epha newsletter

## Editorial

# A walk, a dance, a song: by doctor's prescription

### *How social prescribing can promote health, prevent illness and reduce inequities*

Imagine finishing an activity you enjoy: For us, Jaisalmer and Tom, it could be a dance class or choir practice, for other people it might be a walk in the park, a session at the gym, an afternoon working in the garden, playing the piano, creating a painting or drawing, or simply spending time with others. Whatever the activity, we often notice that we feel different from when we started: with more energy, a clearer mind, or a stronger connection to ourselves, to others and to the world around us. Though these moments might seem simple or ordinary, they point to an important truth about health: **many of the things that make us feel well are not medicines, but experiences that give meaning to life, experiences that do not happen in a consultation room.**

This year marks the 40th anniversary of the Ottawa Charter for Health Promotion. Adopted in 1986, the Charter helped shift the focus of public health from treating illness towards creating the conditions in which people can achieve better health. It recognised that health is shaped by the **circumstances in which people live, work, learn, play and grow, and that health promotion requires action beyond the health sector.**

Four decades later, this message remains as relevant as ever. The **social determinants of health** – non-medical factors like income, education, housing, employment, social relationships, community resources and healthy environments – **shape both our opportunities to be healthy and our risk of illness**. Furthermore, these determinants are unequally distributed, contributing to persistent and avoidable health inequalities. Addressing them means making the resources and experiences that support good health **accessible to everyone**. Opportunities to be physically active, connect with others, access nutritious food, spend time in nature, and participate in arts and cultural activities are no exception. We should not see them as pleasant additions to life: they are conditions and experiences through which we create meaning and realise health and wellbeing.

This is where social prescribing plays an important role. In simple terms, it connects people with non-clinical sources of support in their communities, usually through a health or care professional. By taking the time to understand what matters to people, professionals can connect them with meaningful activities, groups and services. In this way, social prescribing can support mental and physical wellbeing while helping address some of the social circumstances that increase vulnerability to poor health.

In Europe, these approaches are increasingly being explored, and in this month's newsletter you can read about some examples. The United Kingdom has been **at the**

**forefront of social prescribing**, and the Health & Europe Centre reflects on what has worked and what has not. JOGG shares its **multi-sectoral approach to creating healthy environments for children** in the Netherlands. Our colleagues at ISCA explore how advocacy can **move beyond social prescriptions towards creating the conditions for people to thrive**. An article from ULB highlights the **importance of nature-based activities through the Forest4Youth project**. Last but not least, the Jameel Arts Centre challenges us to **look beyond the clinical lens and consider the wider role of arts, belonging and meaning in health and wellbeing.**

All articles in their own way point to a similar message; **social prescribing should not become a substitute for creating healthy environments**. We should not need a medical referral to access a safe park, an affordable sports activity, nutritious food, meaningful cultural activities, or opportunities to connect with our neighbours. Nor should responsibility for health be placed primarily on individuals when the conditions in which they live constrain the choices available to them. The ambition should be bigger than prescribing healthy activities to individuals: it should be to build communities and environments in which healthy, meaningful and socially connected lives are possible for everyone. Social prescribing can be one useful bridge between health services and those communities, but the longer-term public health goal must be to make that bridge less necessary by ensuring that health-enhancing opportunities are part of everyday life. When Jaisalmer nails that dance routine or when Tom finally manages to hit that choir harmony, the results speak for themselves. In both cases, it was not a prescription that made the difference.

**Jaisalmer de Frutos Lucas**

Policy Lead - Science Coordinator



**Tomas de Jong**

Policy Lead - Team Coordinator



## This Month's Top Stories



### Social prescribing: have we invested in the prescription, but not the place?

More than one million patients are referred through general practice each year, but NHS-funded demand for community services reqiores sustainably funded community infrastructure.

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### Arts, belonging and the search for meaning: a human solution to clinical mental health approaches

The power of arts engagement becomes more apparent when seen through a lens of community health promotion, rather than individual symptom reduction.

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### The best social prescription is a healthy living environment

Children's health is shaped every day: at home, at school, in the neighbourhood, and online. In all these spaces, important questions emerge. A healthy future for children starts far away from a consultation room.

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### Green Social Prescribing for Youth Mental Health

Europe cannot afford to overlook accessible, preventive, and sustainable approaches to improving youth wellbeing. Green prescribing should become an integral part of future health strategies.

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### Beyond prescribing: rebuilding the conditions to move

The vocabulary itself carries a pathogenic logic. Prescription. Cure. Fix. If we need a formal referral to access meaningful activities, something has gone wrong in the world the model is trying to repair.

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## Upcoming EPHA Events




### Screen early, prevent earlier: EPHA marks EU first screening week

What can cardiovascular screening achieve, and what needs to happen beyond the check?
**Effective prevention also requires accessible care, appropriate follow-up and healthier environments that reduce risk in the first place**. This page will be continually updated with the activities as they launch.

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### 4th Annual Seminar on Racism and Health

The series brings together policymakers, human rights actors, civil society, researchers, and healthcare professionals to identify opportunities for action.
This edition focuses on **gender-based violence in healthcare**, and **racial discrimination, ageing and participation in sports**.

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## EPHA Updates




### EPHA strategy 2026-2030: a roadmap for collaborative public health action

Building on 30 years of health and equity advocacy, EPHA has developed its new strategic direction in close collaboration with its members and expert advisors, with formal adoption in June 2026.

The new EPHA Strategy reflects on the challenges posed to health advocacy in the current geopolitical moment, and clearly recognises that EPHA's greatest results are achieved by enabling, convening, and amplifying collaborations that turn independent evidence into policy action.

**CHECK OUT THE NEW STRATEGY DOCUMENT**



## Roadmap for a European Food Policy Council now published

Europe's food systems face **mounting pressures** and are a major driver of both **non-communicable diseases** (NCDs) and **environmental degradation**. At the same time, food systems hold significant potential to strengthen environmental, health, economic, and social resilience.

The roadmap examines key gaps in current EU agri-food governance, including limited deliberative quality, fragmented policymaking, and weak coordination across governance levels.

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## AMR Stakeholder Network Reapplication Open

The AMR Stakeholder Network has opened its membership reapplication process alongside updated Terms of Reference (ToR) and conflict of interest guidance. Members join EPHA-hosted quarterly 90-minute meetings on key AMR policy topics.

If you have any questions, please contact Brigid at brigid.transon@epha.org and Jaisalmer at Jaisalmer.DeFrutos-Lucas@epha.org.

Q3 and Q4 meeting polls will be shared with successful applicants.

**NETWORK APPLICATION**

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From 28 September to 2 October 2026, the World Health Organization (WHO) and MEP Martin Häusling will host an exhibition titled "*Antimicrobial Resistance: The Human Stories Behind a Silent Pandemic*" at the European Parliament in Brussels. Through photographs, personal testimonies, video stories and other multimedia displays, the exhibition will highlight the human impact of drug-resistant infections and the urgent need for sustained action on AMR. By putting faces and voices to the AMR challenge, the exhibition aims to strengthen public awareness and political commitment to protecting the effectiveness of antimicrobial medicines for future generations.

**NOTE**: Registrations are only possible until 24.09.2026

**REGISTER NOW**



## More than just a stakeholder perspective: Health should define livestock resilience in post-2027 CAP

The purpose of public support is public value, and agri-food policies, including the new EU Livestock Strategy, should be judged against health as a core public value.

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## A forward-looking EU Tobacco Control Framework: EPHA's recommendations

EPHA responded to the EC's public consultation on the revision of the EU Tobacco Control Framework. We also published recommendations for a future-proof approach to smoking, tobacco and nicotine regulation.

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### Together for EU Health Civil Society – 187 organisations call for sustainable EU support

EPHA, co-chair of the EU4Health Civil Society Alliance, has joined **186 civil society organisations** from across Europe and across sectors in calling for meaningful, adequate and predictable operating support for health civil society under the EU4Health Programme and beyond.

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### PLAN'EAT Final Conference Harvest

Rather than providing a chronological account of the event, this report captures the main arguments, tensions and questions that emerged once research met practice. The starting question was simple: what happens to research once it leaves the project?

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### Commitment without accountability: what is the EU Agri-Food Code delivering?

EPHA, in partnership with Healthy Food Healthy Planet (HFHP), has mapped commitments made under the Code's objective on "Healthy, balanced and sustainable diets for all European consumers".

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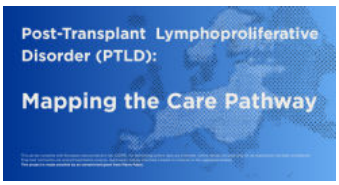
## News From Members



### Nurse shortage far worse than first thought, RCN analysis shows

Report demonstrates nurse numbers held down since 2009, while doctors' roles in NHS doubled.

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### New survey | PTLD across Europe

ESOT is launching a European survey to map the current EBV-positive post-transplant lymphoproliferative disorder (PTLD) real-world care pathways.

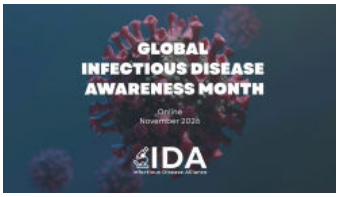
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### Severe asthma linked to changes in brain structure

Previous studies suggested asthma may be associated with changes in the brain, but little was known about the degree of changes in people with severe disease.

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### Global Infectious Disease Awareness Month

This unique month-long initiative is dedicated to raising awareness about the global burden of infectious diseases and highlighting the urgent need for sustained global action.

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### AOECS welcomes landmark agreement on gluten labelling

The new Codex Guidelines on Precautionary Allergen Labelling (PAL) represents a landmark step towards more consistent, evidence-based gluten risk communication, strengthening consumer confidence.

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### AD-RIDDLE launches its Academia platform to empower the next generation of Alzheimer's researchers

The initiative aims to support early-career researchers through mentorship, networking, training and collaborative research opportunities, helping them strengthen their skills, expand their networks and contribute to advances in Alzheimer's research.

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## Other News



### SOTEU 2026: resilience needs healthy people and a strong civil society

There was plenty of ambition in Ursula von der Leyen's 2026 State of the Union address. Yet, listening to the speech, one could be forgiven for wondering where **people** and their **health** fit into that picture.

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**21 Organisations Call on Commissioner Várhelyi for Urgent Action on Unhealthy Food Environments**

EPHA joined a coalition of 20 other civil society organisations, health associations, and organisations representing medical professionals in addressing an open letter to the European Commissioner for Health and Animal Welfare, Olivér Várhelyi. The letter calls for immediate, comprehensive EU policy action to tackle unhealthy food environments and address the burden of diet-linked non-communicable diseases.

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## Beyond prevention: Why Europe should invest in Positive Mental Health in schools

Adolescent mental health has rightly become one of Europe's most pressing public health priorities. We must also invest in systematically building **Positive Mental Health** (PMH) from an early age.

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## On Clean Air Day, the EU Healthy Air Coalition is leading a call, joined by over 30 health organisations, for a fossil fuel phase-out to protect health

Clean air is essential for healthy lives and healthy communities, and shouldn't be a priviledge.

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EPHA (AISBL) is the European Platform bringing together public health organisations representing health professionals, patients groups, health promotion and disease specific NGOs, academic groupings and other health associations.

Our mailing address is:
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