



# The Grapevine

## Autumn 2021

I would like to formally introduce myself as President of EURIPA after the successful Jubilee 10th EURIPA Rural Health Forum in Siedlce, Poland, this September. Jean-Pierre Jacquet will continue as Immediate Past-President for one year and I have rather large shoes to fill.

Please, let me reassure all of you that I will continue the previous course of EURIPA towards supporting and uniting all the rural practitioners in Europe, strengthening rural teams, accentuating the rural-proofing approach, improving rural research and scientific impact of our Association, developing further international and overseas connections and assisting EURIPA in confirming its' place among other networks at the Council of WONCA Europe.

This will of course require, from all of us, a certain level of dedication and perseverance working as a strong team to fulfil the aspirations of EURIPA's founding fathers. EURIPA will need all the diligent support it can get from all of us, including planning of and participation in annual EURIPA Fora, Grapevine and Grapeseed publications and all other activities which could further improve EURIPA's status as an innovative and energetic WONCA Europe network.

With this I would like to thank you again for your continuing support and trust as well as wise guidance of our more experienced colleagues. We have some work to do on our way to further success.

Forza, EURIPA!

Oleg Kravtchenko, President of EURIPA

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## 10<sup>th</sup> EURIPA Rural Health Forum 2021



September has come and gone and with it our 10<sup>th</sup> EURIPA Rural Health Forum. The 1<sup>st</sup> EURIPA Polska Forum took place at the same time. We had an excellent venue at the Siedlce University of Natural Sciences and Humanities.



Marika Gulek, our Polish colleague, writes:

On 23-25 September 2021, the 10th EURIPA Rural Health Forum and the 1st EURIPA Polska Forum took place in Siedlce, Poland. For the first time it was a hybrid meeting: Face to face and virtually. This concerned not only the participants but also the lecturers. The event was an organisational and technological challenge for both the organizer and the participants and lecturers!

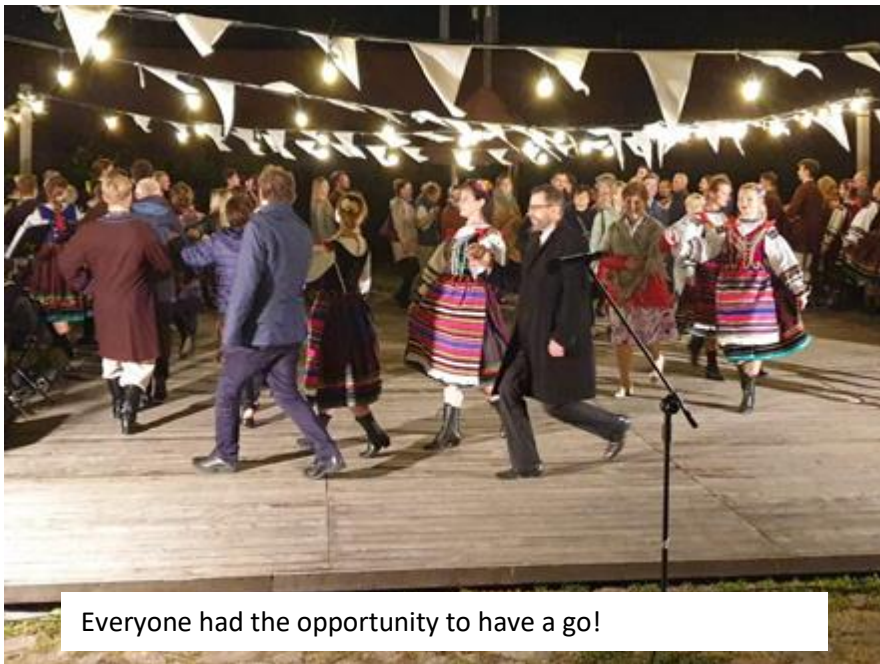
To sum up: the Polish and international part was attended by 160 participants, 40 of whom participated virtually. More than 30 lecturers, including 4 keynote speakers: Professor Joyce Kenkre, Professor Shlomo Vinker, Professor Adam Windak and Professor Przemysław Kardas. The 10th Forum was opened by Dr. Adam Niedzielski, Polish Minister of Health. A total of 50 scientific abstracts were submitted. Their diverse topics resulted in a very interesting Forum program. The spectrum of topics included: from COVID-19, through the mental issues, to organisational improvements. Sessions were full of discussions related to equalisation of access to medical services in rural and isolated areas. The Forum allowed for solid debate with the diagnosis of the situation, proposals of solutions functioning in many countries, and presentation of population-based results supported by data.



Breakout sessions had presenters in the room but they were also remote and the audience was both face to face and remote.

According to the tradition of EURIPA Forum, there were also social events combined with the presentation of the richness of culture from the host country, this time from Poland. Participants during the evenings could taste traditional Polish dishes and drinks in the scenery of historic places and buildings from the 18th and early 19th century. The event was graced by a performance of a local dance group, which presented traditional old Polish dances and costumes.





Everyone had the opportunity to have a go!

I would like to add my thanks to our Polish organisers who worked very hard to make this such a successful Forum. The Scientific support was excellent. And, despite all the stresses imposed by the restrictions on international travel, it was so worth travelling to see everybody again face to face.

We also had the opportunity to visit some rural practices in the area around Siedlce. It is a huge privilege to see how care is provided in other countries.

And, finally, thank you for all your hospitality.



The organisers and keynote speakers at the end of the 10<sup>th</sup> Forum.

The Book of Abstracts has now been published in Year 2021, No. SUPPLEMENT 2, Volume 15 | Medical Science Pulse. You can find it at:

<https://medicalseiencepulse.com/issue/14126/2021-Volume-15-Issue-SUPPLEMENT2>

If you were a registered delegate at the Forum you can also still access the Padlet for the Forum, with the full details and recordings.

Not forgetting the winners of the best Posters and Oral Communications were announced:

Best posters:

1. Patrick Ouvrard (France)  
The General Practitioner and the anthroozoonoses encountered in Europe
2. Rebekah Burman (United Kingdom) –  
Growing our Greenspace- Polytunnels and Plot Project
3. Alexandra Soares (Portugal)  
Proximity Medicine: Portuguese example
4. Sylwia Szafraniec- Buryło (Poland)  
Adjustment of primary care during first phase of COVID-10 pandemic
5. Magdalena Bogdan (Poland)  
The role and importance of pharmaceutical patient questionnaire

Best oral presentation:

Anna Malewska- Woźniak (Poland)  
Dermatology in Family Medicine

**Congratulations to everyone!**

A month later and we are already talking about our next Forum.

## **11<sup>th</sup> EURIPA Rural Health Forum 2022**

**6<sup>th</sup> – 8<sup>th</sup> October 2022, Sicily, Italy**

The theme of the conference will be:

**What have we learnt in rural practice from the pandemic to prepare for the next crisis, climate change events and other emergencies?**

EURIPA will be working in collaboration with two Italian societies: SNAMI and 4S.

The final venue for the Forum is still to be confirmed but is likely to be near Catania in Eastern Sicily (there is an airport, low cost companies) where there is also a large choice of hotels and other types of accommodation.



Sicily's most famous landmark.....

The scientific programme will include rural visits to local GPs (Friday morning) and workshops, oral communications and posters, on the conference theme and free standing.

Abstracts will again be published in an Abstract Book in Medical Science Pulse which is listed in Copernicus Index and Google Scholar

We are planning, and hoping, for a face-to-face Forum so please

**Save the Date**

and come and join us in Sicily!

## My Practice

Nataša Mrduljaš-Đujić from Croatia introduces herself below and writes about her practice in its beautiful island setting.



Hello to all readers!

As a long-term or lifelong rural doctor, I am sending you a postcard from my beautiful **island of Brač**, an important tourist center. Not only is it interesting for its geographical beauty, but it has an interesting and rich history, from prehistory onwards, Illyrians, Romans, Christians, etc. In addition to such curiosities, before we focus on health, it is worth mentioning some basic features of the population.

From ancient times it is a rural area where the established activity was olive growing and viticulture, stonemasonry and fishing. On Brač, in Postira, there is still an active fish factory, in Pučišća, Selca and Donji Humac quarries from which the famous Brač stone is extracted from which numerous buildings were built, starting from Diocletian's Palace to the courts in Vienna and Budapest, as well as churches in Venice.

In recent times, tourism as a branch of economy is the most important part of every single place on the island of Brač. Among all, **Bol** stands out with its word famous **beach Zlatni rat**.

There are about 15,000 inhabitants on Brač, more than ten smaller places and the town of Supetar, which is also the administrative center. The island is very well connected, via Supetar by ferry line with Split, the center of Dalmatia and the Adriatic with its rich history and Diocletian's Palace from Roman times as the most important cultural monument among many others. Brač can therefore be considered a suburb of Split, a city of about 150-180,000 inhabitants.



Diocletian's Palace, Split

I'd like to introduce myself. My name is Nataša Mrduljaš-Đujić. Originally, I'm coming from Split, but I live in Supetar, on the island of Brač, Croatia. As a GP, I have been working for 34 years on the island of Brač which is one of the 1244 islands as beautiful as the whole Adriatic coast. As the matter of fact, rural medicine is my destiny. Last 14 years I am a specialist of family medicine (FM) and also assistant professor in Department of FM, Medical School University of Split.

Croatia is well known for its primary care, which includes large rural areas, according to the principles of Andrija Štampar (1888.-1958.), a well-known medical professional, active member of the WHO. Andrija Štampar was a leading Croatian authority in the field of epidemiology and a pioneer of preventive medicine. As a respected scientist and university professor, he spent three years (1933-1936) in China as a representative of the League of Nations and helped improve the Chinese health care system. He is one of the founders of the World Health Organization (WHO) and has promoted public health in Afghanistan, Egypt, Sudan and Ethiopia. He wrote the introductory declaration of the Statute of the World Health Organization, of which he was the first president. In 1948, Andrija Štampar was the chairman of the first WHO General Assembly in Geneva.

Andrija Štampar:

Health is basic human right. → It is doctor's duty to work to achieve that right.

People are entitled to health. → Government's duty is to work on the exercise of

Man is obliged to preserve his health. → The doctor is obliged to teach people how to preserve health

Definition of health by Andrija Štampar:

HEALTH IS NOT ONLY THE ABSENCE OF INFIRMITY AND DISEASE BUT ALSO STATE OF PHYSICAL AND MENTAL WELL-BEING AND FITNESS RESULTING FROM POSITIVE FACTORS SUCH AS ADEQVATE FEEDING, HOUSING AND TRAINING.



The basic principles of Štampar's ideology were general-human:

Equality of all people because they all have the same basic life need for health and an equally inalienable right to a healthy life, in peace without national, religious or any other discrimination.

The participation of all social factors and peoples is essential for improvement public health; it is the task of all and not just doctors.

The people need to be enlightened that get to know their health needs and participate in addressing them.

Speaking of health care on the island of Brač, it should be said that the sea passage and separation from the mainland still significantly reduces the availability of secondary and tertiary care to the island's population. A fast boat and an emergency helicopter are available with frequent ferry lines. Some places are also connected by a daily catamaran line. These connections mean life and that is why I mention them at the very beginning of the story. Daily migrations of residents exist in both directions, primarily due to work, and then due to other urban facilities that the island itself lacks. A comfortable ferry ride takes about 50 minutes. It can be said that the connections with the mainland are satisfactory, especially for the inhabitants of the town of Supetar and the surrounding places.

All places are covered by health care through a network of primary health care clinics. In addition to family doctors, of which there are 14 on the island, the health centre, former health centre Brac, now the Health Centre of Split-Dalmatia County has several other specialists: primary paediatrician, primary gynaecologist, radiologist, occupational medicine specialist, epidemiologist and also medical laboratory. There is also an ambulance unit with a centre in Supetar, and with organized team 2 (team without a doctor) in the centre of the island. Until recently, all these services worked smoothly. In the past few months, there have been problems with the health staff because the existing ones have met the conditions for retirement (gynaecologist, paediatrician, occupational medicine specialist). There are simply no young doctors, and most of the older ones are retiring these years (radiologist, some family doctors ..) so it is realistic to expect problems with the medical staff. Brač is one of the closest, most populated and most connected Adriatic islands, and even here there is no interest in coming to work for a longer time. More remote places have organized health care in two shifts, although they have a smaller population. The reason is the distance from the centre and from the hospital and thus the availability of primary care is better. A special problem is the organization of health services during the tourist season (from May until October), when the workload is much higher than in other parts of the year. Also, in the city of Supetar, during tourist season is formed special medical office for tourists.

During Covid 19 time, in the May 2020, island of Brač was in quarantine for two weeks when a significant number of inhabitants became infected with the corona virus. Therefore, we were interested in investigating the psychological reactions of the island population. The residents of the island of Brač showed significantly higher levels of depressive and stress symptoms during quarantine, they experienced significantly more concerns about the potential duration of isolation from other people and were more afraid of being unable to move freely outside their homes compared to the inhabitants of other islands.

### A few notes about Postira

Located on the northern side of the island of Brač where you can still feel the attachment to the traditional Dalmatian way of life, merge with the local people. Postira was founded in the 16th century, and the first inhabitants were Doljani and Poljičani who emigrated from their places. Numerous stone houses in **the port** testify to the former landowners of Brač; among them, the castle of the Lazanić family stands out, in which the Croatian poet Vladimir Nazor (1876-1949) was born. The parish church built in the middle of the 16th century is named after St. John the Baptist, while at the foot of it were found the remains of an early Christian Basilica from the 6th century. Other archeological sites also testify to the long history of Postira: Mirje on the hill Mali brig where the early Christian monastery complex was found and **Lovrečina**, also one of the most beautiful sandy bays, where the early Christian church from 5/6. century.



Postira is the village of 1300 inhabitants who are engaged in agriculture, fishing, tourism, stonemasonry, so in every period you will be able to see "firsthand" the tradition that lives. There are many events, especially in the summer months, but the unique in the world is the World Olive Picking Championship. It has been held since 2017, hosts national teams from all parts of the world and as a confirmation of world quality in 2019, it won the award for the best creative experience in tourism in the world.

### Ethno eco village Dol

The small town of Dol, which today has about a hundred inhabitants, is located two kilometers south of Postira. Dol was first mentioned in documents in 1345, but numerous important archaeological monuments testify to its even earlier existence. This oasis of peace and quiet is an unavoidable stop for many tourists, including lovers of hiking and biking, because Dol can be reached by well-maintained paths and trails from various directions. Dol is also known for its crunchy cake **Hrapočušā**. The extremely sweet cake with its rough surface resembles a rough stone, so it was named after him. Rich in eggs, sugar and walnuts with citrus aroma, it was created by combining products typical of this village.



## Office of family medicine in Postira: specificities



Isolated from the big centre, public transport twice a day to the 10 km distant Supetar, ferry harbour and capital city of the island Brač. Although working in a small community has its advantages like more peaceful work and better control over the workload, it's not always easy to work there. Like in other small communities, population in Postira consists of rather big families, mostly blood related, all together like one big family. It is difficult to maintain privacy. Information is spreading very fast among people, common attitude is made of rumours. The communication is often very particular, full of unconscious and nonverbal details. Doctor is closely connected with the life in the village, and it seems that she all ways deals with a group of people instead of one patient at the time.

### Teaching practice

Every year 6th year medical school students from Department of Family medicine, Medical School, University of Split are accommodated in Postira for 10 days in private accommodation (expenses paid by faculty) and have their clinical practice on the island. The Medical school in Split has also its rural orientation, although until now, it doesn't have the special rural program in its curriculum. From the very beginning, practice on the islands has been very important in the education of medical students, Our students in very close contact with the mentor are able to learn the actual practice in rural conditions and compare it with that in the city of Split. In such practice and direct contact with the patient and the mentor, students are able to learn practical skills, and communication skills in high quality way because the doctor is still able to dedicate his time in educating young doctors. Also, they have opportunity to feel the life of the rural environment itself, with it's specificities in that particular place, talk to people, experience their tradition and customs, prejudices, problems, social and natural environment, happenings or social/cultural events.

Due to specific conditions they can see and learn more than in ordinary (city) practice. They use several educational methods: observation, active participation, skills acquisition, work under the supervision, and reflective work. They can learn about preventive (vaccination, health promotion, district nurse activities), and curative activities (ambulatory practice-theoretical knowledge, art of consultation, holistic and patient centered approach), and also communication skills in consultation: patient centered method, home visits and house therapy, palliative care, characteristics of health care in homes for elderly people, emergencies, administration and legislation.

Students' experiences are excellent and they are generally very satisfied with the opportunity to work and learn in practice. This is evidenced by highly rated student surveys. That fact should be more exploited in order to develop genuine positive feelings towards family medicine. Yet, despite such practice, we still fail to interest students enough to stay and commit to rural practice. Several preconditions for a better outcome should be achieved: better working conditions in terms of equipment and salary, and the earliest possible education in medical school in terms of learning practical skills for rural practice. It does not seem that due attention was paid to this during the studies, so this opens the space for further changes in the direction of gradual change of the curriculum and orientation towards the island - rural orientation. A very important item is also tourism medicine. Local community should help and support these changes. Better conditions would lead to greater interest in staying on the island.

In addition to working conditions, the quality of life on the islands could help to retain the rest of the medical staff, primarily doctors, which is incomparable in relation to the city. However, contact with nature and the sea helps those who are there to better cope with isolation and everyday difficulties in work, as well as poor connections and contacts with the hospital (secondary tertiary care) and other parts of the health system. The still preserved nature offers a lot of leisure activities, from sports activities, walking, swimming in the summer months, to mushroom picking, agricultural activities, etc. Recently, social gatherings in sports activities (Pilates, yoga, football, dance courses and Fig.). In my clinic, in addition to my regular job, a club of treated alcoholics was established a year ago, and a group for psychological help based on the principles of psychoanalytic therapy, which I lead as a therapist. There is a lack of connection between colleagues, joint meetings because everyone seems to be focused on themselves and their problems. It would be interesting to hear if other colleagues from rural areas have this kind of experience and if the reason is physical distance or something else.

#### IN CONCLUSION:

Leading directions:

education and research:

- in medical schools (undergraduate),
- after graduation (postgraduate),

Attraction – recruitment package:

- health policy towards rural areas including medical staff (doctors) and patients environmental conditions (living conditions, traffic connections, etc.),
- payment (salaries), working hours vs spare time and other benefits in order to attract professionals to come to work and live in rural and remote areas,
- contracted obligation for work in rural area, and after that advantage for election of specialization or another job in urban or any other area,

Connection with local community and political forces, in the name of:

- development of strong connections between medical care and local community because of mutual cooperation leading to higher quality of health and living conditions.

At the end, as a delegate of KOHOM (Coordination of Croatian family doctors) in council of Rural WONCA, and member of IAB, many thanks for support and encouragement.

Hoping that this review was at least a little interesting to you, thanks for the patience!

Cordial greetings,  
Nataša

## EURIPA Annual General Meeting 2021

We held our 2021 Annual General Meeting during the Forum in Poland. Like the Forum it was a hybrid meeting with the President, officers and other members in Poland and also many members joining us remotely over zoom.



We elected a new Executive Committee and I need to take this opportunity:

- to thank our Committee members who have retired since our last Annual General Meeting: Berit Hansen, Jose Simoes, Josep Vidal-Alaball and
- to welcome our two new Committee members Ozden Gokdemir and Veronika Rasic

We confirmed Oleg Kravtchenko, our President-elect, as the new President and Jean Pierre Jacquet as the Immediate Past president. The new Executive Committee comprises:

<b>Oleg Kravtchenko</b>	President
<b>Jean Pierre Jacquet</b>	Immediate Past President
<b>Louise Wilson</b>	Honorary Treasurer
<b>Cristina Barbu</b>	Romania
<b>Ozden Gokdemir</b>	Turkey
<b>David Halata</b>	Czech Republic
<b>Liga Kozlovska</b>	Latvia
<b>Donata Kurpas</b>	Poland, Chair EURIPA International Advisory Board
<b>Ferdinando Petrazzuoli</b>	Italy and link with EGPRN, Chair EURIPA Scientific Board
<b>Patrick Ouvrard</b>	France
<b>Veronika Rasic</b>	Liaison Officer VdGM
<b>Jo Robins</b>	England
<b>John Wynn-Jones</b>	UK and representing the WONCA Working Party on Rural Practice

A revised Constitution for EURIPA was also adopted to better ensure sustainability and continuity and to make clearer and consistent other aspects of the way EURIPA works.

The new Constitution is on the EURIPA web site:

<https://euripa.woncaeurope.org/content/constitution-0>

This is also my opportunity to thank Jean Pierre Jacquet, whom I have worked with as President of EURIPA for 5 years. I asked him for his reflections on this period.



I have been one year as an Interim President and 4 years as President of EURIPA. As I become Immediate Past President I have reflected on my presidency and asked: what have we done during this period?

1/To constitute EURIPA as a body, with a legal entity and status.

We chose to register in France as "Association Loi 1901". This was required in order to receive grants and donations. This will allow EURIPA to respond to research calls, to attend official meetings as an independent organisation.

This change also allowed us to have paying members.

2/ we strengthened our links with other WONCA Europe networks, and WONCA Europe itself.

3/ We changed the constitution to improve continuity, transparency and democracy. The next President-elect will be elected by all the EURIPA members.

4/ We created a Scientific Board to advise and develop research projects.

This has been possible only with the huge work and friendship of the team.

These changes allow EURIPA to forecast an optimistic future if we pursue our efforts. But there are still challenges to face in the coming years:

- to become full member of WONCA Europe Executive Board
- to produce scientific data, and publish studies, to help us, and all rural GPs to give the best care to our patients
- to create a network of national rural health networks in all European countries
- to growth our Rural Health Forums
- to face climate change with concrete measures, in our day-to-day practices

It will be hard work but also rewarding and stimulating with the EURIPA team.

To be honest I'm a bit proud, we have done many things, and it is important to look forward, not to the past. I hope it will be pursued.



## **Rural WONCA 2022**

### **"Improving Health, Empowering Communities"**

The Irish College of General Practitioners, the University of Limerick School of Medicine and the Island and Dispensing Doctors of Ireland are hosting this important conference next year from 17<sup>th</sup> – 20<sup>th</sup> June 2022, at the University of Limerick. .

The web site, at [www.woncarhc2022.com](http://www.woncarhc2022.com), states:

“Our theme will explore how communities can be, and are, empowered to improve their own health and the health of those around them. We will hear from experts and presenters from all over the world in various sectors, including Health, Science, Engineering, the Arts, and NGO's of all shapes and sizes. Community Empowerment for Health goes beyond the traditional methods of information sharing and consultation. It involves a change in power relations, and enables people to have more control and responsibility for their own health and well-being. Various sectors can reach out to communities to create empowerment opportunities to become more informed and more influential by giving them confidence, skills, resources and power to shape and influence their health. This action-oriented conference is intended to foster a high level of meaningful dialogue and cooperation amongst stakeholders, all committed to rural health improvement.

Limerick is based in the Shannon Region, on Ireland's breath-taking West Coast. The City offers delegates the opportunity to see local attractions such as museums, cathedrals, castles and much more. This Region is the gateway to the Wild Atlantic Way, which offers visitors a chance to see the longest defined coastal driving route in the world, and to take in the breath-taking beauty of the Irish landscape.

The University of Limerick is situated on 130 hectares of beautiful parkland, with the River Shannon as its unifying focal point. Located 4kms outside Limerick City, the University is renowned for its superb facilities, including Fáilte Ireland approved on site accommodation, well equipped lecture theatres, high quality catering, sports facilities including a 50m pool, and attractive riverside walks.

CÉAD MÍLE FÁILTE (a hundred thousand welcomes) to WONCA '22. Ireland is renowned for its warm and friendly welcome, and we are looking forward to seeing each and every one of you at WONCA '22.”

EURIPA will be submitting abstracts and we are hoping, like everyone else, it will be a face-to-face conference.

The **Call for Abstracts is open, closing on December 3<sup>rd</sup> 2021**, and registration will open in November.

**Rural Seeds** is an international network made up of students and young doctors.

The aim of Rural Seeds is to be a worldwide network that raises awareness and improves the guidance in training for rural practice for people in the early stages of their career development. It uses the mentorship and knowledge available from WONCA's Working Party on Rural Practice (WWPRP) and also liaises with WONCA's Young Doctor's Movement. One of its main aims is to contribute to the UN17 Sustainable Development Goals, especially goal number 10: "Reduce inequality within and among countries" since inequality in access to health services still persists around the world, particularly in rural areas.

You can find out more at <https://www.ruralseeds.net/>

### **Rural Seeds - Looking Ahead to 2022**

In 2021 we elected twelve new Rural Seeds Ambassadors and Deputy Ambassadors from five global regions: <https://www.ruralseeds.net/ambassadors>

Our hope is that they will provide a much needed regional and global perspective from students and young healthcare workers in rural areas. By expanding our Ambassador group we also hope to strengthen local projects and initiatives and encourage more young healthcare professionals to engage with Rural Seeds and in rural practice.

We are excited to see what this new group of young people might bring to the rural practice arena over the next few years.

During the past 18 months Rural Seeds has continued to be active. We have held a number of Rural Family Medicine Cafes in collaboration with conference organisers in different locations around the globe. You can watch the rural cafe from the South African Rural Health Conference here: "Why Rural?" <https://youtu.be/1-WLbKnWPlo>

The Rural Video team has produced a wonderful video in collaboration with WHO to draw attention to rural communities and a need for better access to primary care. <https://www.youtube.com/watch?v=W3jSiFJpcm0>

For a summary of the other projects and publications that have been completed in 2020/2021, please keep a look out for the Rural Seeds Annual Report which should be published in December.

In 2022 we look forward to collaborating with our colleagues from around the world at the Rural WONCA conference in Limerick, Ireland. This event is an exciting opportunity to further shine a light on the rural health situation in Europe and work with our friends from around the world on improving primary care access for rural communities. It will also provide an opportunity to meet with students and young healthcare professionals who have an interest in rural health.

Rural Seeds is still looking for a Rural Seeds Ambassador from Europe. As part of my role as EURIPA-VDGM liaison I will be looking to support students and young healthcare professionals that may be interested in taking on this opportunity. Please feel free to contact me via email on [ver.rasic@gmail.com](mailto:ver.rasic@gmail.com) or on Twitter @docvei.

Dr Veronika Rasic  
EURIPA-VDGM Liaison



## Publications

### Our Journal

If you are involved in research or training initiatives in rural health we would welcome a contribution to the **International Electronic Journal of Rural and Remote Health Research Education Practice and Policy**. You can find it at: <https://www.rrh.org.au/>

The Journal contains a European section and we would like to encourage EURIPA members to contribute to the Journal. Original research is always welcomed but there is also the opportunity to send in letters, project reports or personal perspectives. There is support available to help you get published – new authors are actively encouraged!

### Journal of Rural and Remote Health

#### **Physicians' experiences working in emergency medicine in a rural area in Northern Sweden: a qualitative study**

Setrinen Hansen N, Mikkelsen S, Bruun H, From E, Milling L.

Working in emergency medicine in rural areas may entail challenges due to the absence of medical backup, difficulties in logistics, lack of healthcare system coordination and, potentially, feelings of loneliness. This study elucidates the experiences of physicians working in an emergency medical setting in a rural area in northern Sweden.

<https://www.rrh.org.au/journal/article/6672>

#### **Patient satisfaction with general practice in urban and rural areas of Scotland**

Iqbal I, Thompson L, Wilson P.

Scotland's National Health Service (NHS) provides health care that is free at the point of use and almost all Scottish citizens are registered with an NHS general practice. Patients attending rural and remote practices are likely to be served by a smaller clinical team that provides a greater range of clinical services than urban practices, which are more likely to be located close to hospitals. This study examines the differences between satisfaction levels expressed by NHS patients attending a general practice in urban and rural areas in Scotland.

<https://www.rrh.org.au/journal/article/6634>

#### **Distance learning in the COVID-19 pandemic: acceptance and attitudes of physical therapy and rehabilitation students in Turkey**

Şavkın R, Bayrak G, Büker N.

To reduce the spread rate of COVID-19, distance education was initiated in all universities in Turkey in March, 2020. However, distance learning had never before been implemented in physical therapy and rehabilitation education. This study reports on the attitudes of Pamukkale University Physical Therapy and Rehabilitation undergraduate students towards distance learning during the COVID-19 outbreak.

<https://www.rrh.org.au/journal/article/6366>

#### **WONCA World Annual Report 2020 – 21**

In this document, you will find an overview of WONCA's global activities and our main achievements from July 2020 to June 2021.

<https://www.globalfamilydoctor.com/News/WONCAAnnualReport2020-2021.aspx>

## **Lancet Regional Health - Europe**

### **Rebuilding resilient health systems for Europe**

The Lancet Regional Health – Europe has published a Series of eleven papers by experts from different areas of public health, global health, ethics, economic policies, laws, and regulatory bodies. The Series takes a multi-layered approach to lay out the fundamental pillars around which health systems in Europe are formed, changes that were made during the pandemic, and the new foundations that must be built in order to make European health systems more resilient.

[https://www.thelancet.com/series/Rebuilding-Resilient-Health-Systems-for-Europe?dgcid=on24\\_console\\_lancetwebinars21](https://www.thelancet.com/series/Rebuilding-Resilient-Health-Systems-for-Europe?dgcid=on24_console_lancetwebinars21)

### **The Lancet: Public Health: Tracking progress on health and climate change in Europe**

Left unabated, climate change will have catastrophic effects on the health of present and future generations. Such effects are already seen in Europe, through more frequent and severe extreme weather events, alterations to water and food systems, and changes in the environmental suitability for infectious diseases. As one of the largest current and historical contributors to greenhouse gases and the largest provider of financing for climate change mitigation and adaptation, Europe's response is crucial, for both human health and the planet. To ensure that health and wellbeing are protected in this response it is essential to build the capacity to understand, monitor, and quantify health impacts of climate change and the health co-benefits of accelerated action. Responding to this need, the Lancet Countdown in Europe is established as a transdisciplinary research collaboration for monitoring progress on health and climate change in Europe. With the wealth of data and academic expertise available in Europe, the collaboration will develop region-specific indicators to address the main challenges and opportunities of Europe's response to climate change for health. The indicators produced by the collaboration will provide information to health and climate policy decision making, and will also contribute to the European Observatory on Climate and Health.

[https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667\(21\)00207-3/fulltext?dgcid=raven\\_jbs\\_etoc\\_email](https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(21)00207-3/fulltext?dgcid=raven_jbs_etoc_email)

## **European Journal of General Practice**

### **Emotional distress, occupational stress and burnout among Family Doctors in Europe: Monitoring and testing of interventions is required**

Andree Rochfort, Claire Collins, Jako Burgers

In recent years, the medical literature from a wide range of medical specialities has exploded with publications on the theme of emotional distress, stress and burnout in the practice of medicine. Improving the work-life of health care providers is necessary to optimise health system performance. COVID-19 has caused considerable additional pressure on health services across Europe and there have been calls for interventions to address the psychological and occupational stress caused by the pandemic. Although there is an ongoing need to monitor these factors among family physicians, and other staff working in primary care across Europe, we must also identify supports and promote them. Further research is needed to explore causative factors and provide convincing evidence in relation to effective interventions.

<https://www.tandfonline.com/doi/abs/10.1080/13814788.2021.1985998>

## **Family Medicine and Primary Care Review**

### **Original efficiency indices in PHC patient care**

Magdalena Bogdan, Artur Prusaczyk, Paweł Żuk, Marika Guzek, Aneta Nitsch-Osuch, Joanna Oberska

<https://www.termedia.pl/Original-efficiency-indices-in-PHC-patient-care,95,44857,0,1.html>

## Forthcoming Events

Below is a list of events for 2021-22 that may be of interest to EURIPA members. Please send in your national events for future editions of *Grapevine* so that we can make this section more comprehensive. Please send to the editor at [jane@montgomery-powys.co.uk](mailto:jane@montgomery-powys.co.uk)

### **WONCA World Conference 2021 – Together, we own the Future**

25th to 28th November 2021, Abu Dhabi, UAE – now **virtual**

More information at: <http://wonca2021.com>

Coming up in 2022:

### **Edinburgh 2022 7<sup>th</sup> VdGM Forum: Perspectives on primary care**

28 – 29<sup>th</sup> January 2022, Edinburgh, Scotland

Web site: <https://www.vdgmedinburgh.com/>

### **CMGF 2022 15<sup>th</sup> conference of general practice in France**

24 – 26<sup>th</sup> March 2022, Paris, France

**Call for abstracts open until December 2021**

English sessions allow you to submit your proposals for oral communications, posters, or workshops on research, research in progress, qualitative or quantitative studies, a case report or personal experience, literature review, or focused on humanities and social anthropology.

Web site: <https://www.congresmg.fr/>

Rethinking Remote Conference 2022 - Innovative solutions for remote and rural health and wellbeing

28 – 29<sup>th</sup> April 2022, Aviemore, Scotland

<https://echalliance.com/event/rethinking-remote-2022/>

### **94<sup>th</sup> EGPRN meeting: Optimising the organisation of family medicine practice**

12 – 15<sup>th</sup> May 2022, Istanbul, Turkey

Web site: <https://meeting.egprn.org/>

### **The WONCA World Rural Health conference "Improving Health, Empowering Communities"**

17th – 20th June 2022, University of Limerick, Ireland

**The Call for Abstracts is open and closing on December 3<sup>rd</sup> 2021**

More information at: [www.woncarhc2022.com](http://www.woncarhc2022.com)

### **VdGM Pre conference 2022**

27 – 28<sup>th</sup> June 2022, London

And

### **27<sup>th</sup> WONCA Europe conference: Innovating family medicine together for a sustainable future**

28th June – 1st July 2022, London

More information at: <http://woncaeurope2022.org>

### **11<sup>th</sup> EURIPA Rural Health Forum**

6<sup>th</sup> – 8<sup>th</sup> October 2022, Sicily, Italy

More information will be available soon.

## Future Contributions to *Grapevine*

The next issue of the *Grapevine* will be winter 2021-22; contributions are welcome by the end of December 2021 for publication in early January 2022. Reminders for contributions will be circulated on the mailing list and announced at the web site.

If you are interested in contributing to the next edition of *Grapevine* please get in touch with the Executive Secretary, Jane Randall-Smith at [Jane@montgomery-powys.co.uk](mailto:Jane@montgomery-powys.co.uk) . Please think about what you do in your practice and if you would like to contribute to the clinical case section, or send us a piece about your practice, tell us about research you are doing or have published, an event that is being held in your country ..... please do get in touch.

*Grapevine* is YOUR Newsletter and new contributors are always welcome.



### Disclaimer:

The views contained in the featured papers above are those of the authors and not those of EURIPA.