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# EURIPA – THE PAST, PRESENT AND FUTURE

## EURIPA – przeszłość, teraźniejszość i przyszłość

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**A-** przygotowanie projektu badania (study design), **B-** zbieranie danych (data collection), **C-** analiza statystyczna (statistical analysis), **D-** interpretacja danych (data interpretation), **E-** przygotowanie maszynopisu (manuscript preparation), **F-** opracowanie piśmiennictwa (literature search), **G-** pozyskanie funduszy (funds collection)

### Summary

EURIPA (European Rural and Isolated Practitioners Association) is a regional rural health network, which was founded by family doctors to address the health and well-being needs of rural communities, on one hand, and the practitioners' needs across Europe, on the other. EURIPA began its activity in 1995 with a small group of family doctors from across Europe, and in 1997 the structure was formalised into that of EURIPA today. EURIPA was initially recognized by WONCA Europe as a special interest group and subsequently as a representative network for rural family doctors across Europe. Now, it actively participates in WONCA Europe meetings and their annual conferences. The constitution was revised in 1997 when the International Advisory Board was created to support the work of EURIPA and its Executive Committee. EURIPA has worked hard to raise the profile of rural general practice, from its first research project in 1997, to the series of Annual Rural Health Forums, which started in 2010. These forums have focussed on quality, education and research with the 5th Forum taking place in September 2014 focussing on policy engagement. EURIPA uses social media to engage its membership and publishes regular newsletters - "Grapevine", as well as encourages rural GPs to publish in the European Section of the Journal of Rural and Remote Health.

**Keywords:** rural, general practice, family medicine, Europe

### Streszczenie

EURIPA (Europejskie Stowarzyszenie Lekarzy z Terenów Wiejskich i Izolowanych) jest stowarzyszeniem udzielającym pomocy lekarskiej na terenach wiejskich, które zostało założone przez lekarzy rodzinnych, aby wyjść naprzeciw potrzebom zdrowotnym ludzi mieszkających na tych terenach z jednej strony, i potrzebom lekarzy z całej Europy, z drugiej strony. EURIPA zapoczątkowała swoją działalność w 1995 roku licząc jedynie kilku lekarzy z całej Europy, po to aby w 1997 roku sformalizować swoją strukturę do tej, która istnieje dzisiaj. EURIPA została początkowo uznana przez WONCA Europe (*World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians*) jako grupa tematyczna, a następnie jako stowarzyszenie lekarzy wiejskich w Europie. Dzisiaj, stowarzyszenie aktywnie uczestniczy w spotkaniach i corocznych konferencjach WONCA Europe. W 1997 roku stowarzyszenie ustanowiło swoją konstytucję i powołało Międzynarodową Radę Doradcą, aby wspierać swoją działalność oraz Zarząd. EURIPA pracuje bardzo intensywnie, aby podnieść jakość wiejskiej opieki medycznej, poczynawszy od swojego pierwszego projektu w 1997 roku do coroczne Forum Zdrowia Wiejskiego, które miało swój początek w 2010 roku. Fora te dotyczyły głównie jakości, edukacji i badań w medycynie rodzinnej. Ostatnie z nich, które odbyło się we wrześniu tego roku dotyczyło zaangażowania w politykę działalności stowarzyszenia. EURIPA wykorzystuje media społeczne, aby angażować swoich członków i publikuje biuletyn informacyjny zatytułowany - „Grapevine”. Stowarzyszenie zachęca również wiejskich lekarzy rodzinnych do publikowania swoich artykułów w europejskim dziale czasopisma „Journal of Rural and Remote Health”.

**Słowa kluczowe:** wiejski, opieka podstawowa, medycyna rodzinna, Europa

## Background

EURIPA is the European Rural and Isolated Practitioners Association, a representative network organisation founded by family doctors to address the health and well-being needs of rural communities and the professional needs of those serving them across Europe. It is a unique body, as it is the first regional rural health organisation in the world. It is a regional network of rural family doctors and associated professionals who work across Europe in rural areas to:

- disseminate good practice,
- promote research and development,
- provide education,
- work in partnership,
- be innovative in the application of technology,
- act as a voice for practitioners across rural Europe.

## How and why EURIPA was established?

In 1996 the WONCA World Rural Working Party (WWPRP) met in Shanghai, China. The WWPRP was, at that time, dominated by Australia and North America – countries that were recognized for their rural character. It was clear to the Europeans, attending the conference in Shanghai, that although the scale of rurality was different across Europe, rural family doctors and their patients in Europe faced similar challenges as those in other countries.

This united the interest of different European rural regions and rural health care professionals in a difficult task, as Europe is a continent with many different cultures, incomes and geographical differences. Europe represents 12% of the world's population, speaking 200 different languages, and in 50 different nations, of which only the half share a solid political link (the European Union). These diverse countries have nominal GDP that range from some of the richest in the world to those as far down as 125th. Their climates range from the frozen Arctic Circle to the arid desert surroundings of the Mediterranean. According to the United Nations, the European rural population (200 million) represents 23% of its total population. Some countries are predominantly rural (up to 85% of the population), while others are almost entirely urban [1,2].

At the time when EURIPA was evolving, there was little or no recognition in Europe or in the individual member states that there was a differentiation between urban and rural practice. The challenges for people to access health services in rural and remote areas was also not considered, except a few specific regions.

A small group of rural family doctors from across Europe met in rural Mid Wales (the UK) in autumn of 1995 (Figure 1) to consider how they might raise the profile of rural medicine and address the challenges that were being faced. They formed GRAIPE, the Group of Rural and Isolated Practitioners in Europe.



Figure 1. Meeting in 1995

Following the inaugural meeting, the Group met again in 1996 and, with the support from Health Promotion Wales, submitted a successful bid to the EU BIOMED II research programme [3]: "A collaborative analysis of public health and health service issues in rural areas".

The following year at GRAIPE's meeting in Palma, Majorca in 1997 GRAIPE (Figure 2) was transformed into a more formal structure: EURIPA, the first rural GP network representing the whole continent in the world. Recently established Institute of Rural Health (IRH) in the UK became the Secretariat.



Figure 2. EURIPA in Majorca in 1997

EURIPA's mission statement was agreed: "To ensure that all the rural and isolated populations in Europe have access to high quality health care irrespective of the location, culture or resource".

## Early expectations of EURIPA

In 1997 a formal constitution was signed and a European Charter for Rural Practice was developed. EURIPA worked hard in the early years to raise the profile of rural practice and rural health, to unite rural practitioners and to address particular health needs of their different rural communities.

EURIPA was initially recognized by WONCA Europe as a special interest group and, subsequently, as a representative network for rural family doctors across Europe and a stronger relationship has developed over

the years. EURIPA now actively participates in WONCA Europe meetings as well as the annual conferences. EURIPA also has a high profile internationally and 3 of its Executive Committee members participate in the Executive Committee of the WONCA World Working Party on Rural Practice (WWPRP). Dr John Wynn-Jones, whose early vision led to the establishment of EURIPA in 1997, is currently the President of the International WWPRP.

## How did expectations change?

During more recent years there has been an acknowledgment in Europe that rural areas are different to urban areas, in terms of providing services and how people might access services. This has been welcomed by EURIPA, but the recognition is not consistent across Europe and, in these financially challenged times, rural practitioners feel that rural areas with their lower populations are all too easily overlooked.

EURIPA, like WONCA Europe, has focused its activities on addressing three key themes, namely,

- **Quality** (developing the rural patient's experience in a safe environment),
- **Education** (supporting today's doctors and shaping tomorrow's),
- **Research** (identifying the gaps and building the database),

EURIPA is also currently working on the fourth theme as a consequence of the need to raise the profile of rural practice:

- **Policy** where the focus is on raising the awareness of the rural dimension and developing and applying the concept of rural proofing [4].

EURIPA activities have ranged from scientific activities at rural or Primary Care conferences where it has produced specific Declarations (Emergency Care, the future of Rural Practice in the financial crisis); working groups in Emergency Care, Research, or the most recent one, on Chronic Morbidity; applied for EU or WONCA funded projects; and participated in an Erasmus consortium.

Young doctors are the future of rural practice and EURIPA has worked with the Vasco De Gama Movement (VdGM) to develop the Claudio Carosino prize, which began in 2010. It is a joint VdGM–EURIPA activity for young rural practitioners who would like to practice in rural areas in foreign countries.

A joint EURIPA / EQuIP initiative in European rural practice contributed to part of the Linneaus network.

In May 2012, current President (Jose Lopez-Abuin, from Spain) was elected and EURIPA revised its constitution. This provided the opportunity to establish the International Advisory Board (IAB), which has its representatives from 20 European countries and held its first meeting in January 2013. The aim was to develop more formal links with countries across Europe, through the national association membership of WONCA Europe. Some

international experts are also members of the IAB. This membership of the IAB provides a wide and informed range of advice and input at national, regional, and local levels across Europe to the EURIPA Executive Committee.

## What is the current plan?

EURIPA has worked successfully over the early years to increase the profile of rural health and rural practice across Europe. EURIPA recognises its achievements until today, but also acknowledges that there remains a need for further change. In June 2008, the EURIPA Executive Committee agreed, at its annual meeting in Budapest, to hold a European rural health experts' meeting in 2010.

EURIPA is primarily a network of health professionals and it was felt important that the invitation should extend across professional, academic and political boundaries to include all those who have an interest in the health and well-being of the rural populations of Europe. EURIPA set itself the challenge of developing a strategy for rural health in Europe, by developing the four themes outlined above. It was a timely decision with significant threats to rural healthcare as a result of urbanization, centralization, marginalization and heavy financial cutbacks. The first EURIPA Rural Health Forum was held in Palma, Majorca and the approach was agreed. Three Forums have subsequently been held and the final one in the series is scheduled to be held in September this year. Each Forum had a theme:

2010 Majorca, chaired by Jose Lopez-Abuin  
The Challenge

EURIPA is proud to acknowledge that this was the first time that such a Rural Health meeting had been convened in Europe: rural delegates from 25 European countries came together to explore the challenge

2011 Romania, chaired by Sandra Alexiu  
Quality:

- Improving the patient experience
- Improving the doctor's experience and quality of life
- Working within cultures, traditions and beliefs

2012 Croatia, chaired by Tanja Pekez-Pavlisko  
Education:

- Building an academic base for rural practice
- Developing a workforce fit for purpose
- Improving recruitment and retention in rural areas

2013 Malta, chaired by Jean Karl Soler and Jose Lopez-Abuin  
Research:

- Changing attitudes to research
- Learning and disseminating research

- skills
- Filling the gaps in knowledge
- Informing policy

2014 Latvia, chaired by Gunta Ticmane and Jose Lopez-Abuin

Policy:

- Raising awareness of rural practice
- Engaging with the policy makers and service planners
- Rural Proofing
- Development of a Rural Health Strategy for Europe

Distance and isolation are two important aspects of working in rural areas and for EURIPA social media and other new technologies provide huge opportunity with the improved interconnectivity. EURIPA established its list server many years ago, well before social media evolved, and it is still available to support the membership.

The website [www.euripa.org](http://www.euripa.org) has links to Social Media: <https://www.facebook.com/EURIPA.EURIPA>, <http://es.linkedin.com/groups/EURIPA-4439927>, [https://twitter.com/EURIPA\\_EURIPA](https://twitter.com/EURIPA_EURIPA).

EURIPA engages its membership in current "Hot Topics" through the web site and the list server and encourages contributions to the debate on topical issues affecting rural practice.

On a 3-4 month basis, the EURIPA Secretariat distributes a newsletter, the "Grapevine", to the membership and it is also available on the web site. "Grapevine" provides an update of EURIPA activities but also sources key features relevant to rural practice as well as regular contributions on "My practice" and "An interesting clinical case".

EURIPA also encourages rural GPs to publish in the European Section of the Rural and Remote Health Journal [www.rrh.org.au](http://www.rrh.org.au) This is led by EURIPA and is a free electronic publication covering research, education, practice and policy. It provides an opportunity for rural doctors (and their colleagues) from across Europe to publish and stimulate others to do so – including research reports, educational developments, conferences, letters.

## The future of EURIPA

EURIPA has developed as an effective network representing rural health and, most of all, rural practitioners across Europe, and it has succeeded in raising the profile of rural health and rural practice. This has also resulted in the development of an emerging general practitioner networking and an academic infrastructure for rural health. EURIPA is now recognized as one of the major reference points for rural health in Europe, and has established active links with other international networks, institutions, professional bodies and organizations.

A recent survey [5] conducted with among EURIPA members (n=407, from 33 nations) considered the needs and solutions for European Rural Practice.

Emergency Care was the educational issue most requested. Others issues included the inequalities in the access to health care, different health profiles across Europe, working conditions for GPs and professional expectations. Incidentally, rural practitioners seem happier in Europe than in other world regions, since 68.2% would like to keep living and working in a rural area.

So, it seems that EURIPA has several challenges and in the future will aim at the following areas:

- The development and implementation of a Rural Health Strategy for Europe,
- Extending the scope and influence of EURIPA by continuing to forge links across Europe between,
  - Rural practitioners,
  - Academic departments and academicians,
  - National colleges and associations,
- Sharing good practice,
- Developing rural medical education,
- Participate in research projects and initiatives,
- Encouraging networking, by identifying key individuals and groups who are not yet involved with EURIPA and encourage them to collaborate and also develop links with other rural health organizations,
- To learn from experiences outside Europe,
- Develop and support EURIPA's working groups,
- Improve equity for rural at the four main EURIPA strategic areas: quality, research, education and policy engagement.

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