



D2.1 Establishment of Lung Health CoP

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List of abbreviations and definitions

Abbreviation	Definition
CoP	Community of Practices
CRDs	Chronic Respiratory Diseases
LH4L	LungHealth4Life
WP	Work Package
ToR	Terms of Reference

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Executive Summary

This document provides an overview of the Establishment of a Community of Practices (COPs) where respiratory patients' groups, healthcare professionals (HCPs), educational specialists, psychologists, public health experts and national and EU health authorities/institutes will build a pool of knowledge and best practices, that is then codified into a learning path with practical contents, tools and materials.



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1. Introduction

The LungHealth4Life (LH4L) Community of Practice (CoP) was officially established in February 2025 (M6) as part of the Work Package 2, following a preparatory phase focused on members recruitment. This collaborative network brings together experts, patient associations, youth organisations, education specialists, and healthcare professionals to promote lung health and prevent chronic respiratory diseases (CRDs) in European schools.

2. Establishment of the LH4L Community of Practices

The LH4L Community of Practice is a collaborative platform dedicated to enhancing lung health among young people across Europe. This initiative intends to bring together a diverse group of stakeholders to share knowledge, best practices, and develop practical tools for schools. By fostering a multidisciplinary approach, the LH4L CoP aims to create a sustainable network that supports health promotion, policy influence, and capacity building in the field of lung health. In the sections below, key aspects of the LH4L Community of Practices strategy are outlined, detailing its objectives, stakeholder engagement, governance, and planned activities.

Objectives of the LH4L Community of Practices

The LH4L Community of Practices (CoP) was established to create a collaborative network of professionals, patients, carers and organisations dedicated to improving lung health in children. Through knowledge exchange, shared expertise, and coordinated efforts, the CoP aims to enhance health education, policy development, and professional capacity in the field.

To achieve this, the CoP is guided by four key objectives:

1. Knowledge Network: Connect experts from various fields to exchange insights and experiences related to childhood health promotion.



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2. Best practices sharing: Identify, collect, and disseminate effective strategies within the lung health sector to ensure young people receive the best possible health education and interventions.
3. Feedback and Review: Provide input on materials developed in the LH4L project, ensuring they are relevant, accurate, and user-friendly for different audiences.
4. Capacity Building: Enhance skills and competencies within the network through peer learning, collaboration, and shared training initiatives.

LungHealth4Life Stakeholder Database

The LungHealth4Life (LH4L) Stakeholder Database was developed as a key tool to facilitate the mapping and recruitment of individuals and organisations for the Community of Practices (CoP) focused on lung health. The database was designed on M1 (September 2024) to capture relevant information, ensuring effective engagement, communication, and involvement in discussions, while also addressing ethical considerations. This structured approach enabled the systematic recruitment, engagement, and management of stakeholders, ensuring diverse and meaningful participation in LH4L initiatives.

To maximise engagement, the promotion of the Stakeholder Database was carried out through various channels, including consortium social media platforms, websites, and newsletters. These efforts aimed to reach a broad audience, encouraging participation and ensuring the CoP included a diverse range of stakeholders. The use of multiple communication channels helped to enhance visibility and accessibility, facilitating the recruitment process and strengthening stakeholder involvement.

A QR code was designed by EFA to enable interested parties to easily register and join the LH4L Community of Practices.



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Welcome to the LungHealth4Life (LH4L) Stakeholder Database!

Our Stakeholder Database is a key tool designed to streamline the mapping and recruitment of individuals and organisations joining our **Community of Practices (CoP)** focused on **children lung health**.

The CoP is a living exchange lab where respiratory patients, healthcare professionals, education specialists, national and EU authorities will discuss, share and, **together**, inspire new methodologies for **lung health prevention for children across Europe**



LH4L CoP Promotion and Outreach

A LH4L Community of Practices section was created on the LH4L project page, providing essential information for people interested in joining the community dedicated to improving lung health in children. The page outlines the goals of the Community of Practices, its structure, and the benefits available to members, including access to a collaborative platform, resources, and opportunities to influence public health policy and practice. Additionally, the Terms of Reference for the Community of Practices are available on the page, offering detailed guidelines on participation, expectations, and the framework for engagement. This page serves as a central hub for both prospective and current members of the Community of Practices, providing all the necessary information to support active involvement.

Membership and Participation

Members of the Community of Practice (CoP) benefit from a range of opportunities designed to enhance collaboration and impact. They gain access to a collaborative platform, enabling them to engage with a network of professionals and organisations dedicated to improving lung health in children. Additionally, they can utilise and contribute to a shared repository of best practices, educational materials, and practical tools, fostering knowledge exchange and professional development. Furthermore, members have the opportunity to influence policy and practice by participating in discussions that help shape public health guidelines and educational strategies across Europe, ensuring



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their expertise contributes to meaningful change. The LH4L CoP is open to a wide range of professionals and organisations involved in children's health promotion, including:

- Respiratory Patient Groups Representatives: National and European patient advocacy organisations focused on respiratory and lung health (e.g., asthma, COPD, lung cancer).
- Healthcare Professionals (HCPs): Respiratory specialists, general practitioners, nurses, pharmacists and physiotherapists, and their associations.
- Educational Specialists: Curriculum developers, training coordinators, schools principals and teachers, and academic researchers in health education, and their associations.
- Psychologists: Experts in mental health and behaviour change related to chronic respiratory diseases, and their associations.
- Public Health Experts: Policy advisors, managers and researchers from public health institutions and associations.
- National and EU Health/Education Authorities: Government agencies involved in health and education policy at the national and EU levels.

Participation and profiles of COP

As of February 2025, a total of 57 members have subscribed to be part of the Community of Practices. This diverse group represents various professional backgrounds, contributing to a multidisciplinary approach within the community. In the composition of the community Healthcare professionals make up the largest group (26 members), followed by patient representatives (14 members) and researchers (8 members), public health experts (3 members), Education specialists (2 members) and Civil society representatives (1 member).

Notably, there are no members from psychology, ethics, or national and EU authorities, highlighting an opportunity to enhance representation. As a next step, more effort will be dedicated by the consortium to engaging these underrepresented groups through



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targeted outreach and enhanced communication to encourage participation. Regular monitoring and feedback mechanisms will also be implemented to ensure a balanced and diverse community, strengthening collaboration and impact.

Table 1: CoP members' profile

Answer Choice		Responses
Healthcare professional	45.61%	26
Patient representative	24.56%	14
Researcher	14.04%	8
Public health expert	5.26%	3
Other	5.26%	3
If Other, please specify		14
Education specialist	3.51%	2
Civil society representative	1.75%	1
Psychologist	0.00%	0
Ethics expert	0.00%	0
National and EU Authorities	0.00%	0
	Answered	57

Governance and Structure

The CoP is coordinated by the European Federation of Allergy and Airways Diseases Patients' Associations (EFA). EFA oversees the CoP's activities, ensuring alignment with LH4L's objectives and facilitating effective collaboration among its members and consortium partners.

All the LH4L project partners are involved in the CoPs consultations. The LH4L partners are: Lungs Europe, EFA, Associacao Portuguesa de Medicina Geral e Familiar (APMGF), Polska Federacja Stowarzyszen Chorych na Astme i Choroby Alergiczne Iprzewlekłe obturacyjne Choroby Pluc (POLFED), Consorcio Centro de Investigacion Biomedica en Red (CIBER), Országos Koranyi Pulmonologiai Intezet (NKIP).



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To guide its mission and operations, a Terms of Reference (ToR) was developed, outlining the CoP's objectives, governance structure, member responsibilities, and key deliverables. An annex will be attached at the end of this report, providing additional details and relevant information. Additionally, the Terms of Reference are available on the LH4L project website and can be accessed at: <https://europeanlung.org/lunghealth4life/community-of-practices/>.

The LungHealth4Life (LH4L) Community of Practices (CoP) will meet regularly throughout the project duration, until August 2027. At least two General CoP online meetings will be held per year, providing members with opportunities to share best practices, exchange insights, discuss challenges, and provide feedback on project updates and materials. Additionally, ad hoc consultations may be conducted at the request of LH4L researchers to obtain specific feedback on project materials.

The CoP will also play a key role in mapping and collecting best practices for lung health prevention and promotion in children and young people across Europe. This initiative aims to support the adoption of effective models and approaches to help reduce the burden of chronic respiratory diseases (CRDs). The findings will be compiled into a deliverable, scheduled for submission in September 2025.

CoP members are expected to serve on a voluntary basis, with no financial compensation. However, eligible travel and expenditure costs related to CoP activities will be covered by the LH4L project to facilitate participation.

First CoP meeting

The inaugural Lung Health Community of Practices (CoP) meeting took place online on the 25th of February 2025 and successfully laid a strong foundation for collaboration among key stakeholders. With 38 participants actively engaging in discussions, the meeting identified critical challenges in promoting lung health, such as knowledge gaps, limited access to schools, and insufficient healthcare training.



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During the meeting an online facilitation tool, *GroupMap*, was used for gathering insights, and facilitating collaborative discussions among participants on various questions.

The GroupMap was launched during the meeting to gather initial thoughts and contributions on promoting lung health in children. However, it will remain open for two weeks to allow participants who were unable to attend the meeting the opportunity to provide their input.

The following questions helped participants identify obstacles, share successful strategies, highlight areas needing improvement, and explore ways to strengthen collaboration:

1. What are the main challenges you face in promoting lung health among children in your country?
2. What existing resources and best practices are available for promoting lung health in children in your country?
3. Where do you see gaps for promoting lung health in children?
4. How can the Community of Practices collaborate effectively to enhance lung health initiatives?

The CoP will play a vital role in refining educational materials, advocating for policy improvements, and fostering a network dedicated to early intervention and the prevention of chronic respiratory diseases. The positive engagement demonstrated during the meeting underscores the potential impact of this collaborative effort in advancing lung health initiatives across Europe.

3. Conclusion

WP2 is instrumental in driving the stakeholder engagement strategy for LungHealth4Life (LH4L), ensuring that civil society, healthcare professionals, and policymakers work together to enhance lung health prevention across Europe. By facilitating collaboration, capacity building, and policy discussions, the Community of Practices will contribute to



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sustainable public health improvements and better health outcomes for future generations. By joining the LH4L Community of Practice, members contribute to a collective effort to promote lung health from an early age. This initiative supports a healthier future for children across Europe, ensuring they breathe easier and live healthier lives. The CoP is a crucial step toward integrating lung health awareness into educational and healthcare systems, ultimately improving public health outcomes for future generations.

Annex

LungHealth4Life Community of Practices Terms of Reference



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LungHealth4Life

Community Of Practices

Terms of Reference

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Background

The LungHealth4Life (LH4L) is a 3 years project funded under the U4Health programme, aiming to transform lung health through early intervention, health promotion and disease prevention in schools across Europe. LH4L adopts a comprehensive approach, addressing the social, environmental, and educational factors influencing health. Through collaboration and shared expertise, the project aims to reduce the burden of Chronic Respiratory Diseases (CRDs), promote lung health from an early age, and influence public health policies across Europe. The project started on 1st September 2024 and it will end on the 31st August 2027.

A crucial part of the LH4 project is the setting up of a Community of Practices (CoPs), a collaborative platform where relevant stakeholders can share knowledge, best practices, and help develop practical tool for lung health promotion.

With the Community of Practice, the LH4L will involve associations working with patients and youth communities, as well as education specialists and healthcare professionals, to discuss, share and, together, inspire new methodologies for lung health prevention that can be replicated across Europe.

Objectives

- **Build a Knowledge Network:** Connect experts from diverse fields to exchange knowledge and experiences.
- **Share Best Practices:** Identify, collect and disseminate effective practices across the respiratory health sector.
- **Feedback and Review:** Provide feedback on the materials developed in the LH4L project, such as educational, communication and prevention material , ensuring their relevance, accuracy, and usability for different stakeholders.
- **Capacity Building:** Strengthen skills and competencies within the network by fostering peer learning and collaboration.

Benefits for CoP members

Members of the CoP will gain:

- **Opportunities for Collaboration:** Engage with a network of leading experts and stakeholders united in advancing respiratory health, especially for young people and disadvantaged groups.
- **Tools to Drive Meaningful Change:** Have a first look and the possibility to co-create innovative resources that patient organizations and health professionals can use to enhance the prevention of chronic respiratory diseases (CRDs) in communities.
- **Access to Exclusive Resources:** Take part in capacity-building activities and receive valuable tools and methodologies to support your work and strengthen your impact.

- **Recognition for Your Contributions:** Be acknowledged as a lung health champion, showcasing your commitment to improving respiratory health.

Governance and Structure

EFA (the European Federation of Allergy and Airways Disease Patients Associations) is the central coordinator who manages communications, meetings and overall CoPs operations.

All the LH4L project partners are involved in the CoPs consultations. The LH4L partners are: [Lungs Europe](#), [EFA](#), Associacao Portuguesa de Medicina Geral e Familiar ([APMGF](#)), Polska Federacja Stowarzyszen Chorych na Astme i Choroby Alergiczne i przewlekłe obturacyjne Chorby Pluc ([POLFED](#)), Consorcio Centro de Investigacion Biomedica en Red ([CIBER](#)), Országos Koranyi Pulmonologiai Intezet ([NKIP](#))

Membership

The CoP will be made of individuals that are key stakeholders in the respiratory health and education fields. Interested and relevant members can join on a rolling basis. The CoPs will have the following composition:

- **Respiratory Patients' Groups Representatives:** National and European patient advocacy organisations focused on respiratory and lung health (e.g., asthma, COPD, lung cancer).
- **Healthcare Professionals (HCPs):** Respiratory specialists, general practitioners, nurses, pharmacists and physiotherapists, and their associations.
- **Educational Specialists:** Curriculum developers, training coordinators, schools principals and teachers, and academic researchers in health education, and their associations.
- **Psychologists:** Experts in child psychology, mental health related to chronic respiratory diseases, and their associations.
- **Behavioural scientists/practitioners:** Experts in behaviour change who can identify larger societal barriers and enablers for uptake of health protective behaviours
- **Public Health Experts:** Policy advisors, managers and researchers from public health institutions and associations.
- **National and EU Health/Education Authorities:** Government agencies involved in health and education policy at the national and EU levels

Meetings

At least two General CoPs online meetings will be held every year. The General Meetings will be the occasion for the CoPs members to share best practices, insights, discussing challenges and provide feedback on the project updates and materials.

Ad Hoc consultations can be required by the LH4L researchers to seek specific feedback and advice from the CoPs members on the material developed within the project.

- **Material Submission: LH4L project materials (e.g., educational tools, publications) are submitted to the CoP for review at least one month before the meeting.**
- **Peer Review:** CoPs members review materials within their area of expertise, providing written feedback and suggestions for improvement.
- **Revision and Approval:** Based on feedback, the LH4L team will revise materials, with final versions reviewed and approved by the CoP.

Timeframe

The CoPs will be set up in December 2024 and will last until the completion of the LH4L project (August 2027)

Deliverable

The COPs will contribute to map and collect prevention and promotion of lung health testing best practices in children and young people across Europe, with the aim of reinforcing the adoption of models and approaches and help reduce the burden of CRDs in Europe. The deliverable shall be submitted on September 2025.

Compensation and Reimbursement

Members of the CoPs are expected to fulfil their duties on a volunteer basis, no compensation is envisaged. In case of travel/expenditure costs for the purpose of fulfilling the duties within the scope of the LH4L CoPs, the LH4L project will cover the expenses.

Non-disclosure of information

Members of the CoPs acknowledge and agree that during their participation, they may have access to sensitive, proprietary, or non-public information, including but not limited to draft policies, strategies, methodologies, and project outcomes ("Confidential Information"). Members of the CoPs agree to treat all such information as confidential and to use solely for the purposes of contributing to the goals and activities of the Community of Practice.



Furthermore, members agree not to disclose, share, or publish any Confidential Information to any third party or the public without prior written consent from the LungHealth4Life project consortium, unless such information has been officially made public. This obligation shall remain in effect both during and after participation in the Community of Practice.

By participating, members affirm their understanding of this confidentiality requirement and their commitment to upholding it.



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