

# New Prospects for Rural Health Collaboration

**Milan (Italy), Regione Lombardia Building, October 23rd, 2024**

ORGANIZED BY THE INTERNATIONAL ASSOCIATION OF RURAL HEALTH AND MEDICINE (IARM)

Rural areas worldwide continue to face significant disadvantages compared to urban areas, both in developing and transitional countries and the so-called developed world. This situation highlights a strong need for initiatives to promote the development of various actions required to enhance the well-being of rural populations and workers. To address this issue and initiate an internal renewal process, the International Association of Rural Health and Medicine (IARM) organized a one-day hybrid meeting featuring participation from key associations active in rural areas and input from the World Health Organization and the International Labor Office.

The event was a satellite of the Region of Lombardy's celebrations of the European Week for Health and Safety at the Workplace. It was organized with the support of Drs. Nicoletta Cornaggia and Francesca Pregnolato (Region of Lombardy) and Professors Carrer and Bonzini on behalf of the Coordination of the Regional Hospital units of Occupational Medicine.

Professors Petar Bulat (IARM), Claudio Colosio (IARM, ICOH), Hajo Hannich (IARM), Sara de Matteis (ICOH), Istvan Szilard (IARM), Drs. Sashikala Chandrasekar (ICOH) and István Kiss (IARM) attended in person. Drs. John Wynn Jones (WONCA Rural Party), Ferdinando Petrazzuoli (EURIPA), Shengli Niu (ILO), Ngajilo, Dorothy Amaleck (WHO), Satoshi Izawa (IARM), Khuseyn Egamnazarov (IARM), Burat Kurt (IARM), Ashok Vikke Patil (IARM), Hanifa Denny (ICOH), Roman Kolmatov (IARM), and Zhang Min (IARM) participated remotely.

Prof. Petar Bulat opened the meeting by outlining the IARM activities. Prof. Claudio Colosio presented a new scenario for Primary Health Care in rural areas, discussing prospects for collaboration and the role of international organizations. Dr. John Wynn Jones delivered a presentation on the "Blue Print," the EURIPA Lincoln statement, and the European Academic Rural Health Network proposal. Dr. Ferdinando Petrazzuoli discussed recent developments in EURIPA activities and potential collaboration among organizations. Dr. Shengli Niu presented the priorities and objectives for OHS in agriculture from the ILO's perspective. Dr. Dorothy Amaleck Ngajilo addressed WHO's views on the importance of global health coverage in the third millennium and the challenges rural areas face. Prof. Hanifa Denny shared insights from the ICOH Scientific Committee on Rural Health regarding primary occupational health care in rural areas and essential occupational health services.

A deep debate followed addressing rural areas' significant disadvantages regarding access to welfare structures, education, employment, income, and, particularly, healthcare systems. In this context, all the participants emphasized the need for collaboration among various subjects and organizations involved in Rural Health, including social service providers, healthcare professionals at all levels, stakeholders, and policymakers, as well as the potential for improvement. Collaboration also uses new technologies, which allow organizing virtual meetings. In the view of the participants, the key aspect of the increase of coverage in rural areas is represented by a sound collaboration among local communities and their representatives, employers' and employees' organizations, rural GPs, and rural occupational physicians, which is crucial for

creating structures that enhance access for rural citizens and workers within the healthcare system. This is part of a global public health project that, particularly in rural areas, must adopt a “one health” or even “Planetary Health” approach, linking human, animal, and environmental health. This goal can only be achieved by enhancing primary healthcare, which serves as the first point of contact for citizens with the healthcare system.

The primary actors in rural primary health care include rural GPs, rural occupational physicians, and rural nurses, alongside structures promoting increased coverage, such as the currently running “Basic Healthcare Centres (BAHCs)” and “Basic Occupational Health Services (BOHSs)” in certain countries. BAHCs and BOHSs can vary in organization and complexity, ranging from elementary structures with few personnel to more complex, well-structured, and equipped units. BAHCs should also provide dental care. Other professionals, such as rural veterinarians and environmental health specialists, should be involved in the project, with particular attention given to supplying essential pharmaceuticals, including vaccines. Organizations like WONCA Rural Party and EURIPA address primary health care in rural areas, while ICOH handles specific aspects of occupational health. However, there is a lack of an organization focused on the public health challenges, particularly in rural areas, which may become the main task of the renewed IARM. Since its founding on July 12, 1961, IARM has required a profound renovation process. After extensive debate, participants reached the following agreement points: a strong collaboration is necessary among the organizations active in Rural Health. This can be achieved both through the invitation to the decisional bodies of the Organizations and members of the other Organizations as observers. Since its first board meeting after the publication of these minutes, IARM will invite members of different organizations to its board meeting. A second level of coordination will be organizing periodic moments of debate among representatives of the Organizations. IARM representatives will also participate in the Rural Health Annual Forum organized by EURIPA.

Government organizations (WHO and ILO) will continuously be informed about rural health activities.

IARM representatives will participate in the European Academic Rural Health Network founded by EURIPA and propose specific areas of research and training.

Under the proposal of WONCA and EURIPA, IARM will evaluate the possibility of changing its name to ensure clarity regarding its role, which is not linked to care provision.

IARM will periodically organize and propose collaborations with other organizations and conduct specific training and education initiatives through online webinars. It will also invite independent experts to discuss the different problems of rural areas. Themes of particular relevance are zoonoses and heat stress.

**PROFESSORS CLAUDIO COLOSIO  
POST GRADUATE SCHOOL IN OCCUPATIONAL  
HEALTH OF THE UNIVERSITY OF MILANO, ITALY**

**PETAR BULAT  
UNIVERSITY OF BELGRADE, FACULTY OF MEDICINE  
AND SERBIAN INSTITUTE OF OCCUPATIONAL HEALTH**