



## AIHaMBRA Project Thematic Capacity Building Workshop *Application of eHealth Tools to Reduce Alcohol-Related Harm*

### Workshop 5 – Draft Report and Conclusions

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## Background

The AIHaMBRA Project workshop *Application of eHealth tools reduce alcohol related harm* was held with the objective of supporting European Member States in knowledge gathering, sharing best practice, capacity building in the role of digital health technologies (DHTs) and strengthening evidence-based alcohol policy to reduce alcohol-related harm across multiple sectors, adopting a health in all policies approach. The workshop was co-hosted by the Spanish Ministry of Health, with support from the Program on Substance Abuse of the Public Health Agency of Catalonia.

The workshop comprised two sessions:

- Session 1, 15<sup>th</sup> February 2022, *Digital approaches to identify and reduce alcohol consumption and harm: do they work and how are they best used?*
- Session 2, 17<sup>th</sup> February 2022, *Practical implications - tailoring approaches to specific contexts and populations*

## Digital health tools and alcohol use

Europe has the highest level of alcohol consumption and alcohol-related harm in the world. Alcohol consumption, even in moderate amounts, plays a significant role in the burden of disease, mortality, and costs to healthcare and society including from alcohol-related cancer (1) and other NCDs (2,3,4,5).

There is growing evidence that digital health technologies (DHTs) or eHealth tools can improve health and care outcomes (6). DHTs allow for novel delivery channels and enable better targeted and personalised medicine (7). They can enable patients to self-manage their treatment and health, freeing up healthcare providers' time and optimising resources (8,9).

Regarding alcohol, DHTs may facilitate the systematic collection of patient-reported data on alcohol consumption, and improve clinical management by providing tailored feedback, point-of-care reminders, tailored educational materials, and referral to online self-management programs. Moreover, digital interventions facilitate non-stigmatising detection and monitoring of alcohol problems due to anonymity and 24/7 accessibility (10,11). Thus, the effectiveness of DHTs in tackling alcohol harm and the potential for their large-scale implementation are important considerations for public health. However, examples of large-scale implementation are scarce. Moreover, while the use of computers and smartphones is widespread, technologies such as wearables, virtual reality, artificial intelligence, motivational robots or digital human advisors are just emerging. In addition, the COVID-19 pandemic has accelerated the development and uptake of digital health tools.

## References

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## The workshop, *Application of eHealth Tools to Reduce Alcohol-Related Harm*

### Workshop structure

Both sessions opened with a welcome message from the hosting Member State, Spain, and a representative of the European Commission. This was followed by a series of presentations grouped into two topics, break out small group discussions focusing on a pre-prepared question with feedback of outcomes to the main group, the session was then wrapped up with a brief summary by the Chair and topic experts/presenters. The workshop agenda is attached as Annex 1.

Welcome and introduction
Presentations within two key topics
Breakout small group discussions and feedback to main group
Summary and wrap up

### Session one

#### *Session topics*

- *Evidence update*, giving an overview of latest evidence and digital approaches to alcohol use and other lifestyle related risk factors
- *Digital health: empowerment and equities*, looking at how eHealth approaches can empower patients and citizens and validation and accreditation of digital tools.

#### *Break out group discussion question*

How can Member States design policy to promote more equitable and sustainable access to digital health tools to tackle alcohol problems?

### Session two

#### *Session topics*

- *Boosting scale-up of digital alcohol approaches* examining barriers and facilitators to the use of eHealth tools, Just In Time Adaptive Interventions (JITAI) and using avatars to motivate behaviour change (the PAHO PAHOLA intervention)
- *Showcasing digital alcohol approaches – large scale deployments*, presented the results of the AlHaMBRA Project review of school-based m/eHealth interventions, and the Beveu Menys (Drink Less) primary care intervention from Catalonia.

#### *Break out group discussion question*

Which are the priority settings for eHealth approaches to tackle alcohol consumption and problems and how can policy promote engagement with stakeholders in these areas?

## Attendance

Session 1 brought together 62 participants, 55 from the EU and 7 non-EU. Session 2 brought together 49 participants, 44 from the EU and 5 non-EU. In total there were 46 attendees from public administration, 9 from academia, 12 from civil society organizations, and 35 from health (clinical and research). See Annex 2 for a breakdown of participation by session, country and sector.

## Conclusions and lessons learned from the workshop

During the online sessions panellists presented their knowledge, perspectives, and experiences, through short videos<sup>i</sup> and live question and answer sessions. Then, in small-group discussions, with a pre-assigned moderator and rapporteur, participants were instructed to reach a level of consensus on responses to a concrete policy question. Their discussion and points for further consideration were reported back to and discussed with the whole group to arrive at key messages and proposed actions to address alcohol-related harm through action on policy and taxation, addressing cross-border issues, and unrecorded and illicit alcohol.

The main take-home messages raised and supported by participants are summarized in *Table 1* below. A more detailed account of the presentations and discussions is given in the next section.

**Table 1. Main conclusions of workshop sessions**

- Member States should support **community actors** to co-design tools, bridge the gap between developer and user, and encourage digital literacy for increased health-promoting effect
- Interventions to address alcohol use can be **embedded with broader lifestyle targeting interventions**
- **Access, inequity, literacy and the digital divide** are important issues to be addressed
- Investment and regulation is needed to ensure **data security, ethical use of information and privacy**, and to reassure users
- **Tailored and targeted interventions**, using human-centred design can contribute to uptake and adherence
- There are lessons to be learned from commercial practices, in terms of **development and marketing**
- The **evidence** behind digital health tools, and **potential conflicts of interest**, should be evaluated to ensure quality, evidence-based tools and drive **trustworthy accreditation systems**
- eHealth and DHTs can be used **to train professionals and for myth-busting** (i.e. health literacy)
- A **balance needs to be reached between guided (human interaction) and non-guided interventions**
- **Social marketing and profile analysis** can help reach target groups obliquely and secondary target groups.

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<sup>i</sup> Workshop videos can be seen on the workshop web-page:  
<https://thematic-workshop5-ehealthtools.onsitevents.com/contenidos>

## Workshop evaluation

At the end of each session participants were invited to complete an online evaluation survey provided in the session and immediately afterwards in a follow-up email. The brief survey was designed to be quick and easy and participants could choose to remain anonymous. A summary of the workshop evaluation is shown in Annex 3.

Participants were asked to give four quantitative scores to the session they had attended:

- Overall evaluation - How would you rate the session overall? (score between 1→10)
- The topics and aspects covered by the speakers were relevant for the overarching theme of the session (1→5)
- I learned actionable information for my work and/or consolidated my understanding/knowledge (1→5)
- There was enough time and opportunities allocated for interaction with the speakers and between participants (1→5)

Participants were also invited to give feedback in three free text questions:

- Which speakers of the session did you find the most interesting/informative/engaging? (name, organisation or topic)
- Did you find any topic missing which you would have liked to see covered in relation to this session's theme?
- Do you have any comments or suggestions you would like to share?

## Evidence review / background briefing document

The workshop was supported by a background briefing paper, to **introduce the key points and issues for debate in the capacity building workshop** and provide a literature review of DHTs and their applications for the prevention and treatment of harmful alcohol consumption.

The document can be viewed at:

<https://thematic-workshop5-ehealthtools.onsitevents.com/contenidos>

## Presentations and discussions

### Session 1, Tuesday 15<sup>th</sup> February 2022, Digital approaches to identify and reduce alcohol consumption and harm: do they work and how are they best used?

*Welcome and introduction to the session.*

*Chair: Manuel Cardoso, SICAD*

Participants were welcomed to the session by Joan Ramon Villalbí, Government Delegate for National Plan on Drugs, Spanish Ministry of Health. (Video presentation).

- Agnes Mathieu-Mendes Head of Unit, Health and Digital executive Agency (Hadea), European Commission gave an overview of alcohol-related priorities and projects funded within the Hadea portfolio and described the links between the DEEP SEAS, FAR SEAS and AIHaMBRA Projects. (Live presentation)
- Filip Karan Junior Policy Manager for Digital Health, European Public Health Alliance (EPHA) introduced participants to Digital Health within the frame of Shaping Europe's Digital Future Strategy and the EU eHealth Stakeholder Group. (Video presentation).

*Evidence update video presentations + live Q&A with presenters*

*Chair: Toni Gual, FCRB*

- Silvia Matrai, Coordinator of public health projects, Addictions Unit, Hospital Clínic, Barcelona gave an overview of digital behavioural health approaches to tackle alcohol problems, obesity and sedentarism. (Video presentation).
- Heleen Riper, Professor, Clinical Psychology, Vrije Universiteit (VU) & Dept. of Psychiatry, Amsterdam University Medical Centre (VUmc), the Netherlands presented evidence on digital approaches to lifestyle-related risk factors, focusing on efficacy, acceptability, uptake and compliance, and feasibility. (Video presentation).

*Digital health: empowerment and equities + live Q&A with presenters.*

*Chair: Toni Gual, FCRB*

- Marcus Bendsten, Docent in Medical Informatics and Senior Lecturer in Experimental Social Medicine and Public Health, Linköping University, Sweden discussed E-tools as a tool to empower patients and citizens. (Video presentation).
- Imma Grau Corral, Coordinator of the mHealth Observatory, Hospital Clínic, Barcelona discussed how to choose what to use: validation and accreditation of digital tools.

*Breakout small group discussions*

Following a short break, participants were placed in breakout rooms for small group discussions with the aim of answering the question:

***How can Member States design policy to promote more equitable and sustainable access to digital health tools to tackle alcohol problems?***

## Session 2, Thursday 17th February 2022, Practical implications - tailoring approaches to specific contexts and populations

### *Welcome and introduction to the session*

*Chair: Toni Gual, FCRB*

Participants were welcomed to the session by Pilar Aparicio, Director General of Public Health, Spanish Ministry of Health. (Video presentation).

- Hannah Nohlen, Analyst, Competence Centre for Behavioural Insights, JRC, EC, gave a presentation, *Applying behavioural sciences to EU policy making*. (Video presentation).

### *Boosting scale-up of digital alcohol approaches + live Q&A with presenters*

*Chair: Fleur Braddick, FCRB*

- Hugo López Pelayo, Junior Group Leader, Addictions Research Group, IDIBAPS/Hospital Clínic, Barcelona & Hon. Secretary, Special Interest Group on Digital Interventions, INEBRIA, discussed barriers and facilitators to using eHealth tools for patients and practitioners. (Video presentation).
- Donna Spruijt-Metz, Director, CESR Mobile and Connected Health Program, University of Southern California, introduced key concepts in Just In Time Adaptive Interventions (JITAs).
- Maristela Monteiro, Snr. Advisor for Alcohol to PAHO, presented, Revolution in interaction: Are social robots and human avatars capable of motivating change?

### *Showcasing digital alcohol approaches - large scale deployments*

*Chair: Fleur Braddick, FCRB*

- Silvia Matrai, Coordinator of public health projects, Addictions Unit, Hospital Clínic, Barcelona & Silvia Grothe, Junior Researcher, Clínic Foundation for Biomedical Research, Spain / University of Oxford, UK presented results from the AIHaMBRA systematic review of school-based m/eHealth interventions.
- Joan Colom, Director of the Programme on Substance Abuse, Catalan Public Health Agency (ASPCAT) & Lidia Segura, Leader of the Alcohol Group, Catalan Public Health Agency (ASPCAT) presented General population approaches – Beveu Menys/Drink Less – A regional programme from Catalonia

### *Breakout small group discussions*

Following a short break, participants were placed in breakout rooms for small group discussions with the aim of answering the question:

***Which are the priority settings for eHealth approaches to tackle alcohol consumption and problems and how can policy promote engagement with stakeholders in these areas?***



## Annex 1: Workshop 5 agenda

Session 1 – Tuesday 15<sup>th</sup> Feb 2022 – *Digital approaches to identify and reduce alcohol consumption and harm: do they work and how are they best used?*

<b>Time (CET)</b>	<b>Topic (and format)</b>	<b>Speakers</b>
13:25	Participants admitted to the meeting	
13:30	<b>Introduction and briefing</b> <ul style="list-style-type: none"> <li>- Welcome from hosting Member State – Spain</li> <li>- Welcome from the EC hosts</li> <li>- Shaping Europe’s Digital Future Strategy – the EU eHealth Stakeholder Group experience</li> </ul>	Manuel Cardoso (chair) <ul style="list-style-type: none"> <li>- Joan Ramon Villalbí, (MoH, ES)</li> <li>- Agnes Mathieu-Mendes (HaDEA)</li> <li>- Filip Karan (EPHA)</li> </ul>
13:50	<b>Evidence update (+ Q&amp;A)</b> <ul style="list-style-type: none"> <li>- An overview of digital behavioural health approaches to tackle alcohol problems, obesity and sedentarism: Why, What, For &amp; By whom</li> <li>- Evidence and roadmap on digital approaches to lifestyle-related risk factors: efficacy, acceptability, uptake, compliance, and feasibility</li> </ul>	Toni Gual (chair) <ul style="list-style-type: none"> <li>- Silvia Matrai (FCRB, ES)</li> <li>- Heleen Riper (VU, NL)</li> </ul>
14:20	<b>Digital health: empowerment and equities (+ Q&amp;A)</b> <ul style="list-style-type: none"> <li>- eHealth approaches as tools to empower patients and citizens</li> <li>- How to choose what to use: validation and accreditation of digital tools through the Catalan mHealth Observatory</li> </ul>	<ul style="list-style-type: none"> <li>- Marcus Bendtsen (Linköping, SE)</li> <li>- Imma Grau (mHealth Observatory, ES)</li> </ul>
14:50	10-minute break	
15:00	Expert summary + introducing discussions (live)	Fleur Braddick + Silvia Matrai/ Heleen Riper
15:10	Breakout discussions – (small parallel groups of 8-10 people): <ul style="list-style-type: none"> <li>▪ <i>Discussion question (TBC) – How can Member States design policy to promote more equitable and sustainable access to digital health tools to tackle alcohol problems? (3 top policy points)</i></li> </ul>	Moderators and rapporteurs pre-assigned to each group
16:00	Feedback to whole group <ul style="list-style-type: none"> <li>- Brief summaries by rapporteurs/moderators + Round of comments</li> </ul>	Fleur Braddick (Chair) Rapporteurs and Moderators
16:45	Wrap up by hosts and sub-topic experts	Fleur Braddick + Silvia Matrai/ Heleen Riper
17:00	End of session 1	

**Session 2 – Thursday 17<sup>th</sup> February 2022 – Practical implications - tailoring approaches to specific contexts and populations**

<b>Time (CET)</b>	<b>Topic (and format)</b>	<b>Speakers</b>
13:25	Participants admitted to the meeting	Toni Gual (Chair)
13:30	<b>Intro to the session &amp; Messages from the last session</b> <ul style="list-style-type: none"> <li>- Welcome from hosting Member State – Spain</li> <li>- Applying behavioural sciences to EU policy making</li> </ul>	<ul style="list-style-type: none"> <li>- Pilar Aparicio, MoH, Spain</li> <li>- Hannah Nohlen (JRC, EC)</li> </ul>
13:50	<b>Boosting scale-up of digital alcohol approaches (+ Q&amp;A)</b> <ul style="list-style-type: none"> <li>- Barriers and facilitators to using eHealth tools for patients and practitioners</li> <li>- Reducing disruption and intrusion to the user: wearables and Just in Time Adaptive Interventions (JITAI)</li> <li>- PAHO - Revolution in interaction: Scaling up human avatars to motivate population level change?</li> </ul>	Fleur Braddick (chair) <ul style="list-style-type: none"> <li>- Hugo Lopéz Pelayo (IDIBAPS, ES)</li> <li>- Donna Spruijt-Metz, (Uni. of Southern California, USA)</li> <li>- Maristela Monteiro (PAHO)</li> </ul>
14:20	<b>Showcasing digital alcohol approaches - large scale deployments (+ Q&amp;A)</b> <ul style="list-style-type: none"> <li>- Results from the AlHaMBRA systematic review of school-based m/eHealth interventions targeting children and young people</li> <li>- General population approaches through primary care – Beveu Menys/Drink Less – A regional programme from Catalonia</li> </ul>	<ul style="list-style-type: none"> <li>- Silvia Matrai &amp; Silvia Grothe (FCRB, ES)</li> <li>- Joan Colom &amp; Lidia Segura (ASPCAT, ES)</li> </ul>
14:50	10-minute break	
15:00	Expert summary + introducing discussions (live)	Fleur Braddick + Silvia Matrai
15:10	Breakout discussions – (small groups of 8-10 people): <ul style="list-style-type: none"> <li>▪ <i>Discussion question (TBC) – Which are the priority settings for eHealth approaches to tackle alcohol consumption and problems and how can policy promote engagement with stakeholders in these areas? (3 priorities)</i></li> </ul>	Moderators and rapporteurs pre-assigned to each group
16:00	Feedback to whole group – <ul style="list-style-type: none"> <li>- Brief summaries by rapporteurs/moderators + Round of comments</li> </ul>	Toni Gual (Chair) Rapporteurs and Moderators
16:50	Wrap up by chair / organisers	Manuel Cardoso / Toni Gual
17:00	End of session 2	

## Annex 2: Participation by session, country and sector

### Attendance by session

Post-workshop attendance statistics	Session 1 15 February 2022	Session 2 17 February 2022
Speakers	<b>6</b>	<b>7</b>
<i>Video only</i>	1	2
Attendees	<b>92</b>	<b>69</b>
Organisers (including Chairs)	<b>9</b>	<b>9</b>
<i>AIHaMBRA Project</i>	7	7
<i>External (cEvents)</i>	2	2
<i>Total</i>	<b>107</b>	<b>85</b>

### Number of sessions attended

Recorded video input only (speakers who could not attend)	3
S1 only	33
S2 only	10
S1+S2	59
<i>Total sessions attended (excluding organisers)</i>	<b>102</b>

Attendance by country/region represented

EU27	Num
Austria	
Belgium	6
Bulgaria	1
Croatia	3
Cyprus	2
Czechia	3
Denmark	
Estonia	1
Finland	
France	1
Germany	3
Greece	1
Hungary	1
Ireland	8
Italy	5
Latvia	
Lithuania	
Luxembourg	
Malta	
Netherlands	3
Poland	1
Portugal	19
Romania	2
Slovakia	
Slovenia	4
Spain	19
Sweden	1
<b>Total</b>	<b>84</b>

Candidate countries	Num
Albania	1
Montenegro	
North Macedonia	
Serbia	1
Turkey	
<b>Total</b>	<b>1</b>

Potential candidate countries	Num
Bosnia and Herzegovina	1
Kosovo*	
<b>Total</b>	<b>1</b>

Other European countries	Num
Andorra	0
Iceland	1
Liechtenstein	0
Monaco	0
Norway	1
Russia	1
San Marino	0
Switzerland	1
United Kingdom	2
Vatican City	0
<b>Total</b>	<b>6</b>

European Neighbourhood Policy	Num
Algeria	
Armenia	
Azerbaijan	
Belarus	
Egypt	
Georgia	1
Israel	
Jordan	
Lebanon	
Lybia	
Moldova	
Morocco	
Palestine	
Syria	
Tunisia	2
Ukraine	1
<b>Total</b>	<b>4</b>

Other intl. countries	Num
USA	2
India	2
Brazil	1
<b>Total</b>	<b>5</b>

Regional level	Num
European area (e.g., EC + WHO-EU)	3
International area (e.g., WHO)	2
<b>Total</b>	<b>5</b>

### Attendance by sector

Primary Sector	Attended		
Public health agency/authority - EU Commission	2		
Public administration agency/authority (not health) - EU Commission	1		
Public health agency/authority - International experts	3		
Public health agency/authority - WHO (PAHO)	2		
Public health agency/authority - National	21		
Public administration agency/authority (not health) - National	2		
Public health agency/authority - Local-regional	12		
Public health agency/authority (not health) - Local-regional	3	<b>Health</b>	<b>Non-health</b>
<b>Public administration total</b>	<b>46</b>	40	6
Academia-higher education (European)	1		
Academia-higher education (international)	2		
Academia-higher education (national)			
Academia-higher education (national) - non-health	1		
Academia-higher education (regional/local)			
Academia-research (European)	2		
Academia-research (European) - non-health			
Academia-research (international)	1		
Academia-research (national)	2	<b>Health</b>	<b>Non-health</b>
<b>Academia Total</b>	<b>3</b>	8	1
Civil society - capacity building and advocacy (European)			
Civil society - capacity building and advocacy (international)			
Civil society - capacity building and advocacy (national)			
Civil society - NGO (European)			
Civil society - NGO (international)	1		
Civil society - NGO (national)	11	<b>Health</b>	<b>Non-health</b>
<b>Civil Society Total</b>	<b>12</b>	12	0
Healthcare - research (international)	1		
Healthcare - clinical practice (national)	18		
Healthcare - research (national)	11		
Healthcare - research (Local-regional)	5		
Healthcare - research (Local-municipal)		<b>Health</b>	<b>Non-health</b>
<b>Healthcare Total</b>	<b>35</b>	35	0
<b>TOTAL excluding organisers</b>	<b>102</b>	<b>95</b>	<b>7</b>

Annex 3: Results of workshop 5 evaluation

	Overall evaluation (1=terrible → 10=excellent)	Please indicate to what extent you agree with the following items: (1=strongly disagree, 3=neutral, 5=strongly agree)		
	On a scale of 1-10, how would you rate the session overall?  /10	The topics and aspects covered by the speakers were relevant for the overarching theme of the session	I learned actionable information for my work and/ or consolidated my understanding/ knowledge.	There was enough time and opportunities for interaction with the speakers and between participants.
Average score: Session 1 n=33	8.6	4.5	4.2	4.5
Average score: Session 2 n=22	8.7	4.4	4.2	4.5

