

## EDITORIAL

# Establishing academic rural practice: a future and challenging target

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C Lionis<sup>1</sup>, J Wynn-Jones<sup>2</sup>

<sup>1</sup>European Regional Editor, *Rural and Remote Health*

<sup>2</sup>President, EURIPA

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Lionis C, Wynn-Jones J

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There is growing interest in rural health issues worldwide, as reflected in the work of the WONCA Working Party on Rural Practice<sup>1</sup>, the European Rural and Isolated Practitioners Association (EURIPA, <http://www.euripa.org>) and other institutes, networks and groups. Despite reported achievements, many issues and challenges remain for the rural practitioner and rural practice.

One of the most important issues is the viability of rural practice in Europe in the context of economic and political changes taking place across the continent as part of European Union integration. This is especially relevant for the recent Central and Eastern European succession countries that have large agricultural rural populations. Support and evidence for viable practice can be found throughout the international literature.

A recently published editorial in the *Medical Journal of Australia* discussed two reports that focus on the viability of general practice in rural Australia, and provided clear guidelines for health planners, consumers and medical stakeholder groups<sup>2</sup>. Although many factors, such as workload, remuneration, continuing professional development, out of hours cover etc, may impact on the rural practitioner's happiness and satisfaction, this editorial will concentrate on the importance of establishing academic careers within rural practice. It will argue the importance of developing academic careers within rural practice, and emphasize the impact this can have on quality of care.

Contrary to North American and Australian experience, rural practice in Europe has not attracted academic posts until recently. The impact of this on rural practice in the frontier



countries has been significant, with the establishment of academic chairs, rural health journals, rural clinic schools and, finally, rural medical schools. The Kamien Report<sup>3</sup> highlighted the plight of rural doctors and the precarious state of rural practice in Australia. As a result, the rural movement in Australia has blossomed, due to significant government and academic investment, and rural health and rural practice have become first choice careers for young graduates. Europe needs rural health academicians to gather data, conduct research and develop new models of learning for students and health professionals. A recent publication in *Rural and Remote Health* by Richard Hays<sup>4</sup> concludes that:

*...there is a clear case for the development of academic rural medicine within Europe to act as a vehicle in the international evidence debates about definitions and roles, and for gathering the educational research necessary evidence to support initiatives that can make a difference to health care.*

There is some evidence from rural Crete that supports the fit of new models within the southern European setting and establishes that, in parallel, medical students are capable of conducting and publishing small area-based observational research<sup>5,6</sup>.

Rural exposure from an attachment in medical school and through residency training programs may have a significant impact on recruitment and retention of rural physicians. Exposure to a rural curriculum has been shown to produce attitude changes in students, while rural primary care clerkships positively influence students' perceptions of rural primary care<sup>7</sup>. The WONCA Rural Working Party recommends that all medical students should have an opportunity for rural exposure, and that medical schools should ensure that support and encouragement is given to students prior to embarking on a career in rural practice. Across Europe there is great variation in the number of students considering a career in family medicine/general practice. Such an important endeavor and investment in academic rural practice requires sufficient infrastructure and capacity. Despite growing recognition of the discipline of

general practice/family medicine in Europe, there is still significant variation in the number of academic family physicians, and in their capacity for research<sup>8</sup>. Barriers for developing research within this discipline have been reported<sup>9</sup>. Such barriers and variations are even more significant for European rural practice.

Although there are some positive signs and experiences across Europe, the subject of academic rural practice is still challenging and deserves a place on the future agenda of academicians and the discipline's leaders. It is obvious that the current criteria for tenure and promotion find rural practitioners in a non-privileged position. They have fewer chances to secure research funds and publish in biomedical journals; therefore, they need more time for academic advancement.. The creation of a clearing house 'to provide a central repository of knowledge about family medicine research expertise, training and mentoring', as Chris Van Weel and Walter Rosser stated in a WONCA World consensus paper, seems to be tailored to the European rural case<sup>10</sup>. In addition, funding and promotion of international collaborative research in rural family medicine seems to be a key issue for European rural research capacity. This implies some large tasks for European organizations, such as WONCA Europe and EURIPA. Rural proofing for health as methodology, developed by the Institute of Rural Health to help primary care organizations, has been recognized as an important approach to rural health policy development<sup>11</sup>. Promoting international research collaboration and working with and within networks is another challenge for European rural health. Therefore, we should explore opportunities to implement research projects in collaboration with the European General Practice Research Network (EGPRN, <http://www.egprn.org>) and the International Federation of Primary Care Research Networks (IFPCRN, <http://www.ifpcrn.org>). The Seventh Research Framework Program of the European Union (FP7, <http://cordis.europa.eu/fp7/dc/index.cfm>) presents a golden opportunity.

Academic rural practice is expected to play a central role in supporting the discipline of rural health, and rural



practitioners who are seeking an academic career. The first chairs of rural general practice must collaborate with other academic disciplines and networks. The European section of the international journal *Rural and Remote Health*, serving the above-mentioned purposes, is a major partner in advancing towards this important goal.

**Christos Lionis**  
**European Regional Editor**  
**Rural and Remote Health**

**John Wynn-Jones**  
**President**  
**EURIPA**

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