Early Career Section Member Recognised

by the European Health Psychology Society

By Lucas Walters (Ottawa)

Dr. Andrea Patey is a Senior Clinical Research Associate within the Centre for Implementation Research at the Ottawa Hospital Research Institute and an Adjunct Professor at School of Epidemiology and Public Health, University of Ottawa and School of Rehabilitation Therapy, Queen's University. Born and raised in rural Newfoundland, she graduated Memorial University with a Bachelor of Science (Honours) in Behaviour Neuroscience. She went on to graduate Carleton University with a Master of Science in Psychology and she holds a PhD in Health Psychology from City, University of London in the UK. Her research sits at the intersection of behaviour sciences and implementation research applying psychological theory and methods to explain and change health professional behaviours across a range of clinical settings. The broad objectives



Dr. Andrea Patey Senior Clinical Research Associate Centre for Implementation Research Ottawa Hospital Research Institute

of her research are to promote the use of theory and rigorous methods to improve the delivery of evidence-based healthcare through the development and evaluation of complex behaviour change interventions. We connected with Dr. Patey to ask a little about their recent award, career path, and advice.

What is the Stan Maes Early Career Award and what does it mean to you to have won this?

The Stan Maes Early Career award recognises outstanding research excellence, contributions made to the EHPS and/or contributions to professional practice made by EHPS members in the first five years post PhD. Professor Stan Maes for whom the award is named, was the founder and first President of the EHPS and was committed to the development of early career health psychologists. I'm honoured to have receive this prestigious award from EHPS, my peers, which recognizes my work applying health psychology to support healthcare professionals and systems to stop engaging in clinical practices that persist despite evidence of low value or even harm (i.e., de-implementation). It's recognition that my work has value and importance.

What is the current focus and scope of your research?

My specific interest centres around whether implementation (starting an evidence-based clinical practice behaviour) and de-implementation (stopping an ineffective or harmful clinical practice behaviour) differ, and correspondingly, whether interventions to target each should also differ. My PhD involved theoretical development work on how psychological theory differentiates between stopping and starting behaviours (Patey et al., 2018) followed up by work identifying whether different intervention approaches exist for de-implementation and implementation (Patey et al., 2021). I also unpacked how and which behaviour change techniques – especially behavioural substitution – may be helpful for promoting de-implementation (Patey et al., 2022).

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What's next in your research?

I plan to continue this work to better understand de-implementation from a behaviour science perspective and how to better design interventions targeting the low value clinical practise behaviours. I'm excited to be working with colleagues to edit a book to help guide those who want to de-implement low value care. I want to continue to advance the application of behavioural theories and the tools we use to improve evidence-based practice, through both implementation and de-implementation, working with healthcare providers, health systems and organizations in Canada.

What important lessons have you learned throughout your career so far?

I'm an older early career researcher; I graduated with my PhD at 40 and perhaps the most important lesson I learned has been, the best path in life is your own path. Don't compare your journey to others' —no one way is better than the other. You got here because this was how you were supposed to get here —I don't think 25-year-old me would have had the opportunities I've had nor would I have had the amazing mentors throughout my PhD and since, had I started my PhD back then.

Another stellar piece of advice was from my grade 12 math and physics teacher —who probably saw an anxious person who sought perfection about to go off to university— when he said the hardest thing he had to learn in university was that he couldn't know everything. That saved me a heap of all-nighters studying incessantly and established a foundation within myself to balance work/academics with life outside of that. Oh and "perfect" is the worst word in the world —completely unattainable!

What's next in your professional career goals?

I really hope to get an academic position in Canada. As I transition into an academic position, my goal is to continue my work to advance theory, methods and application at the intersection between health psychology and implementation science with the network of national and international of colleagues I've been lucky to collaborate. I also hope to continue teaching —it's a part of this work that I surprisingly enjoy. Getting people as passionate about behaviour and implementation sciences as I am, is pretty cool!

