# Joint Statement on A healthy start for a healthy life: A Strategy for Child and Adolescent Health and Well-Being in the WHO European Region 2026–2030 (agenda item 8)

*75th meeting of the WHO Regional Committee for Europe*
*28-30 October 2025, Copenhagen, Denmark*

In May 2025, the World Health Assembly adopted two resolutions addressing lung health and skin diseases as key public health priorities[1,2]. The resolutions articulated, for the first time, the need for a comprehensive approach on lung and skin health, focusing on early diagnosis, prevention and care; and on engagement with patients, caregivers and doctors. Importantly, both resolutions prompt action inviting countries and regions to develop relevant plans.

The European Federation of Allergy and Airways Diseases Patients' Association (EFA) and the co-signatory organisations applaud the proposed strategy's focus on prevention, quality care, commercial determinants and education of young people. We strongly believe that resolutions such as those on lung and skin health can serve as key building blocks in making the strategy a reality.

## Lung and skin diseases: A huge health burden for children, young people and families in Europe

Asthma and atopic dermatitis/eczema (AD/E) are among the most common non-communicable diseases globally. In the WHO European Region, 13,7 million children and youngsters live with asthma, the societal cost estimated at 46 billion euros annually[3]. On the other hand, AD/E is the most common inflammatory skin disease. Its prevalence in people 13–14 years old oscillates between 1.5% in Lithuania and 15% in Bulgaria, Denmark, Finland, and Hungary[4].

One element that asthma and AD/E have in common is that **they develop during childhood and may persist well into adulthood**, making both diseases more prevalent in early years of life[5]. Children and adolescents are more vulnerable to risks linked with their onset and exacerbation[6], including **significant co-morbidities** such as (food) allergy, obesity and cardiovascular disease.

Triggers may vary widely between asthma and AD/E: from commercial determinants such as tobacco and related (novel) products, chemicals in consumer products; to environmental factors such as air pollution and climate change-driven hazards, including heat and airborne allergens.

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[1] Seventy-eighth World Health Assembly (WHA), Resolution 'Promoting and prioritizing an integrated lung health approach', May 2025 https://www.knowledge-action-portal.com/sites/default/files/2025-06/A78_R5-en.pdf
[2] Seventy-eighth World Health Assembly (WHA), Resolution 'Skin diseases as a global public health priority', May 2025 https://apps.who.int/gb/ebwha/pdf_files/WHA78/A78_R15-en.pdf
[3] International Respiratory Coalition, Lung Facts – Asthma, https://international-respiratory-coalition.org/diseases/asthma/
[4] Kowalska-Olędzka et al, Epidemiology of atopic dermatitis in Europe, J Drug Assess. 2019 Jun: https://pmc.ncbi.nlm.nih.gov/articles/PMC6566979/
[5] M. Trivedi, E. Denton, 'Asthma in Children and Adults—What Are the Differences and What Can They Tell us About Asthma?', Front Pediatr 2019 https://pmc.ncbi.nlm.nih.gov/articles/PMC6603154/
[6] T. H. Kim, 'Global burden of asthma among children and adolescents with projections to 2050: a comprehensive review and forecasted modeling study', Clin Exp Pediatr, 2025 https://pmc.ncbi.nlm.nih.gov/articles/PMC12062390/

In addition, living with asthma and AD/E as a child or young person often means significant **impact beyond physical health**: mental and emotional burden; stigma, bullying and self-exclusion; sleep disorders; and widening educational gaps, are only some aspects of the 'unseen' impact.

## What can the WHO Regional Committee for Europe do?

We invite the WHO Regional Committee to **instil the principles of the WHA resolutions on lung health and skin diseases into the Strategy for Child and Adolescent Health and Well-Being**. In particular, we ask the Regional Committee to:

a. Lead the **fight against tobacco and related (novel) products**, including advertisement and product placement targeting young people; and ensuring **100% smoke-free environments** in areas frequented by children and young people

b. Address **outdoor and indoor air pollution**, which disproportionately affects children and adolescents both at home and school; and tackling **climate change-driven hazards** exacerbating the disease symptoms

c. Enable **better care and treatment for young people** through early diagnosis, tailored advice, preventative treatment, and appropriate follow-ups, including co-morbidities

d. Recognise the significant **burden beyond physical health**, including mental and emotional burden, and prioritise the easing of the family burden

e. Counteract the **social burden of asthma and AD/E,** including the stigma, feeling of shame, self- isolation, bullying, abstention from activities and sports; and educational gaps due to school absenteeism etc.

f. Actively support **engagement and participation of young patients**, enabling young people to have a voice and harnessing digital means to reach out to them

**Submitting organisation:**
European Federation of Allergy and Airways Diseases Patients' Associations (EFA)

**Co-signatory organisations:**

- EuroHealthNet
- European Forum for Primary Care (EFPC)
- European Hospital and Healthcare Federation (HOPE)
- European Lung Foundation (ELF)
- European Network for Smoking and Tobacco Prevention (ENSP)
- European Public Health Association (EUPHA)
- European Public Health Alliance (EPHA)
- European Respiratory Society (ERS)
- World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians (European Regional Branch - WONCA Europe)