

# THE CONGRESS OF LOCAL AND REGIONAL AUTHORITIES

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## Resolution 242 (2007)<sup>1</sup>

### Balanced distribution of health care in rural regions

1. Many of Europe's regions are currently confronted with a phenomenon of uneven distribution of health care characterised by health provision concentrated in the large urban centres to the detriment of the rest of the region's territory, particularly rural areas.

2. This phenomenon is making access to health care difficult for the entire regional population and is also making the rural or remote areas in the regions concerned less attractive in economic, social and cultural terms.

3. This situation is also making working conditions difficult for health professionals, who are overworked and professionally isolated, find it difficult to exchange information or ideas with other doctors or access in-service medical training, have low incomes and are obliged to provide constant care cover.

4. Aware of this trend, the Council of Europe, through the heads of state and government of its member states, reiterated at the Warsaw Summit in May 2005 that protection of health as a social human right was an essential condition for social cohesion and economic stability and pledged to intensify work on equity of access to care of appropriate quality.

5. In this context, it is vital that regional authorities implement measures at their level to combat this phenomenon, which is undermining the social cohesion of their territories and, given, *inter alia*, the growing health care needs linked to the ageing of the population and the decline in the number of practitioners, is likely to be consolidated in the coming years.

6. It should be pointed out in this respect that, at its spring session in March 2007, the Chamber of Regions of the Congress adopted Resolution 231 (2007) on e-health and democracy in the regions proposing concrete responses to the problem of an increasing regional scarcity of medical staff.

7. In the light of the above, the Congress calls on the regional authorities of the member states to:

a. adopt measures to encourage health professionals to set up or remain in practice in areas with inadequate health care

coverage or under threat of medical desertification and, with this aim in mind, to:

i. grant housing and travel allowances to medical students in the final phase of their studies in return for a commitment to carry out their work experience training in areas with inadequate care provision;

ii. introduce a system of agreements with medical students in the final phase of their studies granting them a study allowance in return for a commitment to practising for several years in the above-mentioned areas;

iii. provide for measures exempting the health professionals practising in these areas from regional taxes;

iv. complement these measures with information for young doctors on the aid available and the levels of income in the areas where they set up, particularly for remote areas;

b. develop mechanisms fostering collaboration between health professionals and also encouraging telemedicine and, with this aim in mind, to:

i. take steps to promote the setting up of group practices and medical services centres;

ii. promote local and regional health networks;

iii. promote the development of e-health as an instrument helping to redress inequalities in health care provision between regions and within regions;

iv. develop transfrontier health services, particularly in the following spheres: medical assistance, prevention of natural disasters, relief services, telemedicine, research and training;

c. set up health monitoring mechanisms at regional level to identify the parts of a regional territory that are or will be affected by problems of inadequate care provision and therefore require priority measures.

8. As a complement to the present resolution, the Committee on Social Cohesion has decided to make the examination of the inequalities between regions and within regions, particularly regarding the continuity of social services or access to new technologies, a top priority.

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1. Debated and approved by the Chamber of Regions on 30 May 2007 and adopted by the Congress on 1 June 2007, 3rd Sitting (see Document CPR(14)4RES, draft resolution presented by N. Evdokimova (Russian Federation, R, NR) and C. P. Muratore (Italy, R, ILDG), rapporteurs).