-week digital literacy intervention that focused on both phonics and comprehension strategies. The intervention aimed to enhance literacy and communication development in students aged 7–21, who had mild to severe ID. Four themes were identified in the analysis. It was seen that the teachers found it valuable to have access to two apps accessing and facilitating the use of different literacy strategies in meeting the needs of individual students. This digital format was also perceived as positive, contributing to creating a supportive and systematic learning environment that enhanced and increased literacy learning. The teachers recurrently also talked about the positive influence of participating in research, lifting the strong focus, and positive attention as very important for both teachers and students.

Sarkohi, A., & Beskow, J. (red.) (2024). *Ögonblick av suicidalitet*. Studentlitteratur.

Själv mord kan vara svåra att förklara. Ibland är det kanske mer förståeligt att en människa väljer att avsluta sitt liv men inte sällan är det omöjligt att förutsäga och närstående, arbetskamrater och sjukvården står helt utan en förklaring. Med tanke på hur ofta självmord förekommer i vårt samhälle är det inte förvånande att många anser att forskning om självmord samt sätt att förebygga självmord borde prioriteras. Den här boken är ett bra exempel på en sådan prioritering och ämnet blir belyst utifrån nya men även mer etablerade perspektiv samt i ljuset av modern forskning och ackumulerad erfarenhet. Exempelvis är det nu mer lämpligt att tala om suicidalitet för att minska tabu kring ämnet. Författarna tar upp flera infallsvinklar. Vi får läsa om hur exempelvis självmordstankar, suicidal beteende, biologi, anhörigas reaktioner och samhällets syn på döden måste förstås utifrån en helhetssyn. Författarna för fram en del kritik mot hur vi hanterar frågan om suicidalitet i dag men ger också en del råd och rekommendationer för oss som jobbar i vården.

Sarkohi, A., & Beskow, J. (2024). Inledning. I Sarkohi, A., & Beskow, J. (red.). *Ögonblick av suicidalitet*. Studentlitteratur.

Suicidalitet är inte bara en följd av katastrofer utan också av hela vardagslivet, det vill säga alla de mikrosituationer som tillsammans utgör livet hos en person och i en familj. Band som tänjs, band som brister. Människokroppen vill leva och gör allt för att fortleva, men i det suicidala ögonblicket blir den "lurad" av psyket. Den suicidala kan bli ambivalent och sväva mellan tankar om att leva eller inte leva – ofta en plågsam och återkommande process som varar under en kortare eller längre tidsperiod. För en del kan suicid bli en utväg, ett sätt att lösa de egna problemen, alltså ett sätt att slippa plågsamma minnen eller negativa föreställningar om den egna framtiden. I denna bok försöker vi delvis lyfta fram ett "nytt" perspektiv på suicidalitet. Synen på självmord förändras kontinuerligt. Vi befinner oss i ett dynamiskt övergångsskede, där vi successivt lämnar det trånga och tabubelagda begreppet "självmord" till fördel för ett vidare begrepp, nämligen "suicidalitet". Suicidpreventionen har hittills varit inriktad på att förhindra själva handlingen. Genom avtabueringen har antalet personer som ofta tänker på suicid som utväg ökat. Nu är det därför nödvändigt att ingripa tidigt i processen när de första tankarna om suicid uppstår. För detta behövs en bättre teori om hur själva beslutet att ta sitt liv uppkommer. En sådan teori presenteras i kapitel 5 under rubriken Teorin om en bubbla.

Sarkohi, A., & Beskow, J. (2024). Psykiatrisk suicidprevention under kritik. I Sarkohi, A., & Beskow, J. (red.). *Ögonblick av suicidalitet*. Studentlitteratur.

Sedan mitten av 1800-talet har psykiatrin haft ett dominerande inflytande på hur man i vård och samhälle ser på suicidalitet och hur man utformat suicidpreventionen. Det finns goda skäl för en positiv värdering av psykiatrins insatser. De tyngsta riskfaktorerna är fortfarande tidigare suicidförsök och psykisk sjukdom. Då handlar det inte om en riskökning på några procent, utan en ökning på 20–40 gånger, det vill säga 2 000 till 4 000 procent (Lönqvist, 2009). Tveklöst har psykiatrisk vård förhindrat många suicid samt botat eller lindrat depressions- och ångestsjukdomar hos många patienter. Trots detta har det riktats massiv kritik mot psykiatrisk suicidprevention från suicidala personer, deras närstående, forskare och författare inom psykiatrin samt media, som ofta hävdar att psykiatern helt missuppfattat situationen. Nedan beskrivs i sammanfattade former en del av den kritik som är riktad mot psykiatrins suicidprevention, samt hur psykiatrins suicidprevention har fungerat över tid.

Sarkohi, A., & Beskow, J. (2024). Teoretiska förklaringsmodeller om suicidalitet. I Sarkohi, A., & Beskow, J. (red.). Ögonblick av suicidalitet. Studentlitteratur.

Det finns inte någon övergripande, heltäckande teori om suicidalitet och suicid. I detta kapitel redogörs för olika teoretiska förklaringsmodeller om suicidalitet, och det görs ett försök att lyfta fram ett ”nytt” perspektiv på suicidalitet.

Teorierna handlar bara om vissa delar av processen fram till ett suicid och formas ur olika perspektiv: biologiskt, psykologiskt och socialt. Teorier finns i många olika former, till exempel som hypoteser, som förutsägelser utifrån en teori men inom ett begränsat område och som ”förklaringsmodeller” som är förenklade teorier, ofta i form av bilder som är användbara i forskning och syftar till senare klinisk tillämpning. Biologiska teorier har tidigare varit helt dominerande. En ökad förståelse för suicidalitetens psykologi och samhällsberoende ligger bakom den förändringsfas vi nu befinner oss i. Inom svensk psykiatri har ett stort arbete lagts ner på suicidforskning. Under åren 1971–2014 publicerades nära hundra avhandlingar om suicid, alla utom fem inom psykiatrin. Man har sökt förklaringsmodeller inom olika psykiska sjukdomar, genetik, signalsubstanser, neurofysiologi och neuroendokrinologi samt immunologiska faktorer. Det har ökat kunskaperna inom dessa områden men knappast förbättrat kunskaperna om och förståelsen för den suicidala personen själv och det lidande hen upplever.

Förklaringsmodeller kan skapas på var och en av de nivåer av vilka verkligheten är uppbyggd, från minsta atomdelar, över människan som person, till universum. När man talar om angelägna problem såsom suicidalitet är det viktigt att förstå på vilken nivå samtalet förs. En bra vägledning kan man få av de tre begreppen makrofenomen (t.ex. global suicidstatistik och diagnostiska klassifikations-system), minifenomen (t.ex. en aktuell psykisk sjukdom hos en speciell person) och mikrofenomen (t.ex. hur personen respektive läkaren tänker om sjukdomen i fråga).

Sarkohi, A., & Beskow, J. (2024). Avslutande ord. I Sarkohi, A., & Beskow, J. (red.). Ögonblick av suicidalitet. Studentlitteratur.

Suicidalitet är ett komplext problem som både innebär kortsiktiga och långsiktiga negativa konsekvenser på individ-, organisations- och samhällsnivå. Hantering av suicidal personer både i förebyggande och avhjälpande syfte ställer därmed stora krav på teoretisk och praktisk kunskap om fenomenet samt god samarbetsförmåga. Det är av både humanistiska och ekonomiska skäl viktigt att minimera, och helst eliminera, för tidig död genom suicid. Det sker en ständig utveckling av kunskap inom alla vetenskapliga områden. Kunskapen bör ses som en färskvara och vi bör ständigt sträva efter att vidga vår förståelseram, vidareutveckla moderna och effektiva organisationer i suicidpreventivt arbete,

förbättra vårt bemötande av suicidala personer och deras närstående samt samverka i alla led. Vårt övergripande syfte med boken är att vidga förståelseramen kring suicidalitet. Samtliga författare har varierande utbildningar och yrkesbakgrund (läkare, psykolog, arbetsterapeut, fysioterapeut och socionom), med långvarig teoretisk och praktisk erfarenhet kring suicidala personer. Vi hoppas att boken ska inspirera till mer läsning och gärna ge uppslag till hur behandling läggs upp och till mer forskning och utbildning.

Schöld, D., Östergren, R., Levén, A., Hassler-Hallstedt, M., & Träff, U. (2024). App-based mathematical intervention for youth with intellectual disabilities: a randomised controlled trial. *Scandinavian Journal of Educational Research*, 68, 689–701.

The purpose of the study was to evaluate whether students with intellectual disabilities (ID) can improve their arithmetic skills by participating in an arithmetic intervention programme, theoretically founded on explicit instruction (EI) and administered via an application developed for tablet computers. The intervention study used a randomised controlled trial design (RCT) ($n = 30$, aged 10-16, 13 females) and lasted for up to 12 weeks. The results show that the intervention group significantly improved in arithmetic fact fluency compared to the controls and the effects remained six months after the intervention. The effects were larger for subtraction than for addition, and this difference remained six months later. These results suggest that mathematics applications based on explicit instruction can be an effective way of teaching arithmetic facts to youth with mild ID.

Seewer, N., Skoko, A., Käll, A., Andersson, G., Berger, T., & Krieger, T. (2024). Predictors and moderators of outcome of ICBT for loneliness with guidance or automated messages - A secondary analysis of a randomized controlled trial. *Internet Interventions*, 35, 100701.

Internet-based cognitive behavioral therapy (ICBT) is promising in alleviating loneliness in adults. Identifying individuals who benefit from ICBT for loneliness is pivotal to offering this intervention in a more targeted way and improving the intervention for those who do not benefit. This secondary analysis of a randomized controlled trial (RCT) aimed to identify predictors and moderators of outcome of an ICBT with guidance or automated messages for loneliness. In the RCT, 243 participants suffering from loneliness were randomly assigned to an ICBT with guidance ($n = 98$), automated messages ($n = 97$), or a waitlist-control condition ($n = 48$). In total, 180 participants completed the post-assessment (i.e., 10 weeks post-randomization). Outcomes were treatment outcome assessed with the UCLA-9 Loneliness Scale at post-assessment and treatment response, i.e.,

reliable improvement on the UCLA-9 from pre- to post. The relationship between a wide range of patient characteristics (grouped into socio-demographic, clinical, loneliness-specific, and treatment-related variables) and outcome was analyzed using multiple linear and logistic regressions. Feeling less burdened by loneliness resulted in higher odds of reliable improvement in guided ICBT compared to the waitlist-control condition. No treatment outcome or response moderators were identified for ICBT with automated messages compared to the waitlist-control group. Across active intervention groups, loneliness at baseline, age and fit between the tasks and goals of the intervention and participants' need predicted treatment outcome. Predictors of treatment response for ICBT with guidance and automated messages were not identified, and no variables differentially predicted the effects of ICBT with guidance or automated messages on the outcomes. In conclusion, individuals less burdened by their feelings of loneliness benefited more from guided ICBT. Lower baseline loneliness scores, younger age, and a better match between tasks and goals of the intervention and participants' needs also predicted a more favorable treatment outcome for both ICBT with guidance and automated messages.

Seewer, N., Skoko, A., Käll, A., Andersson, G., Berger, T., & Krieger, T. (2024). Efficacy of an internet-based self-help intervention with human guidance or automated messages to alleviate loneliness: A three-armed randomized controlled trial. *Scientific Reports, 14*, 6569.

Loneliness is a prevalent and stigmatized phenomenon associated with adverse (mental) health outcomes. However, evidence-based interventions to alleviate loneliness are scarce. This randomized controlled trial evaluated the efficacy of an internet-based cognitive behavioral self-help intervention (ICBT) to reduce loneliness by comparing two intervention groups with guidance or automated messages against a waitlist control group. Adults (N = 243) suffering from loneliness were recruited from the general public and then randomly assigned (2:2:1) to a 10-week ICBT with human guidance (GU) or automated messages (AM) or to a waitlist control group (WL). Loneliness, assessed with the UCLA-9, was the primary outcome. Outcomes were assessed at baseline and 10 weeks (post) and analyzed using mixed-effects models. The pooled intervention conditions resulted in lower loneliness scores at post-assessment than the WL (Cohen's $d = 0.57$, 95% CI [0.25; 0.89]) and reduced depressive symptoms, social anxiety, social avoidance behavior, and rejection sensitivity ($d = 0.32-0.52$). The GU group had lower loneliness scores at post-assessment than the AM group ($d = 0.42$, 95% CI [0.13; 0.70]). ICBT effectively alleviated loneliness, and guidance increased the reduction in loneliness compared to automated messages. Alleviating loneliness with ICBT further seems to reduce the overall burden of psychopathological symptoms.

Semonella, M., Marchesi, G., Andersson, G., Dekel, R., Pietrabissa, G., & Vilchinsky, N. (2024). Usability study of SOSteniamoci: An internet-based intervention platform to support informal caregivers in Italy. *Digital Health, 10*, 20552076231225082.

Providing informal care can be experienced as stressful and lead to caregiver burden. Internet-based interventions, a specific form of eHealth, have proven to be a good option to support informal caregivers. SOSteniamoci, an internet-based intervention already tested in Lithuania, was translated and adapted for Italian caregivers. As many novel eHealth solutions have been rejected by end-users due to usability problems, we aimed to evaluate the usability of the adapted platform, using a computer-based prototype. The following methods and metrics were applied: 1. task analysis, using audio and video recordings that included three usability metrics: task completion rate, frequency of errors, and frequency of help requests; 2. the system usability scale (SUS); and 3. a semi-structured interview to collect additional data about the system's design and overall satisfaction. Ten informal caregivers (60% female; age $M = 47.8$, $SD = 15.21$) provided insights and suggestions for increasing the usability of the platform. The platform was considered satisfactory, with a mean score on the SUS of 75 ($SD = 13.07$) out of 100. The task analysis measurements highlighted difficulties in how to log in to the platform, understanding what the intervention is about, and texting the therapist. The same difficulties were also mentioned during the post-experience interview. Thus, improvements were subsequently made to enhance users' experience when navigating the platform. Finally, the platform overall was found to be intuitive and friendly, and the contents were appreciated. To maintain participants' engagement and prevent drop-out, it is crucial to test the usability of internet-based interventions. Even though the platform proved to be user-friendly, intuitive and easy to use, several enhancements were implemented based on participants' feedback. Thus, the usability of internet-based interventions should be tested, and end-users must be involved in the development process of such solutions.

Semonella, M., Marchesi, G., Castelnuovo, G., Andersson, G., & Pietrabissa, G. (2024). Internet-delivered emotional self-management program for the general population during the COVID-19 pandemic: Usability testing. *Digital Health, 10*, 20552076241258419.

Internet-based self-help interventions have the potential to help people address their emotional needs at relatively low costs. However, if the system does not offer optimal functions, it could reduce end-user adherence and satisfaction with treatment and compromise the effectiveness of the program. This study evaluated

the usability of an Internet-based self-help intervention for emotional self-management among the general population of Italy during the COVID-19 pandemic. A balanced sex-age sample of 10 individuals who met the inclusion criteria were consecutively recruited online. The think-aloud testing method, the system usability scale and an ad hoc semi-structured interview were used to determine the overall system usability. Quantitative data were analyzed using descriptive statistics and qualitative data were analyzed using thematic analysis. The participants were mostly satisfied with the usability of the program. However, older users (<45 years) encountered some problems, which took longer, made more mistakes, and needed more help in performing the tasks than their younger counterparts. The analysis of the interviews revealed three central themes: general thoughts about the platform, weaknesses of the platform and difficulties encountered while navigating and completing tasks, and strengths of the platform. Based on the results of this study, important improvements will be made before the RinasciMENTE program is tested under real-world conditions. Conducting usability testing is a crucial step at an early stage of the development process of an Internet-based self-help intervention to identify potential usability problems with the system.

Shalom, J. G., Shaul-Tsoran, I., Strauss, A. Y., Huppert, J. D., Andersson, G., & Aderka, I. M. (2024). Mediation of social anxiety and depression during internet-delivered treatment for social anxiety disorder. *Cognitive Behaviour Therapy*, 53, 436–453.

Many individuals with social anxiety disorder (SAD) have depressive symptoms that meet criteria for major depressive disorder (MDD). In our study, we examined the temporal relationship between symptoms of social anxiety and symptoms of depression during the course of an 11-week internet-delivered cognitive behavioral treatment (ICBT) for SAD ($n = 170$). Specifically, we investigated whether weekly changes in social anxiety mediated changes in depression, changes in depression mediated changes in anxiety, both or neither. In addition, we compared individuals with SAD and MDD ($n = 50$) and individuals with SAD and no MDD ($n = 120$) to examine the role of MDD as a moderator of the social anxiety-depression relationship. Lower-level mediational modeling revealed that changes in social anxiety symptoms mediated changes in depression symptoms to a greater extent than vice versa. In addition, mediation among individuals with SAD and MDD was significantly greater compared to individuals with SAD and no MDD. Our findings suggest that ICBT is effective in treating individuals with SAD regardless of comorbid depression, and that focusing ICBT interventions on social anxiety can lead to significant reductions in depression among individuals with SAD.

Skagerlund, K., Skagenholt, M., & Träff, U. (2024). Mathematics anxiety and number processing: The link between executive functions, cardinality, and ordinality. *Quarterly Journal of Experimental Psychology*, 78, 17470218241234041.

One important factor that hampers children's learning of mathematics is math anxiety (MA). Still, the mechanisms by which MA affects performance remain debated. The current study investigated the relationship between MA, basic number processing abilities (i.e., cardinality and ordinality processing), and executive functions in school children enrolled in grades 4-7 ($N = 127$). Children were divided into a high math anxiety group ($N = 29$) and a low math anxiety group ($N = 31$) based on the lowest quartile and the highest quartile. Using a series of analyses of variances, we find that highly math-anxious students do not perform worse on cardinality processing tasks (i.e., digit comparison and non-symbolic number sense), but that they perform worse on numerical and non-numerical ordinality processing tasks. We demonstrate that children with high MA show poorer performance on a specific aspect of executive functions-shifting ability. Our models indicate that shifting ability is tied to performance on both the numerical and non-numerical ordinality processing tasks. A central factor seems to be the involvement of executive processes during ordinality judgements, and executive functions may constitute the driving force behind these delays in numerical competence in math-anxious children.

So, S., Garcia, D., Lee, J., Kim, J. H., Han, S. Y., Lee, S. J., & Chae, H. (2024). Analyses of physical and psychological characteristics of “Squid Game” characters using East Asian biopsychosocial personality theories and body mass index. *Behavioral Sciences*, 14, 907.

Media characters' physical and psychological traits are crucial for character development and audience engagement. This study examines East-Asian perspectives on the audience's perceptions of the physical appearance and personality, using Eum-Yang biopsychological Sasang theory, of five characters from the Netflix series "Squid Game". A total of 221 university students assessed the traits of five "Squid Game" characters using the Sasang Personality Questionnaire (SPQ) and a visual Body Mass Index (BMI). ANOVA and Profile Analysis revealed significant and comprehensive differences in the SPQ and its subscales (Behavior, SPQ-B; Cognition, SPQ-C; and Emotion, SPQ-E) as well as BMI among the five drama characters. More specifically, Seong Gi-hun (SGH) and Han Mi-nyeo (HMN) were So-Yang types (high SPQ, moderate BMI), Cho Sang-woo (CSW) and Kang Sae-byeok (KSB) were So-Eum types (low SPQ, low BMI), and Jang Deok-su (JDS) was Tae-Eum type (moderate SPQ, high BMI). Psychological profiling showed two patterns: V-shaped (high SPQ-B, low SPQ-

C, high SPQ-E) for SGH, HMN, and JDS, and A-shaped (low SPQ-B, high SPQ-C, low SPQ-E) for CSW and KSB. These results contribute to media psychology by highlighting the relevance of Eum-Yang and Sasang typology for creating and analyzing complex characters, thereby enhancing global understanding for East-Asian biopsychosocial theories

Spreco, A., *Dahlström, Ö.*, Nordvall, D., Fagerström, C., Blomqvist, E., Gustafsson, F., Andersson, C., Sjö Dahl, R., Eriksson, O., Hinkula, J., Schön, T., & Timpka, T. (2024). Integrated surveillance of disparities in vaccination coverage and morbidity during the COVID-19 pandemic: A cohort study in Southeast Sweden. *Vaccines, 12*, 763.

We aimed to use the digital platform maintained by the local health service providers in Southeast Sweden for integrated monitoring of disparities in vaccination and morbidity during the COVID-19 pandemic. The monitoring was performed in the adult population of two counties (n = 657,926) between 1 February 2020 and 15 February 2022. The disparities monitored were relocated (internationally displaced), substance users, and suffering from a psychotic disorder. The outcomes monitored were COVID-19 vaccination, SARS-CoV-2 test results, and hospitalization with COVID-19. Relocated residents displayed an increased likelihood of remaining unvaccinated and a decreased likelihood of testing as well as increased risks of primary SARS-CoV-2 infection and hospitalization compared with the general population. Suffering from a major psychiatric disease was associated with an increased risk of remaining unvaccinated and an increased risk of hospitalization but a decreased risk of SARS-CoV-2 infection. From the digital monitoring, we concluded that the relocated minority received insufficient protection during the pandemic, suggesting the necessity for comprehensive promotion of overall social integration. Persons with major psychiatric diseases underused vaccination, while they benefitted from proactively provided testing, implying a need for active encouragement of vaccination. Further research is warranted on legal and ethical frameworks for digital monitoring in vaccination programs.

Sundqvist, A., Barr, R., Heimann, M., Birberg-Thornberg, U., & Koch, F-S. (2024). A longitudinal study of the relationship between children's exposure to screen media and vocabulary development. *Acta Paediatrica, 113*, 517-522

Aim: This study addresses the scarcity of longitudinal research on the influence of screen media on children. It aims to explore the longitudinal relationship between children's vocabulary development and their exposure to screen media. Methods: The study, initiated in 2017, included 72 children (37 boys) in

Östergötland, Sweden, at three key developmental stages: preverbal (9.7 months), early verbal (25.5 months) and preliterate (5.4 years). Parents completed online surveys at each time point, reporting their child's screen time. At 10 months and 2 years, age-appropriate vocabulary assessments were conducted online. At age 5, children's vocabulary was laboratory assessed. Results: Correlational analysis revealed a negative relationship between language scores and screen media use across all time points. Furthermore, a cross-lagged panel model demonstrated that screen media use showed significant continuity over time, with screen use at age 2 predicting language development at ages 2 and 5. Conclusion: This longitudinal study, spanned from 9 months to 5 years of age, established a predictive negative association between children's exposure to screen media and their vocabulary development. These findings underscore the need to consider the impact of screen media on early childhood development and may inform guidelines for screen media use in young children.

Sundqvist, A., Majerle, N., Heimann, M., & Koch, F-S. (2024). Home literacy environment, digital media and vocabulary development in preschool children. Journal of Early Childhood Research, 22, 570-583.

A child's vocabulary ability may be influenced by many different factors in their home environment. The present study focused on supportive aspects in home environments and the relation to children's vocabulary size through an online study where 166 parents of children aged 47.63 months (range 33.7–59.9 months) responded. Children's home literacy environments were positively associated with children's vocabulary size. Aspects of the home environment such as the parents engaging in teaching colors, and letters and talking about daily activities showed a positive association with vocabulary size. Print book reading was important, but the number of books the parents read did not seem to be associated with vocabulary size, rather whether the parent was engaging in dialogical reading and discussing the books, explaining the content, and relating the content to the life of the child mattered. Digital media (screen media and digital games) did not show a positive association with vocabulary, regardless of content or parents' joint media engagement. Watching screen media showed a negative association with developing vocabulary. This association was, however, ameliorated when positive influences and activities in the home literacy environment were present.

Tinghög, G., Asutay, E., Barrafreem, K., & Västfjäll, D. (2024). The effect of Covid-19 on subjective well-being. *Journal of Financial Counseling and Planning*, 35, 234-243.

We conducted two studies investigating how financial well-being was affected by the COVID-19 outbreak. Across both studies conducted in Sweden, we find that COVID-19 was associated with an overall improvement in subjective financial well-being. The positive effect was driven by a general decline in anxiety toward current financial matters, while financial security with regard to the future declined (Study 1) or was unaffected (Study 2). These results might seem paradoxical. But we propose two explanations: (a) People have a limited ability to worry about two things at the same time. Financial problems might therefore be less emotionally salient in the face of more urgent nonfinancial problems and (b) Some people likely experienced an initial slack in their household finances due to decreased spending opportunities at the onset of COVID-19, which to some extent could counteract increased worry about future financial security.

Tinghög, G., Persson, E., & Västfjäll, D. (2024). Medical homo ignorans, shared decision making, and affective paternalism: Balancing emotion and analysis in health care choices. *Medical Decision Making*, 44, 611–613.

As argued by Vickers and Bennett, shared decision making often falls short because it merely involves presenting patients with a plethora of information without helping them make sense of it. We agree but think it is important to emphasize the key role of emotions in understanding how SDM can be effectively used in practice.

Vernmark, K., Buhrman, M., Carlbring, P., Hedman-Lagerlöf, E., Kaldö, V., & Andersson, G. (2024). From research to routine care: A historical review of internet-based cognitive behavioral therapy for adult mental health problems in Sweden. *Digital Health*, 10, 20552076241287059

This narrative historical review examines the development of internet-based cognitive behavioral therapy (ICBT) in Sweden, describing its progression within both academic and routine care settings. The review encompasses key publications, significant scientific findings, and contextual factors in real-world settings. Over 25 years ago, Sweden emerged as a pioneering force in internet-delivered treatment research for mental health. Since then, Swedish universities,

in collaboration with research partners, have produced substantial research demonstrating the efficacy of ICBT across various psychological problems, including social anxiety disorder, panic disorder, generalized anxiety disorder, and depression. Although research conducted in clinical settings has been less frequent than in academic contexts, it has confirmed the effectiveness of therapist-supported ICBT programs for mild-to-moderate mental health problems in routine care. Early on, ICBT was provided as an option for patients at both the primary care level and in specialized clinics, using treatment programs developed by both public and private providers. The development of a national platform for delivering internet-based treatment and the use of procurement in selecting ICBT programs and providers are factors that have shaped the current routine care landscape. However, gaps persist in understanding how to optimize the integration of digital treatment in routine care, warranting further research and the use of specific implementation frameworks and outcomes. This historical perspective on the research and delivery of ICBT in Sweden over two decades offers insights for the international community into the development and broad dissemination of a specific digital mental health intervention within a national context.

Vernmark, K., Hursti, T., Blom, V., Persson Asplund, R., Nathanson, E., Engelro, L., Radvogin, E., & Andersson, G. (2024). Mindfulness-focused internet-based cognitive behavior therapy for employees and students with elevated stress: A randomized controlled trial. Clinical Psychology in Europe, 6, e12899

Internet-based Cognitive Behavior Therapy (ICBT) and mindfulness interventions are commonly used to treat elevated levels of stress. There are however few high-quality studies that examine ICBT with integrated mindfulness components for symptoms of stress and exhaustion, and the role of mindfulness exercises in digital treatment. The aim of the present study was to evaluate if a mindfulness-focused ICBT-program could reduce symptoms of stress and exhaustion, and increase quality of life, in a randomized controlled trial including 97 self-referred participants between 18 and 65 years who experienced elevated levels of stress. The intervention group had significantly reduced symptoms of stress and exhaustion, and increased quality of life, compared to the control group. Compared with the controls, participants in the intervention group showed a significant improvement with moderate to large effects on the primary outcome measure perceived stress ($d = 0.79$), and the secondary outcomes, exhaustion ($d = 0.65$), and quality of life ($d = 0.40$). Participants in the ICBT group also increased their level of mindfulness ($d = 0.66$) during the program. The amount of mindfulness training was significantly associated with an increased level of mindfulness, which in turn was significantly associated with reduced stress

symptoms. Mindfulness-focused ICBT can be an effective method to reduce stress-related mental health problems and the amount of mindfulness training seems to be of importance to increase the level of experienced mindfulness after treatment.

Vlasceanu, M., Doell, K. C., Bak-Coleman, J. B., Todorova, B., Berkebile-Weinberg, M. M., Grayson, S. J., Patel, Y., Goldwert, D., Pei, Y., Chakroff, A., Pronizius, E., van den Broek, K. L., Vlasceanu, D., Constantino, S., Morais, M. J., Schumann, P., Rathje, S., Fang, K., Aglioti, S. M., Alfano, M., *Västfjäll, D.*, ... Van Bavel, J. J. (2024). Addressing climate change with behavioral science: A global intervention tournament in 63 countries. *Science Advances*, *10*, eadj5778.

Effectively reducing climate change requires marked, global behavior change. However, it is unclear which strategies are most likely to motivate people to change their climate beliefs and behaviors. Here, we tested 11 expert-crowdsourced interventions on four climate mitigation outcomes: beliefs, policy support, information sharing intention, and an effortful tree-planting behavioral task. Across 59,440 participants from 63 countries, the interventions' effectiveness was small, largely limited to nonclimate skeptics, and differed across outcomes: Beliefs were strengthened mostly by decreasing psychological distance (by 2.3%), policy support by writing a letter to a future-generation member (2.6%), information sharing by negative emotion induction (12.1%), and no intervention increased the more effortful behavior—several interventions even reduced tree planting. Last, the effects of each intervention differed depending on people's initial climate beliefs. These findings suggest that the impact of behavioral climate interventions varies across audiences and target behaviors.

Västfjäll, D., Asutay, E., & Tinghög, G. (2024). How affective science can inform behavioral public policy. *Affective Science*, *5*, 213-216.

In this commentary, we expand on the special issue themes of applied affective science, ecologically valid data and application, and the need for transdisciplinary collaboration by discussing and exemplifying how affective science can inform behavioral public policy.

Werther, L., Thorén, E., Brännström, J., Andersson, G., & Öberg, M. (2024). Hearing impaired persons' experiences with the online Swedish Individualized Active Communication Education (I-ACE) program: A feasibility study. *Internet Interventions, 36*, 100734.

Even with optimally fitted hearing aids, many individuals with hearing impairment struggle to hear in situations with difficult listening conditions. Active Communication Education (ACE) is an interactive group rehabilitation program aimed at helping people with hearing loss communicate more effectively using communication strategies to better cope with everyday life. To increase accessibility and allow more people to benefit from the ACE program, a modified individualized version was created. The purpose of this study was to examine the feasibility of providing the Swedish Individualized Active Communication Education (I-ACE) program via an online platform and to explore hearing impaired persons' experiences with the program. For five weeks, ten participants completed the Swedish I-ACE through an online platform. The participants were assigned a new chapter to complete each week and later received individual feedback on their work via the platform. The participants were asked to complete an evaluation form regarding the content and their experiences during and after completing the I-ACE. They were later interviewed to provide more detailed information on their experiences with the program. The program completion rate was 80 %. Participants found the I-ACE program to be informative and relevant but somewhat repetitive. However, only a few participants thought of the repetitiveness as negative. Few participants reported difficulties using the platform. This study indicated that it is feasible to provide the I-ACE program via an online platform and that the content of the program is informative, relevant, and comprehensible. Further research evaluating the effects of the I-ACE is warranted.

Westas Klompstra, M., Mourad, G., Andersson, G., Lundgren, J., & Johansson, P. (2024). The effects of internet-based cognitive behavior therapy for depression in cardiovascular disease on symptoms of anxiety: A secondary analysis of a randomized trial. *European Journal of Cardiovascular Nursing, 23*, 382-390.

The aims of this study were to evaluate: (i) the short- and long-term effects of the internet-based cognitive behaviour (iCBT) programme on symptoms of distress and fear disorder in cardiovascular disease (CVD) patients, and (ii) the association between changes in depression and changes in symptoms of distress and fear disorder from baseline to 12-month follow-up. Secondary analysis of data collected in a randomized controlled study evaluating the effects on depression of an iCBT programme compared to an online discussion forum

(ODF) in CVD patients (n = 144). Data were collected at baseline, at post-intervention (9 weeks), and at 6- and 12-month follow-ups. The results showed that symptoms of distress disorder were statistically significantly more reduced in the iCBT group than in the ODF group. For symptoms of the fear disorder, no differences were found except for avoidance, which showed a statistically significant reduction in the iCBT group. The long-term analysis in the iCBT group showed that CAQ total score and fear decreased from baseline to 6- and 12-month follow-ups, respectively. Avoidance and attention both decreased statistically significantly from baseline to post-intervention, but not between post-intervention and 12-month follow-up. The results suggest that the iCBT programme targeted depression in CVD patients successfully reduced symptoms of distress disorder and to a lesser extent symptoms of fear disorder. Change in depression was more strongly associated with a change in distress than a change in fear disorder.

Wiggins, S., Cromdal, J., & Willemsen, A. (2024). Daring to taste: The organisation of children's tasting practices during preschool lunches. Appetite, 198, 107378.

Tasting food is the first step toward diversifying eating habits and studies with children have typically focused on their sensory education and willingness to try new foods. While very little is known about how children taste foods during everyday mealtimes, EMCA (ethnomethodological and conversation analytic) research on adult tasting in naturalistic settings has demonstrated regular organisational patterns. This paper brings these two research areas together, using the insights of EMCA research on adult tasting to inform our understanding of how young children taste food during preschool lunches. Data are taken from a large corpus of video-recorded lunches in Sweden, in which children (3- to 6-year-olds) were eating with staff members. Discursive psychology and multimodal Conversation Analysis were used to analyse the data. The analysis demonstrates how the sequential organisation of child tasting is very similar to adult tasting, and how tasting practices are a collaborative, multisensory activity involving various embodied practices: from the orientation to food as 'to be tasted', the withdrawal of mutual gaze and exaggerated mouth movements, and the re-establishment of gaze accompanying the food assessment. In contrast to adult tasting, however, tasting during preschool lunches is often framed in terms of personal development of the child and of the individualising of taste within the framework of the institution. The findings thus provide further support for EMCA research on sensory practices and contribute to psychological research on children's eating by evidencing the importance of the interactional and institutional context on tasting as a sensory practice.

Wiggins, S., & Eriksson Barajas, K. (2024) Diskursiv psykologi. In A. Fejes & R. Thornberg (Eds). *Handbok i kvalitativ analys*, 4e upplagan. (pp.128-141). Liber.

Diskursiv psykologi är en teoretisk ansats och analytisk metod för att undersöka hur psykologiska begrepp är konstruerade i samtal och konsekvenserna av dessa konstruktioner för social interaktion. Vissa kallar ansatsen diskurspsykologi men det vanligaste och det som stämmer bäst överens med ursprungsbetydelsen är diskursiv psykologi. Ansatsen kan användas på video- och ljudinspelningar och på skriven text. Den är användbar när man har särskilda psykologiska frågor som man vill utforska i social interaktion.

Wiggins, S., Majlesi, A-R., Ekström, A., Hydén, L-C. & Cekaite, A. (2024). How assisted eating becomes a caring practice in institutional settings: Embodied gestures and stages of assisted eating. *Appetite*, 200, 107552.

Assisted eating is a basic caring practice and the means through which many individuals receive adequate nutrition. Research in this area has noted the challenges of helping others to eat while upholding their independence, though has yet to explicate how this caring practice is achieved in detail and across the lifespan. This paper provides an empirical analysis of assisted eating episodes in two different institutions, detailing the processes through which eating is collaboratively achieved between two persons. Data are video-recorded episodes of infants during preschool lunches and care home meals for adults with dementia, both located in Sweden. Using EMCA's multimodal interaction analysis, three core stages of assisted eating and their underpinning embodied practices were identified: (1) establishing joint attention, (2) offering the food, and (3) transferring food into the mouth. The first stage is particularly crucial in establishing the activity as a collaborative process. The analysis details the interactional practices through which assisted eating becomes a joint accomplishment using a range of multimodal features such as eye gaze, hand gestures, and vocalisations. The paper thus demonstrates how assisted eating becomes a caring practice through the active participation of both caregiver and cared-for person, according to their needs. The analysis has implications not only for professional caring work in institutional settings but also for the detailed analysis of eating as an embodied activity.

Zhao, X., Dannenberg, K., Repsilber, D., Gerdle, B., Molander, P., & Hesser, H. (2024). Prognostic subgroups of chronic pain patients using latent variable mixture modeling within a supervised machine learning framework. *Scientific Reports, 14*, 12543.

Chronic pain is a common manifestation of Ehlers-Danlos syndrome and hypermobility spectrum disorders; thus it is often suggested that patients undergo generic interdisciplinary pain rehabilitation, despite there being little evidence to support this decision. The aim of this study is to examine the effectiveness of standard rehabilitation programs for chronic pain on patients with Ehlers-Danlos syndrome and hypermobility spectrum disorders, compared with patients with other chronic pain disorders. Data, collected between 2008 and 2016, were extracted from a Swedish national registry. The patient data comprised of 406 cases with Ehlers-Danlos syndrome or hypermobility spectrum disorders, 784 cases with a whiplash-related diagnosis, 3713 cases with diagnoses relating to spinal pain, and 2880 cases of fibromyalgia. The differences between groups on key outcome measures from pre- to 1-year follow-up after interdisciplinary pain rehabilitation were analysed using linear mixed effects models. Sensitivity analysis in the form of pattern-mixture modelling was conducted to discern the impact of missing data. No significant differences were found in improvements from pre- to 1-year follow-up for patients with Ehlers-Danlos syndrome or hypermobility spectrum disorder compared with other diagnostic groups regarding measures of health-related quality of life, mental health, or fatigue. At follow-up, differences in pain interference ($d = -0.34$ (95% confidence interval [95% CI] -0.5 to -0.18)), average pain ($d = 0.22$ (95% CI 0.11 – 0.62)) and physical functioning ($d = 2.19$ (95% CI 1.61 – 2.77)) were detected for the group with spinal-related diagnoses in relation to those with EDS/HSD, largely due to pre-treatment group differences. Sensitivity analysis found little evidence for missing data influencing the results. This study suggests that patients with Ehlers-Danlos syndrome/hypermobility spectrum disorders may benefit from inclusion in an interdisciplinary pain rehabilitation program.

Åkerman, A. K. E., Holmqvist, R., Falkenström, F., Mansfeldt, K., Östergren, O., & Münger, A. C. (2024). Experiences in the relationship between foster children and foster parents in specialized foster care—Thematic analysis conducted on five minute speech sample-data. *Children and Youth Services Review, 167*, 107999.

One of the factors that most significantly affects foster care outcomes is the relationship between the foster child and the foster parent. However, research about experiences in this relationship in specialized foster care is scarce. The

context of this study is a relationally and mentalizing focused foster care model, Treatment By Foster care (TBF).

The purpose was to develop the understanding of foster children's and their foster parents' experiences of living together in a specialized foster care context. Interviews about their relationship, using a Five Minute Speech Sample, were analyzed using Thematic Analysis (TA). Participants were seven foster children (8 – 17 years old) and their seven foster parents (n = 14). Each participant was interviewed on three occasions (total number of interviews = 40). The TA generated three main themes: *no 'real' family*, *a co-created relationship*, and *time*. Both foster children and foster parents were found to relate to an idealized norm of what a 'real' family is. A mutual ambition of building a relationship and appreciating the other individual could overcome challenges in the foster family constellation. Time emerged as an important and decisive factor for the relationship, despite the fact that no question was asked about the duration of the relationship.

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