The Tirana Declaration on Rural Health

Adopted by the 3rd International Congress on Rural Health in Mediterranean and Balkan Countries
Tirana, Albania, 22 – 25 September 2010

Whereas
more than half of the world’s population live and work in villages and bear a disproportionate burden of poverty, diseases, public health and occupational and environmental health risks, and poor access to social protection including social security,
many solutions for achieving the Millennium Development Goals related to public health and environment lie in the rural settings,
people in villages have limited or no access to primary health care, basic occupational, environmental, and public health services, as well as to safe water and sanitation,
villages with their specific cultural and social capital provide ample opportunities as settings for delivery of essential health interventions for protecting and promoting human health,
unsustainable, unhealthy and unsafe agricultural practices cause substantial numbers of occupational and work-related diseases, injuries and pesticide poisonings, disabilities, premature deaths, loss of income potential and human suffering, and thus perpetuate poverty in rural areas,
the international, national and local actions at present have only had a limited impact to the above mentioned challenges,
the conditions of rural workers and population show significant similarities and common needs in various parts of the world

Acknowledging
the progress made in addressing health aspects of urbanization, but being concerned that the lack of comprehensive initiatives to protect and promote health in rural villages can further exacerbate health inequalities within and between countries,

Emphasising
that the attainment by all people of the highest possible level of health is impossible without improving the health of rural populations at work and in life in general,

Taking into consideration

Recalling
the outcomes of previous international deliberations on occupational health in agriculture and rural health, including the Declaration of the First International Congress on Rural Health in the Mediterranean and Balkan Countries (Bari, Italy, 2002), the Agenda on Rural Health (Loni, India, 2002), the Declaration on Occupational and Environmental Rural Health (Belgrade, Serbia, 2004), the Lodi declaration on Healthy Villages (Lodi, Italy, 2006), and the Cartagena Declaration of 2009 (Cartagena de Indias, Colombia, 2009),
We, who took part in the 3rd International Congress on Rural Health in Mediterranean and Balkan Countries, held here in Tirana, Albania, from September 22 to September 25, 2010, discussed the challenges to providing adequate occupational and environmental health, food safety, public health and health services in villages, and
DECLARE THAT:

1. The rural populations and rural workers of the area suffer an unacceptable exposure to environmental and occupational health risks, poor conditions of work and largely non-existent social protection, including persistent inequality in the access to preventive and curative health care services and social security;

2. Among this population, children are especially vulnerable to occupational and environmental risks, and children working in agriculture represent the biggest share of hazardous child labor,

3. Migration represents a growing phenomenon in the whole area. Migrants are often provided with the most dangerous jobs and for cultural and linguistic barriers they represent another group particularly vulnerable to occupational and environmental risks, therefore specific actions for the promotion of their healthiness and wellbeing are needed,

4. Rural women often have to carry extra burdens of disease and injuries due to agricultural health risks and unpaid domestic labours.

5. There is a strong need for placing a stronger emphasis on ensuring access of rural people to occupational, environmental health and healthcare services in rural areas and on improvement the quality of these services. The services should be preferably developed sustainably as a part of the national health system;

6. We are aware that in rural areas there are three main objectives to be reached, namely: protection and promotion of the health of the general population, protection and promotion of health and work ability of rural workers and protection of the environment. Integrated regional, national and international rural health policies and actions are needed to achieve these objectives including an adequate workplace inspection activity, according to national and international laws.

7. Rural health dimension should be incorporated into the national and local environmental health, occupational health and public health action plans to meet the special needs of the rural populations;

8. We call for concerted regional, national and international efforts to improve the scope and the coverage of the primary health care to better address the needs of rural communities, as well as to providing access to occupational and environmental health services in rural areas and to improving the quality of content and delivery of such services;

9. We recommend an increasing stewardship by the ministries of health, together with ministries of environment, labour and agriculture, and regional authorities, for prevention, management and control of occupational health, environmental health and public health risks in rural areas;

10. In line with the policies and Programmes of ILO, WHO and other International Organizations, we call for the strengthening of international actions for their implementation in the area of occupational health in collaboration with the EU agencies, ICOH, IARM, WONCA, EURIPA and other international professional bodies and NGOs

11. There is an urgent need for an increasing collaboration between the relevant disciplines, such as medicine, public health, occupational and environmental health, health promotion, food safety, safe water supply, chemical safety, agricultural and veterinary sciences, and social sciences for addressing the special health needs of rural populations and encourage the mainstreaming of rural health in health and development strategies;
12. We pledge our support to the international activities related to developing Healthy Villages of the World Health Organization and the International Labour Organization, acknowledging the importance of collaboration with the other relevant UN agencies, such as UNDP, UNEP, UNICEF, FAO, UNHABITAT, and the regional bodies, such as the European Union;

13. We commit ourselves to the provision of universal health services including Basic Occupational Health Services (BOHS) for the rural population, based on existing primary health care systems, and call upon the support of WHO, ILO and EU for the Mediterranean and Balkan Network on Rural Health and the SEE Network on Workers’ Health in their joint projects.

14. We believe that the Healthy Village concept needs to be introduced in training and educational programmes, in order to build the necessary human resources to provide health services of good quality to rural populations and agricultural workers and we commit ourselves to a global movement in developing Healthy Villages to respond to the specific occupational, environmental and public health problems and to improve the inadequate access to health care and health promotion in the rural areas;

15. We realize the need for adequate and reliable data collection and analysis for needs assessment and monitoring and thus we will collaborate for the development of international models for rural health profiles and indicators;

We, hereby, authorize the Congress Presidents to sign this declaration on our behalf.

Tirana, 25th September 2010

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