



European Medical Students' Association

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This policy was adopted by the **35th EMSA Autumn Assembly** in Ljubljana, Slovenia on **26.09.2025**

Valid until: **26.09.2029**

Health and Well-being in Higher Education Institutions

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The European Medical Students' Association (EMSA) represents medical students across Europe. We envision a healthy and solidary Europe in which medical students actively promote health. EMSA empowers medical students to advocate health in all policies, excellence in medical research, interprofessional healthcare education and the protection of human rights across Europe.

EMSA. HEALTH. EUROPE. TOGETHER.

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Problem statement.

According to the World Health Organization, the concept of health is “*a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity*” (World Health Organization, 2020). Accordingly, the different determinants contributing to person’s health status must be assessed, namely: the social and economic environment, the physical environment, the person’s individual characteristics and behaviours, income and social status, education, physical environment, social support networks, genetics, the availability of health services and gender (World Health Organization, 2017).

Higher education institutions (HEI) have a direct impact on the majority of these determinants beyond education. With an estimated workload of 1,500 to 1,800 hours for an academic year in the European Higher Education Area (EHEA), the physical environment of students is majorly shaped by their university, social networks are oftentimes centred around university friendships, and due to the limited free time, financial resources are highly dependent on family or state support. In particular, in more than half of the European countries, financial heterogeneity is larger among students than among the general population (European Commission, 2015; Gwosć, 2019).

Most HEI students in the EHEA are young adults under the age of 25 years, a vulnerable time in life in regard to cognitive development, identity formation and development of resilience but also the development of mental health conditions and the exposure to their respective risk factors (Hauschildt et al., 2021; Wood et al., 2017; Fusar-Poli, 2019). Furthermore, it is believed that HEI students have been recognised to experience high rates of unhealthy behaviours implicating their current and potentially their future life. For instance, HEI students are frequently associated with poor quality and insufficient sleep, as well as irregular sleep-wake patterns (Lund et al., 2009).

One of the main defined goals of HEI is to promote an environment where its students can achieve an education and academic results of excellence. Nonetheless, existing local studies have shown that universities keep on having high rates of student alcohol consumption, eating disorders, mental health disorders, sleep deprivation, among others (Ladner et al., 2020; Ladner et al., 2019; Lund et al., 2009). These factors, and other public health issues pertinent to this demographic, have been proven to impact the academic achievement of the students who experience them, indirectly becoming a barrier to the quality of their education (Duncan et al., 2021; Burrows et al., 2017; Eliasson et al., 2009). However, there is a lack of international studies and data related to the health habits of HEI students.

Today's students constitute the next generation of working professionals. Bearing in mind that university represents an important growth vector for its students, the reality that they are taught and live during this stage of life will have an impact on their perspective, development and knowledge (Chan & Indiana University, Bloomington, 2016). Consequently, the promotion of health measures and literacy inside of HEI may lead to a more knowledgeable future generation concerning risk factors and illnesses, which might be prevented through behaviour changes, such as establishing healthy lifestyle habits. Moreover, the people can empower others regarding the health proficiency learnt during university and, by doing so, create a positive cycle of healthy lifestyle promotion (Coughlin et al., 2021, World Health Organisation, 2017).

For several decades, there has been a concept known as “Health Promoting Universities” (HPU). This idea is based on the principle that universities are important opportunities to promote health and well-being, acting as a public health agent. In 2015, the foundations of this movement were published in the Okanagan Charter, namely the principles, the objectives and the expected outcomes (International Conference on Health Promoting Universities & Colleges, 2015). For example, implementations of the concept consist of prevention of occupational hazards (safe and ergonomic workplaces, workshops for stress management, problem solving system), creating opportunities for physical activity and healthy eating, improvement of physical and social environments (green spaces, cafeterias, places to study and rest) and collaborations with organisations of the health and education sectors, such as ministries, WHO, international agencies, regional and local health centres, other universities and schools. Whole systems approach is defined as the application of strategies and methods in order to have a developed perception of encountered public health issues and embrace holistic methods of thinking. In particular, HPUs are characterised by following a whole system approach, making health a collaborative issue of the whole university community. In 2016, only 70% of universities belonging to an HPU network followed this whole systems approach and only 67% report having criteria for evaluation of the implementation of the HPU framework (Suárez-Reyes et al., 2018). The lack of continuous evaluation, both within the HPU network and the HEI itself, is highlighted by the fact that no comparable study has been published since 2018 (Tafireyi et al., 2024). Thus, the majority of the HPU recommendations are not accomplished yet, simultaneously missing the opportunity to empower students to become public health mediators and creating a barrier to the achievement of their personal and academic goals.

Our view. Aim

EMSA acknowledges that health is multidimensional and understands the significant role that HEIs play in shaping the well-being of students due to their crucial influence on various health determinants, such as the physical environment, social networks, and access to resources. Academic excellence and health go hand in hand and must be taken particularly seriously due to the high rates of unhealthy behaviours and mental health issues among students. To address these challenges, EMSA advocates for inclusivity within HEIs by promoting equal access and equal opportunities for all students, including students within vulnerable social groups, and ensuring access to healthcare services tailored to individual student needs.

By prioritising support and prevention efforts, EMSA believes that HEIs can foster healthy lifestyles, address living situations, and provide financial support to alleviate stressors affecting student health and well-being. Furthermore, EMSA underscores the necessity of implementing national and international frameworks for health promotion within HEIs, along with efficient measurement and evaluation mechanisms to track progress and ensure accountability.

EMSA recognizes the distinct role of medical students as future healthcare professionals, in advocating for and promoting health initiatives within HEIs. They can contribute to creating a culture of support, prevention, and inclusivity, while also driving positive change within their institutions.

In conclusion, EMSA believes that by addressing these key areas, HEIs can fulfil their role as purveyors of health and well-being, empowering students to thrive academically and personally, and creating a positive impact on society as a whole.

Recommendations

EMSA calls on

World Health Organization to:

- Recommend Member States to create health policies that promote health inside HEIs, namely regarding access to medical care and health promotion;
- Establish standardised survey methods regarding the issue and encourage HEIs to conduct these specific surveys in order to understand the current position of the society;
- Create guidelines and frameworks for national governments to understand and follow the public health issues inside HEIs, as well as the impact of health policies implemented.

Health Promoting Universities Network to:

- Initiate and guarantee a cooperation project together with the member HEIs, at a national and international level, in order to ensure the necessary policies are adopted and highlighted issues are tackled;
- To create standardised guidelines to be followed by the individuals within HEIs and HEIs' administrations.

Member states to:

- Study the key health problems experienced in HEIs, categorising the results according to the field of study, age and region;
- Create campaigns promoting healthy lifestyles in HEIs, including addiction prevention, with measures directed to its population;
- Assure the existence of healthcare assistance accessible to HEIs students free of charge, regardless of where they are from, with periodical regulations;
- Increase the financial support of HEIs that provide health services to students;
- Promote the existence of student accommodations that have adequate living conditions, such as basic hygiene conditions, electricity, and clean water;
- Create scholarships and other methods of supporting students from low socioeconomic status, allowing them to study without restricting the possibility of having healthy lifestyles and access to needed healthcare and medicine.

- Develop a comprehensive study nationwide to evaluate mental health, physical health and lifestyle behaviour periodically every two years, and collect the data from 70% of the total HEIs in the country, through partnerships and cooperation with student organisations and rectorships.
- Develop a nationwide campaign for addiction prevention, which encompasses tools to recognise addictive behaviours, as well as tools to prevent them, regarding gambling, smoking, and consumption of recreational drugs. The campaign should be developed in different regions (on the streets, and HEI buildings), as well as digitally (social media platforms, HEI websites), through the coordination of HEI personnel and student organisations.

Higher Education Institutions to:

- Assess continuously the health status of its students, through a voluntary bi-annual health survey, to assess the mental health status of individuals within HEIs. This survey should be based on the frame of the Patient Health Questionnaire (PHQ-9). If a person presents signs of a possible depressive disorder, they should be offered psychological support by the HEI services, that do not breach the students' right to privacy;
- Implement the health campaigns promoted nationally, and create new ones tackling the main health issues and unhealthy habits of its students;
- Establish partnerships with healthcare facilities and other HEIs, aiming to provide a quality and diverse healthcare service to the students;
- Educate HEIs staff on healthcare risks and factors;
- Organise workshops and/or campaigns regarding mental health issues related to attending an HEI and how to prevent mental health diseases;
- Assure the existence of accessible healthy nutritious options, according to nutritional international guidelines;
- Establish partnerships with sports clubs or centres, providing students with affordable places to practise physical activities.

Healthcare Student Organizations and Students to:

- Organise activities, projects, campaigns and trainings based on healthy lifestyles and disease prevention;
- Work in synergy with HEIs to promote the aforementioned campaigns and surveys.

Abbreviations:

EHEA: European Higher Education Area

EMSA: European Medical Students' Association

HEI: Higher Education Institution

HPU: Health Promoting University

WHO: World Health Organisation

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