

The NEW Lodi Declaration on Rural Health

Adopted by the International Congress
on Rural Health (ICRH)

and the 4th International Conference
Ragusa Safety Health Welfare in
Agriculture Agro-Food and Forestry
Systems (Ragusa SHWA)

Whereas more than 50% of the world's population live in rural areas, with limited or no access to primary health care, basic occupational health care, clean water and sanitation,

Whereas unsustainable and unhealthy agricultural practices have influence on the rural population, with potential severe influence on the environment, wildlife, and urban population, through contaminated soil, water and food,

Whereas structural system-related determinants accompanied by unsafe work behaviours causes occupational and work-related diseases and injuries, disabilities, premature deaths, loss of income, as well as human suffering and poverty in rural areas,

Whereas children and women working in agriculture are especially vulnerable to occupational and environmental risks, in addition to consequences arising from the unavailability of basic health service and inadequate housing, in particular from household fuel combustion,

Whereas international, national and local actions, although significant and honourable, have not been able to respond successfully to all the challenges put before them,

Underlining that the achievement of the highest possible level of health for all people is impossible without improving the health of the rural population, and this is impossible without the involvement of the public sector as a whole,

Taking into consideration the Declaration of the International Conference on Primary Health Care, Alma-Ata, USSR, 1978, the *Global Strategy on Occupational Health for All* adopted by the World Health Assembly with Resolution 49.12 from 1996 and the *Global Strategy on Occupational Safety and Health* adopted by the International Labour Conference in 2003, *the Safety and Health in Agriculture Convention, 2001 (No. 184)* of the International Labour Organisation.

Recalling the outcomes of previous international deliberations on occupational health in agriculture and rural health, such as 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), the *Cartagena Declaration on Rural Health in Latin America* (Cartagena de Indias, Colombia, 2009), and the *Goa Declaration for Health in the Global Village* (Panaji, Goa, India, 2012),

Recalling the continuing appeal of spiritual and secular leaders and of scholars and scientists worldwide to a responsible stewardship of the Planet, to a shared and sustainable access to its natural and limited resources, to their preservation for future generations,

We, the 250 participants from 52 countries from all continents who took part in the International Congress on Rural Health and 4th Ragusa SHWA, held here in Lodi, Italy, from September 8th to September 11th, 2015, discussed the challenges to providing adequate occupational and environmental health, food safety, public health and medical services in rural areas, and

WE DECLARE THAT:

1. We will commit ourselves to help solving occupational, environmental and public health problems and inadequacies in access to health care in rural areas, in the frame of the WHO global strategy on people centred and integrated health service;
2. We will advocate for the elimination of child labour in rural and remote areas, recognition of informal and migrant agricultural workers, and abolishment of modern slavery;
3. We call for national and international organizations, as well as individuals to work on the improvement of the scope and coverage

of primary health care to address better the needs of rural communities inclusive needs related to health and safety at work such as agrochemical use, heavy physical work, accidents, heat stress, dehydration and kidney injuries, cancer due to solar radiation, biological risk factors and zoonoses;

4. We will work towards providing higher access of workers to occupational health care with the creation of basic occupational health services in rural areas wherever necessary,
5. We recognize the need for addressing occupational, environmental and public health risks in rural areas by working together with all of the stakeholders, governments, public sector a while, and industry, as well as the ministries of health, environment, labour, agriculture and other state agencies, private enterprises and workers' organizations;
6. We underline the significance of local, regional, national and international initiatives to protect and promote the health of the rural population;
7. We encourage the following organizations: The European Rural and Isolated Practitioners Association (EURIPA), The International Association on Rural Medicine and Health (IARM), the International Commission on Occupational Health (ICOH), the WONCA Working Party on Rural Practice, as well as the organizations of farmers, agricultural workers, agricultural industry, and the relevant non-governmental organizations and networks, to take action to support and promote the development of Rural Health programmes;
8. We will dedicate a significant part of our scientific and professional efforts to create useful, accessible, simple and low-cost tools for occupational, indoor and environmental risk assessment, communication and management;
9. We call upon the governmental agencies and local authorities to ensure equal and proper access of people in villages, to information

on public and occupational health and the environment, stimulate social and environmental justice, as well as to provide means for empowerment of rural populations to protect and promote their health, and to improve their working and living conditions. Access to health care should be treated as a basic human right. Use of e-health and telemedicine should be promoted in rural area;

10. We congratulate our colleagues which have been working on opening reference centres at the local, national and international level for providing expertise and support to the rural population;
11. We call for the creation of interdisciplinary teams of experts from the field of human and veterinary medicine, public, occupational, and environmental health, health promotion, food safety, chemical safety, agricultural, social and human sciences, and agricultural engineering which will address the needs of the rural population;
12. We recommend introducing Occupational Health and Safety concerns in training and educational programmes in all of the above-mentioned disciplines at any level, from health care providers to rural workers and population, in order to build the necessary human resources and to provide services of great quality to the rural population and agricultural workers. Specific country needs and participatory approach should be addressed;
13. We urge the agricultural sector to realize its responsibility for healthy working and housing conditions by expanding suitable measures for workers and farms and by providing financial means for scientific and educational developments to support such measures;
14. We are committed to share our practice and experience in devising, implementing and evaluating educational programs for the improvement of the health of the rural population;
15. We are committed, as citizens, to advocate peace and justice, and the pursuit of the common good as the founding of scientific and professional achievement in our own field of expertise;

We hereby authorize the Congress Presidents, the EURIPA, IARM, ICOH and WONCA Working Party on Rural Practice representatives to sign this declaration on our behalf.

Submitted to the Assembly by Stefan Mandic-Rajcevic (Italy and Serbia)

Signed in Lodi, September 11th 2015

Claudio Colosio, ICRH President

Giampaolo Schillaci, Ragusa SHWA President

Tanja Pekez Pavlisko, President, EURIPA; Vice Chair WONCA Working Party on Rural Practice,

Hans Joaquin Hannich, President, IARM and Shuzo Shintani, Secretary General, IARM

Jukka Takala, President, ICOH and Gert van der Laan, Chair, the ICOH Scientific Committee on Rural Health , ICOH