



PSYCHOLOGY AND HEALTH PROMOTION IN GREECE: MAPPING THE EVIDENCE BASE

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Abstract:

Background: Health promotion psychology is increasingly central to public health because it addresses behavioral determinants of health, chronic disease burden, and mental health inequalities. In Greece, prolonged socioeconomic pressures, ongoing health-system reforms, and persistent mental health challenges create a distinctive context for the development and implementation of psychologically informed health promotion strategies. **Aim:** To map the evidence base on health promotion psychology in Greece, identifying thematic foci, methodological patterns, and implementation barriers. **Methods:** A mapping review of peer-reviewed publications and selected institutional sources (2000–2025) was conducted across international and Greek databases (e.g., PubMed, Scopus, PsycINFO, and national repositories). Eligible sources addressed prevention, behavior change, mental health promotion, biopsychosocial integration, or digital health applications in Greek populations or settings. Evidence was charted and synthesized descriptively by domain, target population, setting, study design, and evaluation characteristics. **Results:** The mapped evidence (n = 58 studies) indicates growing engagement with biopsychosocial and preventive frameworks, expansion of mental health promotion initiatives (particularly youth- and school-based programs), and emerging interest in digital and gamified interventions. Translation remains constrained by biomedical dominance, fragmented service delivery, limited integration of psychological expertise into policy, scarce long-term and implementation-focused evaluations, and limited training pathways in health promotion psychology. **Conclusions:** Health promotion psychology in Greece is developing but remains unevenly embedded within health systems and policy. Priorities include strengthening

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interdisciplinary implementation structures, culturally responsive and equity-oriented design, workforce development, and systematic evaluation to support scalable and sustainable public health impact.

Keywords: health promotion; health psychology; Greece; prevention; biopsychosocial model; mental health promotion; digital health

1. Introduction

Health promotion psychology integrates psychological science with public health to improve physical and mental well-being, prevent disease, and strengthen health systems. Grounded in behavioral and social science, it extends beyond treatment-focused models by empowerment, prevention, and population-level health. Over recent decades, the shift from strict biomedical paradigms toward biopsychosocial and community-oriented approaches has reframed how health systems conceptualize illness and care, highlighting the role of psychological processes in health behaviors, adaptation to illness, and health-related decision-making (Marks *et al.*, 2003; Pagnini, 2013). Within this framework, psychologically informed health promotion typically involves theory-driven behavior change strategies and multilevel interventions that address the interplay of individual, interpersonal, and contextual determinants of health (Marks *et al.*, 2003; Mauro *et al.*, 2025).

Health psychology contributes to prevention and chronic disease management by examining interactions among biological, behavioral, and social factors and by supporting the development and evaluation of interventions targeting modifiable risk behaviors and psychosocial determinants (Dixon, 2019). Robust measurement and evaluation are essential in this field, particularly when interventions address complex outcomes such as self-management, adherence, resilience, and quality of life (Zaia *et al.*, 2025). The discipline's core aims—health promotion, illness prevention, elucidation of etiological pathways, and improvement of healthcare systems and policy—underscore its relevance to contemporary public health challenges (Taukeni, 2019).

In Greece, population ageing, the burden of chronic disease, and persistent mental health inequalities have intensified the need for psychologically informed health promotion and preventive strategies. In addition, prolonged socioeconomic pressures and the psychosocial impact of disruptive events (including the COVID-19 pandemic) have further underscored the importance of resilience-building, mental health literacy, and scalable interventions that can be implemented across settings and populations (Zaia *et al.*, 2025). Despite growing conceptual endorsement of biopsychosocial perspectives, healthcare delivery in Greece—similar to many European systems—often remains predominantly treatment-oriented, with uneven integration of psychological expertise into routine service delivery and policy (Castelnuovo, 2017; O'Carroll, 2013).

Given this context, a structured mapping of the evidence base is warranted. Mapping reviews are particularly useful for emerging or heterogeneous fields because they describe how research is distributed across domains, populations, settings, and

methodologies, and they help identify gaps relevant to implementation, evaluation, and policy translation. Accordingly, the present mapping review aims to synthesize and critically appraise the Greek evidence base on health promotion psychology, identify key thematic areas and methodological trends, and outline priorities for strengthening research-to-practice translation and embedding psychologically informed prevention within national health promotion agendas (Bogucki *et al.*, 2022). Attention is given to preventive and well-being-oriented approaches—including mental health promotion and positive psychology-informed interventions—alongside chronic disease prevention, behavior change, and emerging digital applications within the Greek context (Kotsoni *et al.*, 2020; Suls *et al.*, 2019; Zlatanović, 2017).

2. Methodological Approach

This study adopts a mapping review design to provide a structured overview of the existing evidence base on health promotion psychology in Greece. Mapping reviews are particularly appropriate for emerging or conceptually heterogeneous fields, as they aim to describe the scope, distribution, and characteristics of research activity rather than to produce a quantitative synthesis of intervention effects. Accordingly, the present review focuses on identifying thematic domains, methodological trends, populations, settings, and implementation gaps within the Greek literature.

A comprehensive search of international and Greek academic sources was conducted across major electronic databases, including PubMed, Scopus, PsycINFO, and Google Scholar, supplemented by searches of relevant national repositories and institutional publications. The search strategy combined terms related to *health psychology, health promotion, mental health promotion, public health, Greece, biopsychosocial model, digital health, and youth or school-based interventions*. Searches were conducted for publications produced primarily between 2000 and 2025, a period encompassing major healthcare reforms, prolonged socioeconomic pressures, and evolving public and mental health priorities in Greece. Earlier seminal publications were included selectively when they were considered theoretically or historically foundational to the field.

This mapping review was conducted and reported in line with the logic of the PRISMA Extension for Scoping Reviews (PRISMA-ScR). Searches across international and Greek databases identified 312 records. After removal of duplicates, 241 titles and abstracts were screened for relevance. Of these, 96 full-text articles were assessed for eligibility. Following full-text review, 58 sources were included in the final evidence map. Reasons for exclusion at the full-text stage included: absence of a Greek context, exclusively biomedical or pharmacological focus without psychological relevance, lack of sufficient methodological or conceptual information, or duplication of findings across multiple publications. The purpose of the PRISMA-ScR-informed process was to ensure transparency, reproducibility, and systematic documentation of the scope and characteristics of the available evidence, rather than to conduct a quantitative synthesis of outcomes.

Figure 1: PRISMA-ScR Flow Diagram

Identification
Records identified through database searching (n = 312)
Records after duplicates removed (n = 241)
Screening
Titles/abstracts screened (n = 241)
Records excluded (n = 145)
Eligibility
Full-text articles assessed for eligibility (n = 96)
Full-text articles excluded, with reasons (n = 38)
Inclusion
Studies included in mapping review (n = 58)

2.1 Eligibility Criteria

Studies were eligible for inclusion if they met the following criteria:

- 1) Addressed health promotion, health psychology, or psychosocial determinants of health within a Greek context (including Greek populations, institutions, or policy frameworks).
- 2) Examined prevention, behavior change, mental health promotion, biopsychosocial integration, or digital health applications.
- 3) Were published in peer-reviewed journals or constituted credible institutional, governmental, or policy reports.
- 4) Were published predominantly within the 2000–2025 timeframe.

Publications were excluded if they were unrelated to the Greek context, focused exclusively on biomedical or pharmacological outcomes without psychological relevance, lacked scholarly or institutional credibility, or did not provide sufficient methodological or conceptual information.

2.2 Data Charting and Synthesis

Consistent with mapping review methodology, outcomes were not quantitatively aggregated. Instead, the included sources were charted descriptively and examined thematically. Key characteristics extracted included publication year, study design, target population, setting, primary focus (e.g., prevention, mental health promotion, chronic disease management), and the extent to which psychological frameworks were integrated into intervention design or policy analysis.

Studies were subsequently grouped into major thematic domains relevant to health promotion psychology in Greece: chronic disease prevention and self-management; mental health promotion and preventive psychology; youth- and school-based interventions; digital health and gamification; and biopsychosocial or psychosomatic integration. This analytic process enabled the identification of areas of concentrated research activity, methodological patterns, and persistent gaps related to implementation, evaluation, and policy translation.

Overall, this mapping review provides a systematic yet flexible framework for understanding how health promotion psychology has evolved in Greece over the past

twenty-five years, while acknowledging the diversity of study designs, intervention models, and populations represented in the literature.

To enhance transparency, records were managed through a two-stage screening process (title/abstract followed by full-text review) against predefined eligibility criteria. For each included source, a standardized charting form captured publication year, design, population, setting, intervention or focus area, theoretical framework (where applicable), and evaluation features (outcomes, follow-up, and implementation elements). As this was a mapping review, the aim was to characterize the distribution and nature of evidence rather than to pool effect sizes; therefore, findings are presented narratively and descriptively.

3. Conceptual and Theoretical Framework

Health promotion psychology is grounded in the biopsychosocial model, which conceptualises health as the outcome of interacting biological, psychological, and sociocultural processes. By moving beyond reductionist biomedical paradigms, this model frames health as a dynamic resource for daily living rather than merely the absence of disease, positioning health promotion as an inherently holistic and interdisciplinary endeavour encompassing behavioural science, clinical practice, community systems, and health policy (Wright *et al.*, 2019). Consistent with contemporary public health thinking, this perspective emphasises empowerment, capability development, and behavioural support as key mechanisms through which individuals and communities can influence determinants of health (Durgante, 2017).

Within this ecological orientation, health behaviours are understood as embedded in multilayered systems shaped by individual characteristics, interpersonal relationships, social environments, and broader structural and cultural contexts (DeStasio *et al.*, 2019). Health promotion psychology, therefore, seeks to inform interventions that operate across multiple levels in order to enhance resilience, strengthen coping resources, and prevent both psychological and physical morbidity (Kristensen, 2011; Zlatanović, 2017).

Behavioural and cognitive-behavioural theories constitute a central theoretical foundation within this field. Models such as the Health Belief Model, Transtheoretical Model, Social Cognitive Theory, and Theory of Planned Behaviour provide systematic accounts of how risk perception, perceived benefits and barriers, motivation, self-efficacy, and social learning shape engagement in health-related behaviours (Bandura, 2004; König & Araújo-Soares, 2021; Yakovleva, 2019). Complementary social psychological approaches further highlight the role of social norms, roles, values, and relational processes, situating individual behaviour within shared meaning systems and social practices (Apriningsih, 2022).

Beyond individual-level explanations, health promotion psychology is strongly informed by public health and community empowerment perspectives that foreground the social, environmental, and structural determinants of health (Sallis *et al.*, 2008). These frameworks emphasise the influence of socioeconomic inequality, institutional arrangements, governance processes, and power relations on health outcomes,

advocating for multi-level and equity-oriented strategies rather than approaches focused narrowly on individual responsibility (Aikins *et al.*, 2010; Andreas & Jabakhanji, 2023; Short & Mollborn, 2015). From this standpoint, prevention and health promotion are inseparable from broader social policy and health system organisation.

Integrative and interdisciplinary models further reinforce the need for coordinated engagement across psychology, medicine, education, and social policy (Glanz & Bishop, 2010). Recent integrative frameworks, including the Integrated Model of Health Behaviour Promotion, emphasise the synergistic interaction of cognitive factors, environmental affordances, and personal resources in shaping health practices (Alibigloo & Eshaghi, 2025). Salutogenic perspectives similarly foreground a sense of coherence and meaning-making as protective resources for well-being (Johnson, 2021). The Ottawa Charter continues to provide a foundational orientation, highlighting supportive environments, community mobilisation, and policy action as core principles of effective health promotion (Mehrjoyan *et al.*, 2025).

A strong preventive orientation cuts across these theoretical approaches. Ecological and social-determinants frameworks caution that interventions focused solely on individual behaviour risk neglecting material conditions and cultural constraints, and may inadvertently reinforce victim-blaming narratives (Baum & Fisher, 2014; McLeroy *et al.*, 1988). Effective public health strategies, therefore, require recognition of the interactions among biological vulnerability, psychosocial processes, and environmental exposures (Grosso, 2025).

In line with these principles, health promotion psychology prioritises participation-oriented and person-centred approaches rather than symptom-focused care. Individuals and communities are conceptualised as active agents in shaping health, supported through autonomy-enhancing, capacity-building, and collective action strategies (Golden *et al.*, 2015; Liu *et al.*, 2024). Holistic perspectives explicitly integrate physical, psychological, social, and existential dimensions of health, challenging fragmented biomedical approaches and supporting coordinated responses to complex health needs (Acolin & Fishman, 2023; Peterson, 2011).

3.1 Conceptual Relevance to the Greek Context

Within Greece, these theoretical foundations provide an important lens for understanding research and practice in health promotion psychology. Greek studies increasingly address lifestyle-related chronic conditions—such as cardiovascular disease, obesity, diabetes, and cancer—highlighting behavioural and psychosocial determinants alongside biomedical risk factors. Emerging evidence on digitally supported interventions suggests a gradual shift toward person-centred and technology-enabled behaviour change strategies, with preliminary benefits for self-management and quality of life among individuals with chronic conditions (Chrysi *et al.*, 2023; Michaelsen & Esch, 2023). At the same time, Mediterranean dietary patterns continue to be emphasised as culturally embedded protective factors within prevention frameworks (Pórcel-Gálvez *et al.*, 2024).

A recurrent theme in the Greek literature concerns the psychosocial impact of prolonged socioeconomic instability and structural vulnerability. Studies document how economic stressors and broader social determinants shape both mental health and chronic disease risk, illustrating the limitations of narrowly biomedical framings and reinforcing the relevance of integrated, systems-oriented approaches (Andreas & Jabakhanji, 2023; Eiroá-Orosa, 2020). Adherence to treatment and lifestyle recommendations is another prominent focus, with psychological constructs—particularly self-efficacy and empowerment—consistently associated with sustained behaviour change and improved outcomes (Kalantzi *et al.*, 2024; Tsoli *et al.*, 2019).

Despite these advances, the Greek evidence base also reveals persistent structural constraints. Fragmented service delivery, limited policy continuity, and weak integration between primary and secondary care continue to undermine the implementation and scalability of preventive and psychologically informed interventions (Kyriopoulos *et al.*, 2025; Lionis *et al.*, 2019). Collectively, this literature suggests growing recognition that effective chronic disease prevention and health promotion in Greece require systematic incorporation of psychological insights—particularly those related to motivation, risk perception, cultural meaning, and social context—within broader health system and policy strategies.

3.2 Mental Health Promotion and Preventive Psychology

The mapped Greek literature indicates a substantial expansion of mental health promotion research, with particular emphasis on resilience enhancement, coping capacity, and preventive approaches. Several studies examine resilience-building interventions in the context of chronic disease management, reporting improvements in psychological well-being and, in some cases, treatment adherence. These findings support the relevance of psychologically informed and preventive strategies within broader healthcare provision, although evidence is largely based on cross-sectional or short-term designs, limiting causal inference and long-term evaluation (Sharma *et al.*, 2025).

Research involving Greek and Greek Cypriot diaspora populations further highlights the importance of culturally attuned and contextually grounded mental health approaches. Culturally competent interventions are shown to reduce stigma, strengthen advocacy, and improve engagement with mental health services, particularly among populations facing social marginalisation (Papadopoulos & Patikis, 2025). Nevertheless, the mapping reveals a relative scarcity of longitudinal and comparative studies capable of clarifying causal mechanisms or examining differential effects across population subgroups.

A prominent thematic cluster concerns the psychosocial consequences of prolonged socioeconomic instability. Evidence consistently links economic crisis, unemployment, and social vulnerability to deteriorations in psychological well-being, underscoring the limitations of individualised or purely clinical responses. In this context, anti-stigma initiatives and public education programmes have played an important role in improving mental health literacy and societal attitudes (Christodoulou

et al., 2010). These developments are particularly salient given the increasing co-occurrence of chronic physical illness and mental health difficulties, which reinforces the need for integrated and coordinated public health responses (Akif *et al.*, 2024; Gousse-Lessard *et al.*, 2022). Preventive psychiatry is frequently discussed as a potentially cost-effective and system-level strategy capable of addressing both organisational pressures and service delivery gaps within the Greek healthcare system (Christodoulou & Kollias, 2018).

Community-based mental health support emerges as a central policy-relevant theme. Community-oriented interventions are associated with enhanced resilience, improved well-being, and reduced trajectories toward diagnosable mental disorders, highlighting the interdependence between mental health, social structure, and public health outcomes (Raymond *et al.*, 2023). Such approaches appear particularly relevant in contexts characterised by resource constraints or inequitable service distribution, where participatory, culturally competent, and scalable models may improve reach and equity (Papadopoulos & Patikis, 2025). The literature also points to increasing interest in embedding mental well-being promotion across institutional sectors, including education, clinical services, and community settings (Petrogiannis *et al.*, 2024).

Stigma reduction remains a persistent and cross-cutting priority. Public campaigns and educational initiatives demonstrate the capacity to enhance mental health literacy and reduce discriminatory attitudes, contributing to broader processes of social inclusion (Jim van Os *et al.*, 2023). At the system level, ongoing psychiatric reform in Greece is widely recognised as necessary to address structural fragmentation and service inconsistency within public health systems (Anargyros *et al.*, 2021; Christodoulou & Kollias, 2018). A consistent recommendation across the mapped literature is the integration of mental health provision into primary healthcare, enabling earlier detection, improved continuity of care, reduced referral delays, and more equitable access to services (Tselebis & Pachi, 2022; Eder *et al.*, 2023).

3.3 Policy Implications for Greece

Synthesising these findings, the mapped evidence suggests several recurring policy imperatives:

- systematic integration of mental health promotion and prevention within primary healthcare systems.
- sustained national investment in preventive and community-based mental health services beyond crisis-driven policy cycles.
- institutionalisation of culturally competent practice addressing diasporic, minority, and socially marginalised populations.
- strengthening of mental health literacy and anti-stigma strategies through evidence-based public communication.
- embedding resilience and well-being promotion across educational, healthcare, and community infrastructures.

Overall, while preventive mental health approaches are increasingly visible within the Greek literature, their translation into coherent, nationally coordinated policy and

practice remains limited. The mapping highlights the need for sustained political commitment, structural integration within public health systems, and stronger implementation and evaluation frameworks to advance equitable and effective mental health promotion in Greece.

3.4 Youth, Schools, and Educational Health Promotion

The mapped Greek literature demonstrates substantial engagement with school-based mental health promotion, positioning educational settings as key environments for early prevention and psychosocial support. Interventions commonly focus on enhancing mental health literacy, resilience, emotional regulation, and coping skills, often through structured curricula and psychoeducational programmes (Lauridsen *et al.*, 2025; Duraku *et al.*, 2023). These initiatives frequently integrate psychological education with school-based support services, aiming to foster positive school climates and reduce mental health-related stigma.

A recurrent theme across studies is the importance of collaborative, multi-actor approaches involving schools, families, and healthcare providers. Evidence suggests that coordinated efforts improve early identification of difficulties and strengthen support pathways for children and adolescents, although parental reluctance toward mental health care—often linked to limited awareness of available services—remains a significant barrier requiring targeted educational strategies (Koumoula *et al.*, 2024).

Emotional regulation interventions constitute a particularly prominent strand of the Greek evidence base. Such programmes equip young people with skills to recognise, express, and manage emotions effectively, thereby supporting psychological well-being and reducing the escalation of disruptive or risk-related behaviours (Kourmoussi *et al.*, 2017). The relevance of these interventions has increased in the aftermath of the COVID-19 pandemic, which highlighted gaps in mental health literacy and coping resources among children, adolescents, and young adults (Sequeira *et al.*, 2022; Koumoula *et al.*, 2024). Mapping of the literature indicates that most interventions focus on short-term outcomes, with limited longitudinal follow-up assessing sustained developmental impact (Marchionatti *et al.*, 2024).

Health education and well-being programmes further represent a central component of school-based health promotion in Greece. These programmes typically incorporate resilience-building, problem-solving, and social skills development, which are recognised as protective factors against the onset and severity of mental health difficulties (Fenwick-Smith *et al.*, 2018). Given that mental health problems are among the leading causes of disability in youth populations globally, the Greek literature underscores the importance of embedding mental health promotion within primary and secondary education as a preventive strategy rather than a reactive response (Gerstl *et al.*, 2024).

In parallel, preventive programmes targeting risk behaviours—such as substance use, aggression, and antisocial behaviour—are well represented. These interventions aim to enhance competencies, strengthen self-efficacy, and promote prosocial behaviours, thereby reducing engagement in harmful activities (Pejic *et al.*, 2025). The involvement of

school psychologists and other mental health professionals is consistently identified as critical for effective delivery, early screening, and timely referral of students requiring additional support (Kourkoutas *et al.*, 2018). Overall, the mapped evidence aligns with international recommendations advocating for the systematic integration of mental health promotion into school curricula and the development of supportive educational environments as a cornerstone of youth mental health prevention (Anwar *et al.*, 2022; Wiedermann *et al.*, 2023).

3.5 Digital Health Promotion and Gamification

The mapped Greek literature indicates rapid growth in digitally delivered psychological and mental health promotion interventions. These approaches, commonly delivered through mobile applications, online platforms, and web-based programmes, offer scalable and accessible solutions for mental health support, particularly in regions with limited availability of traditional services (Sakellari *et al.*, 2021). Digital interventions expand service reach and flexibility, enabling personalised content that can be adapted to individual needs, preferences, and levels of engagement (Singh *et al.*, 2022).

Digital health tools are increasingly discussed in relation to value-based and person-centred care. The literature highlights their potential to support remote monitoring, data collection, and patient engagement in treatment and self-management, including the use of patient-reported outcome measures to inform ongoing evaluation and service improvement (Simon *et al.*, 2023; Ogugua *et al.*, 2024). Within the Greek context, these features are frequently presented as mechanisms for addressing service fragmentation and geographical barriers to access.

Gamification represents a distinct and growing thematic strand within digital health promotion. By integrating game-design elements into non-game contexts, gamified interventions aim to enhance motivation, adherence, and sustain participation in health-promoting behaviours (Saboor *et al.*, 2024). Evidence suggests that such approaches may be particularly effective among younger populations, transforming routine health-related tasks into engaging and rewarding experiences and supporting continued engagement over time (Sakellari *et al.*, 2021).

A further cluster of studies focuses on online resilience and mental well-being platforms. These interventions typically combine interactive content, personalised feedback, and, in some cases, peer or community features to support the development of coping strategies and positive mental health practices (Misiak *et al.*, 2025). Mapping of the evidence indicates that these platforms are primarily targeted at children, adolescents, and young adults and are valued for their accessibility, confidentiality, and low-threshold entry, particularly for individuals who may be reluctant to seek face-to-face support (Aschentrup *et al.*, 2024; Gkintoni *et al.*, 2024).

Digital therapy platforms, mental health applications, and wearable technologies further extend opportunities for self-monitoring and active participation in well-being through functions such as mood tracking, mindfulness exercises, and physiological monitoring (Ogugua *et al.*, 2024; Anser *et al.*, 2025). Across the mapped literature, these approaches are consistently associated with high user acceptability and perceived

benefits in terms of engagement and accessibility. However, evidence on long-term effectiveness, sustained behaviour change, and integration into routine care remains limited.

Despite their promise, literature also highlights persistent challenges. Ethical governance, data protection, cultural adaptation, digital literacy, and equity of access are recurring concerns, particularly given socioeconomic disparities and uneven technological infrastructure. The mapping suggests that while digital and gamified interventions are increasingly visible within the Greek health promotion landscape, their translation into scalable, regulated, and evidence-based practice requires stronger evaluation frameworks and clearer policy guidance.

3.6 Biopsychosocial and Psychosomatic Health

The mapped Greek literature demonstrates a strong and sustained interest in biopsychosocial and psychosomatic approaches to health and illness. Studies consistently emphasise the interplay between psychological stress and physical disease, examining how chronic stress contributes to somatic symptoms and exacerbates existing medical conditions. This body of work underscores the necessity of integrated care models that address psychological and physical processes concurrently rather than through fragmented, discipline-specific interventions (Castellano-Tejedor & Cencerrado, 2024; Löchner *et al.*, 2025).

Within this literature, the biopsychosocial model is increasingly adopted as a conceptual framework for understanding complex health conditions, signalling a gradual shift away from purely biomedical paradigms within Greek clinical and research contexts (Chen *et al.*, 2023; Vieira, 2025). By integrating biological, psychological, and social determinants, this perspective enables more comprehensive accounts of illness experiences and treatment outcomes, particularly in conditions characterised by psychosomatic symptomatology.

A distinct cluster of studies focuses explicitly on psychosomatic manifestations, exploring how cognitive, emotional, and stress-related processes are expressed through physical symptoms, often in the absence of clear organic pathology. These investigations highlight the importance of interdisciplinary diagnostic and therapeutic approaches and draw attention to the psychobiological mechanisms—such as neuroendocrine and immunological pathways—through which psychological processes influence disease progression (Castelnuovo, 2017; Vieira, 2025). Advanced methodological approaches are increasingly employed to elucidate these mechanisms, contributing to a more nuanced understanding of mind–body interactions and informing the development of patient-centred interventions (Kotsis *et al.*, 2024).

Holistic assessment practices represent another prominent theme. Greek researchers and clinicians increasingly advocate for assessment models that extend beyond biomedical indicators to incorporate psychological functioning, social context, and subjective illness experience (Alitabar, 2025). Such approaches are particularly relevant given the high prevalence of psychosomatic presentations and the persistent organisational divide between mental and physical health services, which can hinder

effective care (Ezra *et al.*, 2019; Gao *et al.*, 2023). Interdisciplinary care models are therefore emphasised as essential for addressing the multifaceted needs of patients and supporting integrated, person-centred healthcare delivery (Havelka *et al.*, 2009).

Despite broad theoretical acceptance of biopsychosocial principles, the mapping reveals notable gaps in implementation. Translation of integrated assessment and intervention models into routine clinical practice remains uneven, with limited structural support, training pathways, and service coordination. This disconnect between theory and practice suggests that further efforts are required to embed biopsychosocial and psychosomatic approaches within healthcare systems, ensuring that conceptual advances are matched by sustainable organisational and policy-level changes (Mauro *et al.*, 2025).

3.7 Strengths of the Greek Evidence Base

The mapped literature indicates a growing alignment of Greek research with international theoretical and methodological developments in health promotion psychology. A key strength is the increasing adoption of the biopsychosocial model, which conceptualises health as the dynamic interaction of biological, psychological, and social factors and emphasises the importance of lived experience and social context in understanding illness and care (Özcan & Ateş, 2024; Tollos *et al.*, 2021). This orientation is particularly relevant in the Greek context, where population ageing, chronic disease burden, and post-pandemic mental health challenges necessitate integrated and person-centred approaches to health promotion and care (Moya-Sánchez *et al.*, 2025).

Another notable strength is the gradual expansion of interdisciplinary collaboration across psychology, medicine, public health, and related social sciences. This interdisciplinarity supports more comprehensive conceptualisations of health determinants and facilitates the development of multifaceted interventions that move beyond reductionist biomedical approaches (Alitabar, 2025; Wittink *et al.*, 2022). Across the mapped studies, there is also an increasing emphasis on prevention rather than treatment, reflecting a broader paradigm shift toward proactive health management and alignment with international public health priorities, including those promoted by the World Health Organization (Özcan & Ateş, 2024).

Research innovation represents an additional area of strength. Greek studies demonstrate growing engagement with digital health promotion and technology-supported interventions, which offer scalable, accessible, and potentially cost-effective solutions aligned with contemporary trends in personalised medicine and public health (Bai *et al.*, 2025). These innovations complement traditional approaches by enabling new forms of intervention delivery, data collection, and user engagement, particularly in contexts characterised by geographical or service-access constraints.

Finally, the mapped evidence suggests emerging interest in culturally grounded perspectives that integrate local Greek understandings of well-being with contemporary psychological frameworks. Such approaches enhance cultural relevance, acceptability, and potential effectiveness by acknowledging how social norms, values, and cultural narratives shape health behaviours and perceptions (Dixon, 2019). Collectively, these strengths indicate a meaningful maturation of health promotion psychology in Greece,

with increasing theoretical coherence, methodological diversity, and relevance to population health needs.

3.8 Gaps and Challenges

Despite these advances, the mapping also reveals persistent and structural limitations. A dominant challenge remains the continued reliance on biomedical treatment models, which often insufficiently address the psychological and social determinants of health, particularly in the context of chronic disease management (Cormack *et al.*, 2022; Zlatanović, 2017). This orientation constrains the development of fully holistic and person-centred care and limits the integration of health promotion psychology into routine practice.

Insufficient incorporation of psychological frameworks into national health policy represents a further gap. The absence of systematic policy integration reduces the potential for comprehensive public health strategies that address behaviour change, prevention, and mental health promotion alongside biomedical care (Marks *et al.*, 2003; Thomas *et al.*, 2023). As a result, preventive programmes are often implemented in a fragmented manner, characterised by short-term funding, limited inter-agency coordination, and weak evaluation infrastructures, which restrict scalability and long-term impact (Castelnuovo, 2017; Lee & Young, 2018).

The mapped literature also highlights a lack of long-term and implementation-focused evaluation. Many interventions demonstrate theoretical promise but lack robust evidence regarding sustainability, cost-effectiveness, and real-world feasibility, particularly within resource-constrained clinical and community settings (Leventhal *et al.*, 2007). In parallel, disparities in access across regions and social groups continue to exacerbate health inequities and undermine the equitable distribution of health promotion resources (Kaplan, 2009).

Workforce capacity constitutes another critical challenge. Limited structured training pathways in health promotion psychology restrict the availability of professionals equipped to design, implement, and evaluate psychologically informed interventions in public health and primary care settings (Hart *et al.*, 2023; Bélanger-Gravel *et al.*, 2023). This gap compounds existing weaknesses in mental health service provision, especially in primary care, where preventive services and psychosocial expertise remain unevenly accessible (Myloneros & Sakellariou, 2021; Triliva *et al.*, 2020).

Finally, despite advances in digital health and data-driven approaches, the mapping identifies limited use of theory-based and personalised intervention designs. Current applications often underutilise psychological theory and emerging analytic methods, such as machine learning, to account for individual, contextual, and environmental variability in behaviour change (Hicks *et al.*, 2022). Addressing these gaps will require coordinated systemic, educational, and policy-level reforms to support the sustained development and implementation of health promotion psychology in Greece.

4. Discussion

This mapping review indicates that Greece is at a critical juncture in the development of health promotion psychology. The evidence base reflects a solid theoretical foundation, increasing research activity, and growing innovation, particularly in preventive, community-based, and digital approaches. However, the translation of psychological knowledge into public health impact remains constrained by limited structural integration within healthcare systems, education, and national policy.

Digital health emerges as a particularly promising avenue for expanding access to prevention and mental health promotion, especially for young people, rural populations, and individuals reluctant to engage with traditional services. At the same time, literature highlights the necessity of robust governance frameworks to address ethical, regulatory, and equity-related challenges, including data protection, evidence validation, and digital inclusion.

Overall, the findings underscore that meaningful progress requires moving from conceptual endorsement of biopsychosocial principles to their systematic embedding in routine practice, workforce development, and national policy.

5. Conclusion and Future Directions

Health promotion psychology in Greece is increasingly aligned with international paradigms and is gradually influencing preventive health discourse. Despite clear progress, its potential remains underutilized due to persistent systemic, organisational, and implementation barriers. Advancing the field will require stronger research–practice translation, explicit integration of biopsychosocial approaches into health policy, and sustained investment in interdisciplinary education and professional training.

Future research should prioritise longitudinal and intervention studies, implementation-focused designs, and culturally grounded approaches capable of informing scalable and equitable practice. Particular emphasis is needed on integrating psychological expertise into primary care and on strengthening prevention frameworks within community and school settings.

Digital health and artificial intelligence offer important opportunities for personalised and scalable interventions, but their responsible adoption depends on methodological rigor, transparency, digital literacy, and clear ethical standards. Embedding psychology within national health strategies, allocating resources to prevention, and developing coherent regulatory frameworks for digital health are critical steps for ensuring that health promotion psychology contributes meaningfully to population well-being in Greece.

5.1 Limitations

As a mapping review, this study aimed to characterize the scope and distribution of evidence rather than to estimate pooled intervention effects. The review may be subject to publication bias and database/indexing limitations, particularly for Greek-language

outputs and locally implemented programs that are not captured in international databases. In addition, heterogeneity in designs, outcomes, and reporting practices constrained cross-study comparability and limited conclusions regarding long-term effectiveness or scalability. Finally, although institutional sources were included selectively to enhance contextual relevance, variability in reporting standards across such documents should be considered when interpreting policy-oriented inferences.

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Data Availability

Available upon reasonable request.

Conflict of Interest Statement

The authors declare no conflict of interest.

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