

STRENGTHENING SOCIAL CONNECTION IN SCHOOLS AND THE WIDER COMMUNITY

POLICY BRIEF

MAKING EVERY SCHOOL A HEALTH PROMOTING SCHOOL

Declining levels of social connection have become a pressing global issue, affecting people of all ages, from adolescents to the elderly. In recent years, this has escalated, with particular concern for younger populations and adults, who are experiencing this disconnect at alarming rates.¹ Currently, 16% of adolescents report feeling lonely most of the time or always in the past year. This trend worsens as age increases: loneliness more than doubles between ages 11 and 15, from 8 to 13% among boys and 14% to 28% among girls.² Globally, 17.4% of young adults aged 18–29 and a third of older adults aged 60 and above are also estimated to experience social isolation.³

What are the causes and consequences of social disconnect?

Rising levels of loneliness and social disconnection have been linked to a range of factors, including challenging economic circumstances, limited access to education, and inadequate community infrastructure. Among young people, additional drivers include bullying, identity struggles, excessive screen time, and adverse experiences that erode trust and hinder the ability to seek social support. The long-lasting impacts of COVID-19 restrictions have also significantly contributed to feelings of isolation.^{4,5}

The negative impact of social exclusion is profound. Beyond its well-documented effects on mental





health, such as depression and anxiety, issues such as loneliness and isolation contribute to a higher risk of cardiovascular diseases, cognitive decline, and even suicidal thoughts. Given the serious consequences on both mental and physical health, there is a growing call to improve social wellbeing.³ Key to this effort are community engagement, social inclusion, and active participation⁶—especially in environments where connection and community can thrive, such as schools.

Schools as anchors in the community

Schools, as anchor organisations,^{7,*} are not just places of learning. They are uniquely positioned to address and mitigate risks of social exclusion in the community, fostering environments that encourage interaction, belonging, and emotional wellbeing.⁸ Schools can bridge generational divides through mentorship programmes and initiatives connecting young and older groups.⁹ They also support local economies by employing both teaching and non-teaching staff, and collaborating with local businesses¹⁰ (such as those providing healthy food options, digital tools, skills training, or discounted transport to support student mobility).

This role is further strengthened when students are not just seen as recipients, but as key contributors to society. Students that collaborate with teachers, parents, and local partners in shaping their learning and social environments create a shared sense of ownership and trust.¹¹ When students are intentionally and meaningfully engaged in school health decision-making, they not only help shape supportive physical and social environments; they also deepen their understanding of health and cultivate essential competencies for wellbeing.¹²

*“There has been increased recognition of the importance of student engagement in HPS aligning with the philosophical shift towards the ‘new’ sociology of childhood. **This shift acknowledges that children and youth are active agents in constructing their lives, and are persons with capability, power, and knowledge rather than subjects of social concern.**”*

Kontak, J.C. et al, 2025

In fact, systematic reviews¹³ have demonstrated that student involvement in designing, planning, implementing, and evaluating school-based health promotion initiatives leads to positive outcomes—personally (e.g. improved health behaviours and sense of belonging), socially (e.g. better peer and adult relationships), as well as institutionally (e.g. a more inclusive and responsive school climate).

What are the barriers and opportunities to advance community participation in school environments?

Creating spaces for stronger social connection requires a multistakeholder approach. It is not the responsibility of schools alone; families, local organisations, businesses, and local authorities each play a role in reinforcing belonging and cooperation by using the school as a platform for wider social cohesion.¹⁴

* Anchor organisations are stable, locally rooted institutions—such as schools—that leverage their resources to support the health, wellbeing, and development of their communities.



However, to fully realise the potential of schools, several barriers to community participation must be addressed. Families, especially from marginalised backgrounds, often feel disconnected from the school system due to previous negative experiences or cultural and language barriers. Local organisations and businesses may not fully recognise the value of collaboration or are unsure how to engage. Time constraints, limited resources, and competing responsibilities further challenge meaningful involvement. Within the schools themselves, structural issues such as lack of dedicated staff for outreach, a narrow focus on academic outcomes, or ineffective communication channels also inhibit sustainable partnerships.¹⁵

While there is growing recognition of the role schools can play as anchor institutions in their communities, this must be matched with practical strategies to overcome existing obstacles.¹⁶ Frameworks like the Health Promoting School (HPS) approach** can be catalysts for community participation by positioning schools as connectors between students, families, local organisations, and authorities. It highlights the importance of fostering a healthy social environment within and around the school, going beyond classroom-based initiatives and uniting all members of the community to promote better wellbeing.¹⁷

Health Promoting School standards and implementation areas

WHO and UNESCO's global standards and indicators¹⁸ and guidance¹⁹ for Health Promoting Schools set out standards and implementation areas to strengthen social connection in schools and in the wider community. HPS standards define the specific quality benchmarks schools should meet to be recognised as health-promoting, while implementation areas describe the practical domains and activities through which these standards are put into practice.



In this regard, HPS standard 6 emphasises the need for a safe, inclusive environment where norms, values, and relationships support wellbeing and positive educational outcomes. Policies should co-reflect stakeholder voices, promote kindness and respect, and include mechanisms to address socio-emotional challenges, invest in staff training and ensure continuity of this ethos in virtual settings. These efforts can be supported through the following implementation areas:

** More information on the Health Promoting School approach and global standards can be found in the Schools4Health policy brief on 'Why invest in Health Promoting Schools?'



Implementation areas 6 and 12: Involving parents, caregivers, and the local community, and strengthening these partnerships.

Parents, families, local health services, businesses and community members should be actively involved in all stages of HPS planning and implementation, as their participation helps build healthier home and community environments. Such partnerships should be clearly defined and documented, outlining roles, resources, and shared goals. For example, parents and community members could be invited to participate in school governance, such as serving on advisory boards, to support the implementation of HPS, or schools could open their grounds for community activities that foster connection and engagement.

Strong local policy frameworks and committed school leadership are essential to enable this collaboration—through practical measures such as flexible meeting times for working parents, translation support for multilingual families, dedicated staff for community outreach, and funding for joint school-community projects.²⁰



Implementation area 11: Involve students

This means creating equal opportunities for students to participate in school governance, policy-making, and interventions, through structures such as student councils and governance boards. These platforms empower students to critically assess existing policies, contribute meaningful insights drawn from their lived experiences, and take part in monitoring and refining changes to ensure they are effective and relevant.

Ultimately, meaningful participation is built on trust and a sense of shared responsibility. When the broader community is actively engaged within the school environment,²¹ they contribute not only resources but also lasting networks of support that strengthen the school's role for social connection.



Policies and initiatives supporting social wellbeing in schools

Global initiatives

- The UN Convention on the Rights of the Child (UNCRC)²² sets out the right of a child to be heard (Article 12) and their right to health (Article 24). This also applies to education and school, where the active role of children in a participatory learning environment is highlighted.²³
- The UNESCO Global Education Monitoring Report²⁴ is an annual report that tracks progress on education-related UN Sustainable Development Goals, with strong focus on inclusion, equity, and learner wellbeing. The 2020 report, for example, focused on inclusion and education as key drivers of wellbeing and social cohesion in schools.

EU initiatives

- The EU Strategy on the Rights of the Child²⁵ includes specific commitments to promote socio-economic inclusion, health, and education, including providing support for children with disabilities and those at risk of underachievement.²⁶ The Strategy also focuses on children as active citizens through the establishment of the EU Children's Participation Platform.²⁷
- The EU Youth Strategy²⁸ promotes youth engagement, social inclusion, mental health, and equality in education settings. It supports EU Member States in creating enabling environments where young people feel valued, safe, and empowered. Central to this is the EU Youth Dialogue, which ensures young people can actively influence EU policy through structured consultation,²⁹ and Erasmus+, which promotes programmes and initiatives based on inclusion, mobility and skills development.³⁰



Examples of promising initiatives

Healthy school programmes built on community cooperation (The Netherlands)



Gezonde School – In the Netherlands, the Healthy School Programme (Gezonde School³¹) is a successful example of collaboration between governmental and non-governmental organisations, including national and regional public health institutes, education councils, and non-profit knowledge and advocacy institutes. At the municipal level, healthy school advisors provide tailored support to help schools become health promoting schools. Well rooted in their local community, these advisors know which schools have the most marginalised students and need targeted assistance. Alongside education councils and non-profit advocacy organisations, they play a key role in identifying local needs and conveying them to the national level. When schools experience significant challenges – such as high levels of health-related concerns or issues affecting vulnerable populations – the programme can act to provide feedback at the national level and adjust the programme accordingly.

Youth participation is also key. In Amsterdam, for example, vocational students shaped the Healthy School programme through a student-run think tank, increasing ownership and ensuring the programme is relevant to their context.

Healthy Primary School of the Future – Launched in 2015, the Healthy Primary School of the Future (HPSF) aims to improve children's health and wellbeing by integrating health promotion into the daily life of primary schools. Central to the programme is the provision of a daily healthy lunch and structured physical activity sessions each day.

A key feature of HPSF is the strong emphasis of public involvement and co-creation. Teachers and parents played an integral role from the outset, contributing to decisions about the programme's adoption and the adaptation of health-focused changes within each school. Additionally, the initiative established children's voice groups, with representatives from each class, to ensure that students' opinions and needs were central to the process. This feedback mechanism allowed the programme to be tailored more effectively to children's preferences and daily experiences.

Each participating school appointed a school coordinator to manage the implementation of HPSF, while overall leadership came from a collaborative executive board made up of Movare (a Dutch organisation specialised in health promotion), the regional Public Health Services, and Maastricht University.³²



Mobilising the Health Promoting School framework to improve community participation in schools (EU initiative)



The [SHE4AHA project](#)³³ is a collaborative initiative led by the Schools for Health in Europe (SHE) Network Foundation, designed to support schools in becoming inclusive, health-promoting environments

Case study 1: Iceland – Djúpavogsskóli, a small school in Djúpvogur, Iceland, is combining the Health Promoting School approach with the Citta-slow philosophy, which emphasises sustainable, mindful living. As part of the SHE4AHA project, one of the focal points for the school was to foster togetherness by promoting empathy, cooperation, and positive communication within the school community and strong collaboration with local stakeholders. Despite challenges such as staff fatigue and limited resources, the project has seen positive outcomes, including increased student engagement, stronger communication with parents, and increased community interest in the school's activities.

Case study 2: Portugal – The Basic School Monsenhor Elíseo de Araújo in Portugal, in collaboration with the Bernardino Machado School Cluster, implemented a whole-school project involving around 700 students (ages 6–14), parents, teachers, and community partners. Using the S-IVAC co-creation method, students investigated local health and environmental issues and took action to improve them together with the rest of the school staff. Key goals included promoting mental and physical wellbeing, encouraging arts and crafts, cell phone-free breaks, heritage-based physical activity, and teacher wellness.

Beyond the project, it also encourages intergenerational participation. The school has launched activities such as 'Gymnastics with grandparents' and 'Vegetable-garden with grandparents', where pupils and children in kindergarten interact with their grandparents in an active and educational way. In addition, the school has established collaboration with a local day centre for older people, enabling students to participate in shared activities with older residents. This engagement provides both children and older adults with opportunities for mutual learning and social connection, while also addressing the risks of social isolation among older adults.³⁴

Case study 3: France – Ecole maternelle du Mas, a nursery school in Firminy, France, launched a breakfast initiative as part of the SHE4AHA project to promote healthy eating and strengthen school-family partnerships. The activity aimed to ensure children start the day with a nutritious meal, improve concentration, and prevent obesity. Free breakfasts were offered regularly, involving both children and parents. Parents helped prepare the meals and participated in group discussions with experts like dietitians and the League Against Cancer. The project fostered collaboration between school staff, families, local authorities, and associations. Strong municipal support, teamwork, and positive family feedback were key to its success.

More good practices can be found in the [SHE4AHA Health Promoting School Good Practice Catalogue](#).³⁵



A participatory approach to school wellbeing (SPAIN, Andalusia)



In Andalusia, the Snack & Chill initiative was adapted and implemented across five schools as part of the Schools4Health project, with the aim to improve students' healthy eating habits.³⁶ The pilots adopted a strong participatory approach, establishing three committees: 1) a steering committee with regional ministries of health, agriculture, and education, and project coordinators, 2) five local committees at each school with representatives from educational community, school nurses, students, families, and city council, and 3) a technical committee involving the health district, representatives of the local committee, and project coordinators. This ensured that the initiative was tailored to local needs and had strong community support.

External stakeholders, such as regional ministries, local governments, and supermarkets, played a key role in supporting the initiative. For instance, the Andalusian Health Service provided food hygiene education, while the Ministry of Agriculture funded equipment, and supermarkets supplied fresh fruits and vegetables. These partnerships not only provided resources but also established a stronger collaboration between schools and local organisations, helping to strengthen the sustainability of the initiative and build strong local networks.

Schools in motion (ESTONIA)



The Schools in Motion programme in Estonia is a science-driven national initiative aimed at increasing physical activity and wellbeing among school-aged children through a whole-school approach. It empowers students to take the lead in designing activities that bring movement into the school day, from classroom layouts that encourage physical activity to peer-led active breaks and playground improvements. This increased activity correlates with students feeling better at school, having better relationships with classmates, and attending school more eagerly.³⁷

Participation is central to the programme. Each school begins with a self-assessment of their current environment and practices, followed by co-creation workshops where pupils, teachers, and parents jointly decide on priorities and actions. The programme also recognises the importance of staff wellbeing, introducing walk-and-talk meetings, joint workouts, and the recognition of teachers for their contribution to building a schools-in-motion culture.

Currently, the network includes 222 schools, with nearly half (46%) of all general education school in Estonia participating. The activities are implemented with state budget support from the Ministry of Education and Research, and the initiative also benefits from strong policy support. Notably, the Estonian Education Development Plan 2035 emphasises the need to create a learning environment that creates wellbeing and supports the mental and physical health of learners.³⁸



Calls to action to strengthen social connection in school communities and in the wider community

The Health Promoting School framework transforms schools into inclusive spaces that can support learning, health, and social wellbeing. By involving students, staff, and communities in health-related decisions, they can contribute to reducing loneliness and to fostering connection.

The following recommendations outline key actions that can contribute to this:

1. Integrate social wellbeing into school policies and planning frameworks

CONTEXT: To promote wellbeing effectively, it must be embedded into the school's values, policies, and daily practices, not treated as an add-on. Strong leadership and clear planning are essential to ensure social and emotional development, safety, and inclusion are consistently prioritised alongside academic goals.

ACTION:

- School leaders should incorporate wellbeing goals into school development plans and establish clear objectives for promoting belonging, participation, and social health. It is also important that these plans outline the main avenues where students, staff, and families will be involved in setting these goals and reviewing progress.
- School leaders, with the support of the respective Ministries of Education and Training should ensure that school wellbeing is included in staff responsibilities and professional development, monitoring implementation through regular feedback and evaluation.

2. Implement inclusive approaches that support families' engagement in school life

CONTEXT: Families are key to creating a cohesive and supportive school environment, but many face barriers to engaging fully. These can include time constraints, language differences, unfamiliarity with school systems, or past negative experiences. Inclusive practices are needed to ensure all families feel welcomed, valued, and able to contribute.

ACTION:

- School leaders need to offer flexible ways for families to participate in school life, such as digital platforms, informal meetups, and translated communications.
- Local authorities and the respective Ministries for Employment should advocate for and enforce family-friendly measures that support parental involvement in education.
- Ministries of Education should provide training for staff on building respectful and culturally responsive relationships with families and create dedicated roles or points of contact for family engagement.



3. Establish mechanisms within the school for meaningful student and community participation

CONTEXT: School leaders have a vital role in embedding participatory practices into school life by actively involving students, families, and local community members in school decision-making. This requires proper structures, such as councils, working groups, and clear communication channels, to ensure inclusive, consistent, and meaningful engagement that strengthens the school's role as a hub for community wellbeing and collective advocacy.

ACTION:

- Engage school councils (students and parents), local businesses, organisations, and authorities in co-developing strategic school priorities using participatory frameworks like the Health Promoting Schools (HPS) model.
- Set up or strengthen local working groups to guide, implement, and monitor initiatives on social wellbeing, using inclusive methods such as hybrid (in-person and online) meetings to widen participation.
- Use tools like the [SHE Rapid Assessment Tool](#)³⁹ and [SHE engagement template](#)⁴⁰ to identify the school's needs, structure collaboration, and ensure all initiatives are communicated early and clearly to encourage buy-in.

Strengthen partnerships with local organisations, businesses, and authorities to support wellbeing

CONTEXT: Collaboration beyond the school walls can greatly enhance students' as well as community members' wellbeing by bringing in new resources, perspectives, and opportunities and stimulating connection. Local partners can contribute to school activities, offer support services, and help create more connected and inclusive communities around schools.

ACTION:

- Build and maintain partnerships with local organisations, services, and businesses that can support wellbeing through mentoring, cultural activities, health services, or career guidance. Local authorities can play a key role as facilitators in this, as well as in the planning and co-funding initiatives that promote student and family wellbeing in and around school environments.
- Healthy school networks at national, regional, or local level can strengthen schools' capacity to engage with external stakeholders through shared learning and support. They can offer guidance on building sustainable partnerships, including how to maintain ongoing dialogue and collaborate on problem-solving through regular meetings, working groups, or other structured forums.
- There is more awareness of the potential of schools to act as anchor organisations in their communities, but knowledge of how to overcome barriers and strengthen this role is limited. Public institutions should invest more resources to study and exchange information on what can be done, to unlock this potential to improve social connection in communities.



Schools4Health aims to make every school a health promoting school that prioritises the health of everyone in the school community. It strives to introduce, strengthen and sustain the adoption of a whole-of-school approach to health and wellbeing. It engages 16 schools across the EU with special consideration for school settings in deprived areas. To learn more about Schools4Health, go to schools4health.eu.

Schools4Health brings together lessons learned that can support the adoption of health promoting schools approaches, as well as specific best practices in the areas of food, physical activity and mental health that contribute to the approach.

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References

- 1 Holt-Lunstad, J. (2023) Social connection as a critical factor for mental and physical health: evidence, trends, challenges, and future implications. *World Psychiatry*. 2024 Oct;23(3):312-332.
- 2 Cosma, A., Abdrakhmanova, S., Taut, D., Schrijvers, K., Catunda, C., Schnohr, C. A focus on adolescent mental health and wellbeing in Europe, central Asia and Canada. Health Behaviour in School-aged Children international report from the 2021/2022 survey. Volume 1. Copenhagen: WHO Regional Office for Europe; 2023
- 3 *The Lancet Public Health* (2025). Social health—the neglected third pillar. *The Lancet Public Health*, Volume 10, Issue 8, e640
- 4 WHO (2025) From loneliness to social connection - charting a path to healthier societies: report of the WHO Commission on Social Connection. Geneva: World Health Organization.
- 5 Schnepf, S. V., d'Hombres, B., Mauri, C. (eds.) (2024) Loneliness in Europe – Determinants, Risks and Interventions. The European Union, represented by the European Commission.
- 6 WHO (2022). WHO European framework for action on mental health 2021–2025. Copenhagen: WHO Regional Office for Europe.
- 7 Health Anchors Learning Network (n.d.) What is an anchor?
- 8 Raniti, M., Rakesh, D., Patton, G.C. et al. (2022) The role of school connectedness in the prevention of youth depression and anxiety: a systematic review with youth consultation. *BMC Public Health* 22, 2152.
- 9 Giraudeau, C., & Bailly, N. (2019). Intergenerational programs: What can school-age children and older people expect from them? A systematic review. *European journal of ageing*, 16(3), 363–376.
- 10 European Commission (2023) European School Education Platform: School-community partnerships promoting innovation in education
- 11 Margaretha, M., Azzopardi, P. S., Fisher, J., & Sawyer, S. M. (2023). School-based mental health promotion: A global policy review. *Frontiers in psychiatry*, 14, 1126767.
- 12 Griebler, U., Rojatz, D., Simovska, V., & Forster, R. (2017). Effects of student participation in school health promotion: a systematic review. *Health promotion international*, 32(2), 195–206.
- 13 Kontak, J.C., Macrae, C., Caldwell, H.A.T. et al. (2025) The process of student engagement in school health promotion: a scoping review. *BMC Public Health* 25, 1063.
- 14 European Commission (n.d.) European School Education Platform: 5.4. Partnerships: Community organisations and civic society.
- 15 European Commission (2023). European School Education Platform: Overcoming common barriers to parental involvement.
- 16 McMullen, J. M., George, M., Ingman, B. C., Pulling Kuhn, A., Graham, D. J., & Carson, R. L. (2020). A Systematic Review of Community Engagement Outcomes Research in School-Based Health Interventions. *The Journal of school health*, 90(12), 985–994.
- 17 Schools for Health in Europe Network (2020) SHE School Manual 2.0.
- 18 WHO & UNESCO (2021) Making every school a health-promoting school – Global standards and indicators.
- 19 WHO & UNESCO (2021) Making every school a health-promoting school: implementation guidance.
- 20 Official Journal of the European Union (2022) Council Recommendation on Pathways to School Success.
- 21 Sanders, Mavis. (2003). Community Involvement In Schools From Concept to Practice. *Education and Urban Society - EDUC URBAN SOC.* 35. 161-180.
- 22 United Nations (1989) Convention on the Rights of the Child.
- 23 United Nations (2009) General Comment no. 12 – The right of the child to be heard.
- 24 UNESCO (2024) Global education monitoring report, 2024/5, Leadership in education: lead for learning.
- 25 European Commission (n.d.) The EU Strategy on the Rights of the Child and the European Child Guarantee.
- 26 European Commission (n.d.) EU Strategy on the Rights of the Child Thematic Area 2 - Socio-economic inclusion, health and education.
- 27 European Commission (n.d.) EU Children's Participation Platform.
- 28 European Union (n.d.) The EU Youth Strategy.
- 29 European Union (2025) European Youth Portal – What is the EU Youth Dialogue.
- 30 European Commission (n.d.) Priorities of the Erasmus+ Programme.
- 31 Gezonde School (n.d.) Gezonde School.
- 32 De Gezonde Basisschool van de Toekomst (n.d.) De Gezonde Basisschool van de Toekomst.
- 33 SHE4AHA (n.d.) A toolbox to become a health promoting school. *Health throughout life*
- 34 *School Health in Europe for Active and Healthy Ageing (SHE4AHA)* (2025) Policy and Implementation Recommendations.
- 35 Schools for Health in Europe Network Foundation (2025). Health Promoting School Good Practice Catalogue.
- 36 Junta de Andalucía Consejería de Salud y Consumo (n.d.) Momentos Disfruta.
- 37 Education Estonia (2023) Estonian initiative boosting student activity wins global award.
- 38 Liikuma Kutsuv Kool (n.d.) Liikuma Kutsuv Kool.
- 39 Schools for Health in Europe (2013) SHE Rapid Assessment Tool.
- 40 Schools for Health in Europe (2020) A Methodological Guidebook to become a Health Promoting School.