



**World  
Physiotherapy**  
Europe region

**Report -**

**Follow-up Actions on Professional  
Autonomy and Primary Health Care  
surveys**

**Advocacy and EU Matters Working Group (A&EUMWG)**

**NOTED**

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**Pristina, Kosovo**

**REPORT – FOLLOW-UP ACTIONS ON PROFESSIONAL AUTONOMY AND PRIMARY HEALTH CARE  
SURVEYS**

Europe Region  
Advocacy & EU Matters Working Group (A&EUMWG)

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## INTRODUCTION

Over recent years, the Europe Region of World Physiotherapy has systematically collected data from its Member Organisations (MOs) to assess the level of professional autonomy of physiotherapists across Europe. This longitudinal approach has enabled the Region to move beyond isolated observations and develop a robust, comparative understanding of national contexts, trends, and changes over time.

Building on this evidence base, the Advocacy & EU Matters Working Group (A&EUMWG) proposed a shift from data collection to targeted action. The objective was twofold. First, to use the survey data to identify MOs that might benefit most from direct support. Second, to engage these organisations in structured dialogue to better understand national barriers and opportunities, and to define how the Europe Region of World Physiotherapy can effectively support advocacy for enhanced professional autonomy at both European and national levels.

This report outlines the profiling methodology used, the follow-up actions undertaken, the main outcomes of the meetings held with selected MOs, and the implications for future work within the Europe Region of World Physiotherapy.

## 1. PROFILING OF MEMBER ORGANISATIONS

### 1.1 Rationale

The survey data collected in 2021 and 2023 made it possible to identify patterns indicating structural challenges, instability, or unmet potential in professional autonomy. Rather than applying a one-size-fits-all approach, the Working Group agreed to profile MOs based on objective criteria that reflect both current status and recent changes.

### 1.2 Profiling Criteria

Three criteria were defined:

- Low satisfaction with professional autonomy, defined as a score of  $\leq 3$  on a 1–10 scale in the most recent survey.
- Significant change over time, defined as a difference of  $\geq 3$  points between the 2021 and 2023 surveys.
- Physiotherapists not included in the public Primary Health Care (PHC) system, identified as a key structural barrier to autonomy and access.

Based on these criteria, MOs were grouped to enable tailored engagement and support.

## 2. FOLLOW-UP ACTIONS IMPLEMENTED

### 2.1 Direct Engagement with Member Organisations

Following the profiling exercise, the MOs that met one or more of the criteria were contacted. Twenty-one organisations were contacted, nine of which replied, and seven of those were available to participate in an online meeting. These MOs were invited to participate in online meetings with the A&EUMWG. The purpose of these meetings was to:

- Validate and contextualise the survey data.
- Understand national legislative, regulatory, and political barriers.

- Identify advocacy opportunities and critical policy windows.
- Explore how the Europe Region of World Physiotherapy could add value through coordinated European-level support

## 2.2 Meetings Held

Three online meetings were organised between May and June 2025, involving seven MOs:

- 20 May 2025: Iceland, Turkey, Ukraine
- 23 May 2025: Czech Republic, Ireland
- 6 June 2025: Austria, Kosovo

Across all meetings, participation included Working Group members and senior representatives of the respective MOs.

## 3. KEY FINDINGS FROM THE MEETINGS

**Cross cutting themes:** Despite significant national differences, several common themes emerged consistently across all meetings:

- *Need for comparative data and evidence:* All MOs requested robust, comparative data on cost-effectiveness, patient outcomes, and education standards to support discussions with ministries, insurers, and legislators.
- *Legislative and regulatory change as a primary lever:* Progress in professional autonomy was consistently linked to changes in laws, or reimbursement frameworks. Examples from other European countries were viewed as particularly persuasive.
- *Direct access and first-contact roles in PHC:* All participating countries identified direct access to physiotherapy, especially within PHC, as a strategic objective, whether in public services or private practice.
- *Strategic stakeholder engagement:* Successful advocacy efforts were associated with alliances involving medical professionals, insurers, politicians, and patient organisations. Several MOs requested support in building or strengthening these relationships.
- *Value of visible European-level support:* High-level visits, coordinated letters, and explicit the Europe Region of World Physiotherapy endorsement were perceived as potentially influential in national political negotiations.
- *Demand for a shared resource hub:* Repeated requests were made for a centralised repository of evidence, case studies, model legislation, and advocacy tools accessible to all MOs.

## 4. CONCRETE PROPOSALS EMERGING FROM THE MEETINGS

The discussions led to a set of concrete recurring proposals, including:

- Creation of a digital evidence and best-practice repository.
- Development of concise advocacy briefs and case-study playbooks, structured as “problem → action → result → evidence”.
- Production of an EU-level cost-effectiveness brief on physiotherapy as first contact in PHC, drawing on Nordic and UK data.

- Use of Europe Region of World Physiotherapy endorsed support letters and coordinated high-level visits aligned with national legislative timelines.
- Exploration of a mentorship model, pairing MOs with higher levels of autonomy with those seeking reform.

These proposals reflect needs expressed directly by MOs and are grounded in practical advocacy realities.

## 5. IMPLICATIONS FOR THE ADVOCACY AND EU MATTERS WORKING GROUP

### 5.1 Short-term Actions (Current Term)

Based on the meetings, the Working Group has identified the following priorities:

- Create a shared digital repository with key studies, legislative texts, and advocacy tools.
- Draft a template Europe Region of World Physiotherapy support letter or position statement adaptable to national contexts.
- Map upcoming legislative and political opportunities in MOs and plan coordinated actions.
- Create a toolbox addressing case-specific advocacy strategies

### 5.2 Medium-term Considerations (Next Term)

- Formalise a structured mentorship model between MOs.
- Introduce periodic updates and usage tracking for the shared repository to guide future investment in evidence generation.

Furthermore, the A&EUMWG members will explore the possibility of developing an EU-level brief on the cost-effectiveness of physiotherapy in PHC.

## 6. CONCLUSION

The follow-up actions undertaken demonstrate a clear shift from data collection to action-oriented support. By profiling MOs, engaging directly with national leaders, and identifying shared needs and solutions, the Europe Region of World Physiotherapy has laid the foundation for more strategic, evidence-informed advocacy on professional autonomy.

The outcomes of this process confirm both the relevance of the initial survey work and the value of structured, European-level coordination in supporting national reform efforts. The next phase will require sustained collaboration between the (A&EUMWG), the Secretariat, the Executive Committee and MOs to translate these proposals into measurable progress.

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