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Letter from the Editor

Dear ISBM Members,

the start of a new year often brings resolutions – some ambitious, others short-lived. But as behavioral medicine teaches us, lasting change comes from small, consistent steps rather than grand declarations. So, whether your resolution is to apply for a grant, exercise more, or practice mindfulness, remember: progress is a journey, not a leap.

As we step into the fresh beginnings of a new year, I am delighted to connect with you for the first time as the Newsletter Editor, taking over this role from Susanne Fischer until the next election. I am very honored and grateful and would like to thank the Board for trusting me with this important task and to Susanne for leaving the Newsletter in such great shape. I am deeply committed to continuing the tradition of sharing meaningful insights and updates from our vibrant global community.

In this issue of the Newsletter, our President, Kerry Sherman, has summarized all the achievements of the ISBM in 2024, the exciting 30-year anniversary of our International Journal of Behavioral Medicine (IJBM), and the upcoming events in 2025 on [page 3](#). Related to this, I highly recommend reading the [Letter of the new Editor-in-Chief](#) of IJBM, Konstadina Griva, including her vision for IJBM. Moreover, please check out the [update](#) on our society's finances by Sherri Sheinfeld Gorin. You will find another exciting [update](#) from Allison Marziliano, Chair of INSPIRE, the early career and student network for the ISBM, and Chris Kilby, Chair of the Education and Training Committee. Both have set up a stirring webinar program for 2025!

Additionally, Kerry Sherman conducted a fascinating interview for the section [Meet the Member Society](#). You can read the full interview with Susan Tan (President) and Rayner

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Kay Jin Tan (Treasurer) from the Society of Behavioural Medicine, Singapore, and learn more about this flourishing member society or watch the interview on video [here](#).

Moreover, I am extremely happy that I was able to interview Winnie Mak for the [Luminaries in behavioral medicine](#) section. She is a distinguished expert focusing on stigma, diversity, and digital mental health and will deliver a Master Lecture at the upcoming International Conference of Behavioral Medicine (ICBM) in August 2025 in Vienna, Austria.

Last but not least, this issue's section [A behavioral medicine view on...](#) focuses on the crucial topic: social connectedness and engagement. In a world increasingly shaped by individual and collective challenges, understanding the behavioural dynamics of social connection and community is more vital than ever. I am delighted that so many of our members all around the world reached out and provided their insights and reflections on this topic.

Finally, please make sure to stay up to date regarding the ICBM 2025 and visit the conference [homepage](#) for updates! If this is not already in your calendar – mark August, 6 – 9, this year and book a trip to wonderful Vienna to join the inspiring Congress focused on “Advancing Global Health Equity through Science, Education, and Advocacy”.

I am already looking forward to meeting many of you there!

Anja Feneberg, PhD
Editor of the ISBM Newsletter





Letter from the President

Dear colleagues and ISBM Member Societies,

It's my pleasure to be writing this President's message as we are nearing the end of yet another busy year. 2024 has been a year of many achievements and transitions within ISBM.

Our ISBM President-Elect, Michael Hoyt, has stepped down as Editor-in-Chief of the International Journal of Behavioral Medicine, having served our research community in this role with immense dedication and distinction. With Michael's departure from the journal, I am very pleased to introduce the new Editor-in-Chief of IJBM, Konstadina (Nadia) Griva. Based in Singapore, and a formative leader of the Society of Behavioral Health, Singapore, Konstadina brings to the Editor-in-Chief role wide experience in journal editorial work and research within behavioral medicine. I am very much looking forward to seeing the journal continue to flourish and seek new directions under Konstadina's guidance. Further to the journal, I am excited to say that our journal has reached a momentous milestone having just reached its 30-year anniversary! The longevity of the journal is a real testament to the strong leadership it has had over these past 30 years, and I sincerely thank everyone who has been an Editor-in-Chief, an Associate Editor, an Editorial Board Member, a reviewer, and those who have contributed their research to this, our very own journal – definitely something with which we can all be justifiably proud.



Another departure from our Board also brings another new face. Last newsletter we bid farewell to our amazing Newsletter Editor, Susanne Fischer. I'd like to introduce and warmly welcome Anja Feneberg, our new Newsletter Editor. Anja is based in Germany, and is an active member of the German Society of Behavioral Medicine and Behavior Modification. She has been very active in the INSPIRE committee and now brings an exciting new perspective to the ISBM Newsletter.

It was also about a year ago that we launched the new look and redesigned ISBM website (<https://isbm.info/>), I hope you've been enjoying the clearer navigation on this site.



Excitement is building for the 2025 ICBM in Vienna – Just a reminder that Abstract Submission is currently open and due to close on 6 January 2025 (follow this [link](#) for deadlines). Consider bringing together colleagues of yours from around the globe to submit a symposium. The international perspective of symposia is a key feature of ICBMs and highlights the rich tapestry of research conducted in diverse settings within the ICBM community.

Have you ever wondered what makes ICBM tick? Well, here is your opportunity to work with a multinational, dedicated and enthusiastic group of people on the ISBM Board. As a part of the cyclical membership of ISBM Committees, we are seeking to fill several positions on the ISBM Board and Executive. Please consider nominating through your Member Society for one of the vacant positions, or to join one of the existing committees. Reach out to any of the Committee Chairs or the Executive Committee members if you are interested in getting involved and would like some further information about opportunities.

After the very interesting interview with the leadership of ASBHM in the last newsletter, I am very pleased to introduce you to the Society of Behavioral Health, Singapore in this newsletter in the 'Meet the ISBM Member' series. I have recently had the privilege to meet some of the members of the Singapore society in person, and during the visit I caught up with Susan Tan (President) and Rayner Tan (Treasurer) of this up-and-coming member society. Click [here](#) to watch the video-recorded interview.

Finally, I would like to extend to all of our member societies, colleagues, friends and family, my very warm wishes to you for this holiday festive season and for a healthy, peaceful and Happy New Year, wherever you may be around the World.

All the very best,

Kerry Sherman, PhD
President of the ISBM





Letter from the Editor in Chief of IJBM

Dear ISBM Members,

The vision for IJBM for the next 5 years will be on growth, inclusivity, and connection. IJBM can grow stronger by harvesting fresh insights be it methodologies, evidence synthesis or leveraging on cross-cutting themes such as Data Science & Artificial Intelligence or Climate and Behavioural Medicine. To broaden inclusivity and connection, IJBM will promote and expand the adoption of open sciences principles and dissemination of scientific work to broader audiences. Brief lay summaries for instance can help forge links to expert by experience communities beyond ISBM readership.

The [December issue](#) of the International Journal of Behavioral Medicine (IJBM) commemorates the journal's 30-year anniversary. In celebration of this momentous milestone, this issue of IJBM presents systematic, scoping, and integrative literature reviews and meta-analyses that synthesize the state of the science in foundational areas of the field. Answering this call, contributing authors brought strong focus on intervention research across broad areas of behavioral medicine.

If you'd like, join us on Twitter (X) at @IJBMed.

Konstadina Griva, PhD
Editor-in-Chief
International Journal of Behavioral Medicine



Konstadina Griva, originally from Greece, is a chartered Health Psychologist (UK), an Honorary Fellow of EHPS (2019) and the first President of the Society of Behavioural Health Singapore. Having worked in various countries (Greece, UK and Singapore), she has gained valuable experience in program evaluation and landscape analysis, particularly relating to behavioral interventions, implementation science, needs of various stakeholders and journey mapping across settings. Professor Griva has years of editorial experience in *Annals of Behavioural Medicine*, *Psychology and Health* and she has published over 100 peer-reviewed publications.



Update from the Finance Committee

Dear ISBM Members,

How are our finances doing?

Over the past several months, we have continued to improve our Key Performance Indicators (KPI's). Our monitoring and controlling of our improving financial performance continues. We work alongside our EC, especially our treasurer, Beate Ditzen, and our management company, ICS. As a result, we expect a small overall surplus this year.

We have spent much of our time in 2024 preparing a great program for ICBM 2025. As Finance Chair, I have actively participated in the organizing committee, alongside Kerry Sherman and Urs Nater as well as ICS, particularly to increase the financial contribution of the Congress to meeting ISBM's mission. Further, ICS has worked with us to actively recruit sponsors and exhibitors that will help us to offset some of the Congress's expenses, and to enhance your own on-site experience.

We have been advancing our banking relationship, to enhance our organization's control over our bank funds, although the bureaucratic barriers have been considerable. In relation to another bureaucracy, however, we are up-to-date in our tax filings with the US Internal Revenue Service. This is the first year for us to do so as a non-profit organization: a great accomplishment for us. With current tax filings, we increase our contribution to the general social good, and increase our fiscal security.

In addition, as I have shared previously, I am leading our ICBM 2025 workshop committee, with continued members, Allison Marziliano and Chris Kilby. Chipper Dean is replacing Elizabeth Sarma who is on family leave (wishing her well). We are newly-joined by members of the SPC Advisory Group, Tamla Evans and Konstadina (Nadia) Griva. We have worked together to reduce the costs of attending both half- and full-day workshops, so attendees can enhance their behavioral medicine skills at the ICBM 2025. Thank you for proposing a number of excellent workshops for the Congress; they also increase the reach of the Congress, and add financial offsets to our conference costs.

As we have shared in the past, your member society dues continue to provide an important source of funds for our ISBM. We continue to look for opportunities to work with you to strengthen your local societies. Thank you for paying your invoices quickly.



Hopefully, many of you will join us in Vienna, and contribute to the excellence of our Congress. We look forward to seeing you there!

Sherri Sheinfeld Gorin, PhD, MS, FSBM
Chair of the ISBM Finance Committee



Update from INSPIRE and the Education and Training Committee

Dear ISBM Members,

We are excited to announce that INSPIRE (the International Network for Supporting Promising Individual Researchers in their Early Career) and the Education and Training Committee have teamed up to set up a monthly webinar series starting this year. We are thrilled to have so many international experts on board and to share an overview of all the inspiring talks planned for January to June 2025 on the next page. Topics include digital intervention development, collaboration, and resilience in a scientific career. Some of the webinars are more geared towards early career researchers while others target a broader audience.

Participation is free and any member of ISBM or its member societies are welcome! Please make sure to stay up to date regarding registration by visiting our [INSPIRE events homepage](#), where further information on the webinar contents and registration is posted regularly.

Moreover, we would like to announce that applications are open for the 2025 Health & Behaviour International Collaborative (HBIC) Award. The purpose of the award is to facilitate a mentorship collaboration with an international laboratory or research group under the guidance of an identified international mentor. The deadline to apply for the 2025 competition is **March 19, 2025**. Find more details [here](#).



Allison Marziliano, PhD
INSPIRE Committee Chair



Chris Kilby, PhD
Education and Training
Committee Chair



WEBINAR SERIES 2025

21 JAN, 2025	ENHANCING GLOBAL HEALTH THROUGH INTERNATIONAL COLLABORATIONS IN HEALTH PSYCHOLOGY DR LISA NEWSON 14:00PM UTC
12 FEB, 2025	MANAGING UP AND DOWN: NAVIGATING NON-TRADITIONAL CHALLENGES TO SCIENTIFIC CAREER SUCCESS DR KARINA DAVIDSON 16:00PM UTC
18 MAR 2025	DIGITAL INTERVENTION DEVELOPMENT, EVALUATION AND IMPLEMENTATION: SUCCESSES AND CHALLENGES PROF ANNE H BERMAN 12:00PM UTC
08 APR, 2025	THRIVING IN RESEARCH: PERSPECTIVES OF WOMEN BEHAVIORAL SCIENTISTS ON RESILIENCE ACROSS DIFFERENT CAREER STAGES AND TRAJECTORIES PROF SHIRLEY BLUETHMANN, A/PROF ERIN KENT AND DR STEPHANIE FITZPATRICK 17:00PM UTC
21 MAY, 2025	HEALTH DISPARITIES IN BEHAVIORAL MEDICINE DR MICHAEL STANTON 14:00PM UTC
17 JUN, 2025	ON THE IMPORTANCE OF OPEN-MINDEDNESS, COLLABORATION AND SERVANT LEADERSHIP PROFESSOR JOOST DEKKER 15:00PM UTC



Meet the Society of Behavioural Health, Singapore

With ISBM being a global organisation, it can sometimes be difficult to get to know the people from all of our member societies. To this end we have a new initiative - the “Meet the Member Society Interviews”. Kerry Sherman, ISBM President, will be interviewing the leadership of several of our ISBM Member Societies. For this second interview, Kerry has interviewed Susan Tan (President) and Rayner Kay Jin Tan (Treasurer) of the Society of Behavioural Health, Singapore. They talk about the past and current activities and their vision for the future of the society. Click [here](#) to watch the videorecorded interview.

Dear Susan, dear Rayner, it is a great pleasure meeting you! Please tell me a little bit about your society. How many members do you have and is there anything you think that our other member societies would be interested to hear about?

Rayner Kay Jin Tan: Thanks, Kerry. At the moment we have about 200 active members, including early career trainees, practitioners, students, and also our full members who are in the field of behavioral health and medicine. We started out with just an interest group of maybe 30, 40 people back in 2018. So our society really grew within the last years. I think the event that led to the establishment of a more formalized society was our very first scientific meeting, and I believe, Kerry, you were there to see the start of our society as well. Since then, we've really grown. I think one thing that we were really pleased to see is that we've grown not just in terms of members. Our mailing list includes all our past and active members. And I think we are close to about 500 people on our mailing list at this point in time. But I think what is great is that we did not just grow in numbers, but in terms of the breadth of expertise as well as specializations. You know, back in 2018, I don't recall much expertise on health coaching. But today, we have an entire interest group for that. Also, we're seeing a lot of new different groups come up, especially in the social aspects of health and medicine. So we have definitely seen a lot of growth, both in depth as well as in breadth of our membership.

Thanks, Rayner, and it's really quite an extraordinary period of growth. So I was wondering if you could reflect for a moment and tell me what you think of as being the activity or activities of your association or your society with which you're most proud?



Susan Tan: I think we really came a long way, and especially for this term. We really have collaborated with a lot of partners. So on the one hand, we have moved our scientific meeting from once every 2 years to annually because we see that there's interest from our members to attend the scientific conference. And the team really delivers a very good program every year. The speakers were all very diverse in their experiences. You know how diverse behavioral medicine can be, and that's, I think, what keeps the audience coming back because they learn a lot more, outside of their scope – that's what makes the conference very interesting. We are also very proud about the Health Coaching Interest Group. It grew from an interest group to a chapter. And now we have launched the Competency Framework for Health and Wellness Coaching in Singapore. We have launched the Health and Wellness Coach Registry in as short as two years, and we are hoping that the registry will grow and help to maintain a minimal standard of Health and Wellness Coaching in Singapore and beyond. We hope that it will help the profession to grow in the region as well. I think that's really exciting.

Could you perhaps tell me a little bit more about that? Is there a particular partner that you've worked with or is it coming entirely from within the society?

Susan Tan: When we started this project of looking at the Competency Framework, it's really from within the society. So a few of us from the Health Coaching Interest Group came together and we felt like we needed to have a minimal standard of practice because health coaching has been interpreted differently in different corners of Singapore, and we thought that we needed to bring everybody together so that we can align with regard to our practices, at least in Singapore. That's where we started to work out the standards. And having done that, we thought that it would be great to collaborate with a global partner who helps to validate our standards. We actually knocked on different doors and the UK International Health Coaching Association was willing to collaborate. They looked at the quality of our work, and we had many meetings and discussions. And finally, we came together and said we should align our standards because they are pretty happy with what they are seeing. Moreover, the team has been working with local organizations as well. For instance, putting together position papers to influence policy.

It's really exciting and potentially very impactful work. So I would also like to ask you where you would like the society to be in ten years' time?

Rayner Kay Jin Tan: We've been slowly building the society's position and role in the local health landscape to be seen as a trusted and also a professional partner. If I took this back to the Health Coaching Chapter that Susan is leading, not all of the Executive Committee members are health coaches. But I think it's also important for



us to recognize that behavioral health is just so broad and we might not all have the same expertise. But we all agree on the benefits that a particular movement within our society would have on the broader society, as well as on policies in Singapore. In that sense, I think we have been doing position and policy papers or briefs regarding areas like lung cancer, breast cancer, HIV, vaping and smoking. These are some of the areas that we have convened and discussed on so far. As we grow in terms of our society, as well as in terms of partnerships, I hope in ten years' time we'll be seen as the professional society that can really help convene expertise and make professionals across different levels of their careers, across different types of practice come together. I think our strength as a society in Singapore is that we are professional. We might have certain interests that align with policies, but we always try and remain interdisciplinary and non-biased in that sense, keeping in mind what benefits the greater good in Singapore. So I think growing that influence will be something that's a tenure project in the making right now.

Susan Tan: Essentially, in ten years from now, I think that we will be bigger in terms of numbers and I hope we'll be able to bring together more people to the same table. Therefore, I encourage members with a certain interest or a certain passion to form interest groups. And that's where we can bring people within that area to come together to talk because it is this common dialogue opportunities, that kind of spark of ideas and spark of interventions that can be a lot more helpful for the society. And I think that is where we are trying to grow. And hopefully, we can try to help our neighboring countries to grow in the same areas. That would be very neat.

That sounds fantastic! Could you tell me a little bit more about how you've disseminated these position papers and how you managed to get it out there to the audience that you were hoping to reach?

Rayner Kay Jin Tan: We publish some of the position policy papers on our website as well as in the context of our past and future events. One thing that we also make sure to do is to have almost a monthly webinar series where these things might be announced. Some policy roundtables are also closed door. So sometimes we also convene policy makers with practitioners together in like closed door settings to make sure that the knowledge is disseminated and implemented within a certain field. So I think these are some of the ways that we've done things so far. Furthermore, our scientific meeting is another big platform that we have every year. This is where people and policymakers get together and it is a possibility to highlight some of these advances among our members and what the society has been doing.



Thank you so much. So, is there anything else that either of you wanted to add?

Susan Tan: I feel that we are very lucky to be given the opportunity to learn from ISBM, and to bring behavioral medicine to Singapore with the mission of fostering research in a collaborative manner and to disseminate the findings to the practitioners and to the lay persons to influence their behaviors and their health outcomes. We hope to do more of that to bring the findings down to the ground, so that we can really influence behavior.

Well, thank you both. It's been an absolute pleasure to speak with you. I'm really excited about the bright future of the society in Singapore, and we look forward to hearing more about what the society is doing over the next few years!

For more information on the Society of Behavioural Health, Singapore, click [here](#) or on the logo below.



**Society of Behavioural Health
Singapore**



Luminaries in behavioral medicine – Winnie Mak

This series is dedicated to researchers who have made outstanding contributions to the field of behavioural medicine. I am thrilled that this issue will feature Professor Winnie Mak of the Chinese University of Hong Kong, a distinguished international expert at the intersection of Public Health, Community Health, and Clinical Psychology with a focus on stigma and diversity, digital mental health, and application of Buddhist psychology for well-being and social equality. Moreover, Professor Mak is one of the Master Lecture Speakers at the upcoming ICBM (August 6-9), 2025, in Vienna, Austria.

Dear Professor Mak, thank you so much for agreeing to be interviewed for the ISBM Newsletter. The first question I have for you is: What initially drew you to your field of research?

Winnie Mak: The reason is personal and rooted from my own lived experiences. When I was young, I immigrated to the United States and was teased by my classmates for being Asian. I was called names, laughed at for my appearance, and asked many uneducated questions about my place of origin (i.e., whether I rode cow to school in Hong Kong). This rooted a question in me: why do people judge others so easily just because we are different? Due to these early experiences, I developed social anxiety disorder and persistent depressive disorder that lasted til young adulthood. For a long time, I worried about how others would perceive me if they knew I had mental health challenges. Fast forward many years later. I came back to my place of birth, Hong Kong, as it was beset by much stigma toward many minoritized groups. I endeavored to conduct stigma research with the mission to destigmatize minoritized groups and advocate for diversity and social equality.

As I worked towards mental illness stigma reduction, I realized that mental health promotion is the other wing of the bird. Mental well-being for all cannot be actualized with just stigma reduction, we also must raise awareness in the general population that mental health matters and is relevant to all of us. Thus, I leverage digital technology with the aims to provide an array of different evidence-based psychological interventions and mental health self-care tools for people to access for free. After all, we are all interconnected, and with mindfulness and compassion, we can work towards a society that celebrates diversity and upholds mental well-being for all. Thus, my research on stigma and diversity, digital mental health, and Buddhist psychology converge to the realization of well-being and social equality for all.



Among the many seminal contributions to the field that you have made, which ones do you personally consider most important and why?

Winnie Mak: Over the past 22 years, stigma continues to be investigated by only a few of us in Asia, many of whom were my former students. What I am most delighted about is my involvement in starting the personal recovery movement and related research in Hong Kong, where mental illness is still being seen mainly from a medical model and research is still dominated by mental health professionals' perspectives with little participation from people with lived experience. The personal recovery movement enables people with lived experience to reclaim personhood beyond the mental disorder and take agency in deciding what are the most suitable approaches in supporting themselves to live self-gratifying lives. Moreover, I consider co-founding StoryTaler, a social enterprise where we work collaboratively in mental health advocacy through storytelling to be personally significant and collectively impactful. I am able to leverage my own lived experience as well as my research expertise in a team with diverse strengths and talents. In the process, people from all walks of life with the mission of mental health advocacy come together and actively participate in storytelling to reduce stigma and promote mental well-being. Research is one of the means to investigate the effects of storytelling in mental health advocacy, stigma reduction, and well-being promotion. Implementing in real life is what enables and sustains changes over time. Everyone is unique, and our collective efforts in changing the mental health landscape are precious.



When you think about the beginning of your career, how has your field of research evolved, what have been the major paradigm shifts?

Winnie Mak: Mental health was very often relegated to mental illness and pathologies with little research focusing on the experience of human flourishing among people with mental health challenges and ways to translate and implement what we have investigated into real-life solutions with real impacts. I think nowadays more and more researchers recognize the importance of well-being and user experience beyond pathologies and begin to partake in person-centered research in mental health and user experience research in service uptake and utilization. This applies not only to research related to stigma and personal recovery, but also to the design of psychological interventions and service systems. Certainly, we still have a long way to go but seeing active participation and co-creation in research and mental health advocacy energizes me.

Where do you currently locate the biggest gaps of knowledge in your specific area of interest?

Winnie Mak: I started building and testing the first online mindfulness-based interventions back in 2009 when it was not common to use digital technology to promote mental health self-care, prevent mental health challenges and related risks, and treat common mental disorders. Nowadays, we see a burgeoning of digital interventions for various health conditions. Our team has put together a one-stop digital mental health platform that integrates online-offline services from self-care promotion to treatment of common mental health challenges (<https://www.ictplus.org/>) after years of conducting various experiments and randomized controlled trials to test their efficacy. Yet, the greatest challenge lies in low uptake and engagement. No matter how effective we found an intervention to be through randomized controlled trials, if the digital intervention is not being used by real-life users, we are still unable to enhance public mental health. Thus, our team is putting efforts into studying different messaging and nudging approaches, the impact of personalization, and user experience to increase uptake and continued engagement, especially since mental health requires continued self-care and practices to stay well.

Moreover, we need more research that targets the structures that sustain and perpetuate stigma and inequities. Rather than focusing on individual-level interventions alone, we also must address organizational, structural, and sociocultural determinants and tackle related barriers in order to change the norms and cultural values and fundamentally transform the systems and the society to be mental health and diversity-friendly.



What has been most important for you to be able to build such a meaningful career? What would you recommend to early career researchers in the field? Do you have specific recommendations to those ECRs from minoritized groups?

Winnie Mak: I am blessed to be mentored by giants in the field who have a compassionate heart, bold vision, and openness to let me have the autonomy to explore areas of my own interests that ring true to my core. Such supportive mentorship enabled and empowered me to delve into issues and engage in research and work that matter to me as well as can potentially make social impacts. I am doubly blessed to work with students and allies who share common values and vision and support each other along this often challenging journey. I encourage early career researchers to pursue research that ignites and fuels their passion rather than following any trends that they are not particularly interested in. For those of you who have been minoritized, I encourage you to embrace your uniqueness and innate values and try not to let the mainstream culture and environment define you and dictate your career. Allow yourself time and space to self-care and get support from your allies. When we are true to our values, our work will be imbued with meaning and purpose.

Thank you so much for taking the time for this interview, and for your interesting and enlightening answers!



Winnie Mak with her team in the Diversity & Well-Being Laboratory



Winnie W. S. Mak, PhD, is a Professor and Director of the Diversity & Well-Being Laboratory at the Department of Psychology at the Chinese University of Hong Kong. She is a fellow of the Society for Community Research and Action (SCRA), the American Psychological Association (APA), and the Association for Psychological Science (APS), and the Founding Vice President of the Hong Kong Society of Behavioral Health, an ISBM member society. She is a member of the Editorial Boards of Mindfulness and Stigma and Health and has received numerous honors and awards, including the 2024 Excellent Health Promotion Project Award and 2023 Social Welfare Excellence in Care Award. She has been ranked the World's Top 2% Scientists by Elsevier and Stanford University and named as one of the Top Scientists in Psychology in China by Research.com.

Professor Mak's research works focus on the promotion of well-being to the general public and reduction of stigma attached to various health conditions and social identities. Her Master lecture at the ICBM 2025 will discuss how digital technology can be leveraged to reduce stigma, integrate self-care into our everyday lives to promote and maintain one's mental wellness and augment existing mental health services to create a more comprehensive and personalized service system, especially in places where mental health resources are scarce and evidence-based services are inaccessible.



A behavioral medicine view on... Social connectedness and engagement

The last issues of the ISBM Newsletter have concerned the role of behavioral medicine in the face of climate change. Loneliness is another global public health concern. The 'loneliness epidemic' concerns the ongoing trend of social isolation experienced by people around the globe. Therefore, this section's topic, **social connectedness and engagement**, aims to present different perspectives from our members and member societies on what aspects of social connectedness and engagement are researched and what the role of behavioral medicine as a field is regarding this globally relevant topic.



Ellen Beckjord, PhD, MPH
President of the Society of Behavioral Medicine

"Social connectedness is an important construct in behavioral medicine. Connectedness is a component of self-determination theory — a framework that's been used to develop many evidence-based behavior change interventions — because of the relationship between a sense of connectedness and intrinsic motivation to change and/or maintain engagement in healthy behaviors. Connectedness helps to facilitate healthy habits and, for most, is instrumental to emotional health. Given how technology has changed how we can connect and the rapid pace at which those changes continue, behavioral medicine scientists and practitioners have an opportunity to continuously understand how new ways of using technology do — or don't — facilitate social connectedness and engagement, and to recommend tactics for supporting equitable access to and achievement of authentic connection."



Allison Marziliano, PhD
INSPIRE Committee Chair
of ISBM



Michael Diefenbach, PhD
Strategic Planning Committee Chair
of ISBM

“Loneliness and social isolation have taken center stage as urgent global challenges. Nearly a quarter (24%) of the global population reports feeling lonely. The U.S. Surgeon General declared loneliness and social isolation as a public health epidemic. The World Health Organization has named loneliness a pressing health threat and announced a new commission on social connection. In response, the United Kingdom and Japan have appointed ministers of loneliness. The negative outcomes related to both social isolation and loneliness are severe and long-lasting. Social Isolation has been associated with an increased risk of dementia, and loneliness with higher levels of depression, anxiety, and suicide. The endemic rates at which these conditions are occurring in this post-pandemic world, have made improving social functioning a global public health issue. Greater attention to refined measurement of social isolation and loneliness, innovative intervention development to improve social functioning, and improved social programs are needed in the next decade. Our special issue in the *International Journal of Behavioral Medicine*, titled “[Social Isolation and Loneliness in Acute and Chronic Illness](#)”, summarizes the current state of research in this area with the intention to encourage continued conversation to move this field forward. The 14 articles in this special issue document social isolation and loneliness across many conditions. They range from common diseases, such as cardiovascular disease and cancer, to rarer conditions. The papers represent work with geographically diverse populations, documenting the global problem of social isolation and loneliness, as well as studies that vary methodologically, encompassing qualitative and quantitative work, and cross-sectional and longitudinal assessments. Our special issue, the first of its kind, provides both an introduction into the field of social isolation and loneliness research, as well as detailed information for the seasoned researcher to advance the field.”



Elizabeth Brondolo, PhD

President of the Academy of Behavioral Medicine Research (ABMR) in collaboration with the ABMR Communications Committee



“Social relationships matter profoundly for health. Negative social experiences, such as conflict and isolation, are linked to unhealthy behaviors (e.g., smoking) and adverse health outcomes, including increased mortality risk. For instance, the health risks associated with social isolation and loneliness are comparable to, or even exceed, well-established risk factors like smoking, obesity, and physical inactivity. On the other hand, supportive relationships—with family, friends, colleagues, and even neighbors—foster healthier behaviors and have a protective effect on health. Supportive relationships influence health through diverse mechanisms, including sharing knowledge, shaping attitudes and social norms, providing emotional and material support during stress, and reducing physiological stress responses. Interventions aimed at improving access to and benefits from social support show promise, yet more research is needed to understand their long-term impact on health outcomes. This is particularly critical as we seek to develop scalable, evidence-based strategies to improve public health through social connection.”



Caitlin Liddelow, PhD
President of the Australasian Society for
Behavioural Health and Medicine

“Social connection and engagement has been an important topic of research to members of the Australasian Society for Behavioural Medicine, especially with the ageing populations in our region. The role of social connection in facilitating positive physical health and wellbeing outcomes has featured in several of our past annual conferences, specifically at ASBHM2023 in Geelong, Victoria and ASBHM2024 in Adelaide, South Australia. For example, the importance of social identity and identity leadership in promoting physical activity engagement was presented in Adelaide (Dr Mark Stevens & Professor Tegan Cruwys, Australian National University; see related paper [here](#)). Similarly, other members of our society have explored social connection within those that follow a vegan diet (Dr Megan Lee, Bond University) and the role of online communities in facilitating social support and connection for individuals living with chronic disease (Dr Charlene Wright, Griffith University).”



Professor Erik Olsson
President of the Swedish Society of
Behavioral Medicine



Photo by Mikael Wallerstedt

“One aspect of social connectedness and engagement is the connectedness we as researchers have, or should have, with our study participants. Especially when it comes to developing behavioural interventions, engagement is very important and many studies may fail due to participant recruitment problems or attrition. I know this by personal experience. So-called Patient and Public Involvement (PPI) has become more highlighted lately. Structured methods for how to do this have been developed, not the least from our British colleagues (e.g., guidelines from the British MRC and the “STANDARDS” from NIHR).

At Uppsala University we have just started a study where we apply these guidelines and have put together a Research partner panel with six myocardial infarction patients younger than 55 years. They are involved in all the decisions we make in the study, both regarding study methodology and intervention design. Our experience so far has been very positive. There is a very strong research engagement from this panel, and what is more, they really appreciate meeting each other. This study aims to evaluate an intervention targeting cardiac distress in young myocardial infarction patients. This group have more coping and rehabilitation challenges than older patients and they are rare birds in cardiac rehabilitation and they often feel that they do not fit in. This is what we expected and it was the rationale for the study. However, after working with the patients as research partners and hearing their stories, we think that this study will be even more important than we first believed. We believe that the close collaborative work with patients as research partners according to the PPI guidelines and “STANDARDS” (NIHR) will also lead to more participant engagement in the intervention, faster recruitment and less attrition in our study later.”



Professor Sakari Suominen

President of the Finnish Section of Behavioral Medicine, which is a part of the Society for Social Medicine in Finland

“Social relations form our identity and represent an irreplaceable fundament of our well-being. Without social relations life in the long run starts to lose meaning and the situation endangers all dimensions of health. Thus, social connectedness and engagement constitute one of the most important research areas of Behavioral Medicine, too. However, concurrently in Finland the topic has not gained fully the attention it deserves. A quick literature search reveals that there could to be more on-going active research projects that focus on social support or social integration, particularly after the experiences of closure of society in connection with the COVID-19 pandemic. I think that the situation in Finland is not unlike the situation in many other Western democracies. In the past decades we learned much of social integration and social support as health assets and integrated the concept into many academic study programs.

This all is fine but after that, we have, according to my evaluation, failed to pick up a central question for further studies, namely how we could strengthen receipt of social support. The initial studies focused on provision of social support and largely followed the perspective according to which social support and thus social connectedness could be strengthened if we all would learn how to provide more of it to our fellow citizens. Social support was seen as a matter of supply. Later it became clear that the positive effects of social connectedness are not merely a question of provision of social support but also a matter of the individual’s capability to receive and accept available social support when needed. Thus, the whole study question became a lot more complicated and maybe decreased the scientific interest towards it. However, in the future we would precisely need more of these kinds of studies, i. e., studies that also focus on the determinants of receipt of social support. Why does it seem to be easier for some compared to others to accept available support and could we somehow by external measures influence the process? The knowledge would be very valuable in reshaping health promotion for future demands.”



Susan Tan, MA
President of the Society of Behavioural Health,
Singapore



“Social connectedness is a crucial determinant of mental health and overall well-being, as demonstrated by global research. The Society of Behavioural Health Singapore (SBHS) believes that behavioural medicine, as a field, bridges the gap between medical science and behavioural interventions and plays a crucial role in addressing this globally relevant topic. The SBHS and has been at the forefront of addressing this issue at both individual and community levels. This is evident in the Society’s recent events. Technology serves as both a bridge and a barrier to social connectedness in today’s digital age with excessive screen time becoming a barrier to meaningful relationships and mental wellbeing. Recognizing this issue, the SBHS 4th Scientific Meeting on October 26, 2024 convened experts to discuss excessive screen use and the Singapore Advisory on Screen Use in Children. However, guidelines alone are insufficient; individuals require support to navigate social environments, change perceptions, build skills, and sustain motivation. The person-centric health and wellness coaching bridges this gap by addressing the unique needs, values, and motivations of each individual as well as supporting, engaging and facilitating an individual’s journey toward sustainable behavioural changes through a trusting relationship between a health and wellness coach and the client. In alignment with this vision, SBHS has developed a comprehensive Health and Wellness Coaching Competency Framework a year ago and launched the inaugural Health and Wellness Coach Registry in October 2024. These initiatives aim to elevate the practice of health coaching, ensuring quality and consistency in this critical domain. At the community level, initiatives like Patient and Public Involvement (PPI) in research and teaching kitchens create collective learning spaces, strengthening social connectedness. Through partnerships with community organizations and private sector collaborators, SBHS is committed to addressing social connectedness and supporting sustainable lifestyle changes for better health outcomes.”



Professor Konstadina Griva
Editor of the International Journal of
Behavioral Medicine (IJBM)

“Climate Health Connect – Talk Climate Live Healthy” is a research/community initiative set up by LKC Medicine Health Psychology Team, NTU (Konstadina Griva) to promote and raise awareness and social engagement on issues related to Environmental and Planetary Health. Launched in the 2024 Singapore Health & Biomedical Congress first and the Arts Science and Medicine Community Festival, the climate health connect team set up booth to display nature-based art by local artists to stimulate dialogue with communities. HCPS were invited to a study climate sensitive health practice study and public for Climate Health PPI group as part of Climate Transformation Program in NTU Singapore. The latter featured in Media in Singapore (Channel 5). Results of the HCP studies to be disseminated in the upcoming conferences including SBM 2025 and ICBM 2025.”



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