

Italy-Portugal collaboration: singularization to embrace diversity

Ardigò Martino, 1 André Biscaia^{2,3}

n April 23rd, 2024, an international seminar convened in Bologna, Italy, marking a pivotal moment in the collaborative efforts between Italian and Portuguese healthcare systems. This event brought together regional and local health services from Lombardy, Veneto, and Emilia-Romagna, alongside the USF-AN (Associação Nacional de Unidades de Saúde Familiar). United in their commitment to enhancing population health, this initiative underscores the power of international collaboration in advancing primary health care (PHC) strategies.

In the realm of PHC, principles of intersectoral collaboration, community engagement, and tailored interventions are paramount. These principles necessitate healthcare systems to pivot towards services intricately attuned to local contexts. Contextual sensitivity, epitomized by the integration of social and healthcare sectors and the alignment of care functions with managerial imperatives, is foundational to promoting health equity and resilience within diverse communities.

Central to the seminar's agenda was the exchange of insights from European experiences across a spectrum of PHC domains. Discussions covered chronic disease management, innovations in clinical and managerial practices, organizational models of primary care delivery, and the integration of technology into patient interfaces. The Portuguese experience with contractualization in family medicine was highlighted, discussing the role of integrated information systems and the institutional support provided to local MF teams in deve-

loping localized actions to achieve common goals. These discussions underscored the interconnectedness between PHC and the broader sociopolitical milieu, where local needs, resources, and regulatory frameworks exert a profound influence.

A key question emerged about reconciling local exigencies with the imperatives of international collaboration in PHC. The response emphasizes the balance between standardization and singularity within health-care delivery. While standardization addresses pathologies, PHC emphasizes singularity as a bespoke approach, highlighting individualized care interventions and contextualized health strategies. This adaptive policy framework, mirrored in municipal and regional health policies, serves as a linchpin for reconciling global insights with local realities.

The seminar discussed strategies to develop PHC services, emphasizing the need for facilitated collaborative interprofessional and intersectoral working groups aimed at fostering reflexivity and collective synthesis. Additionally, institutional support in programming, organizing, and delivering local MCF services is crucial. This support should come from the NHS as well as from scientific or category associations such as USF-AN in Portugal, which play a crucial role in defining and exchanging tools and best practices, as well as in training professionals. Discussions highlighted the necessity for specific training to develop interprofessional and intersectoral healthcare teams' daily work organization, institutional frameworks for organizational evolution, and the active engagement of communities in health governance. This collaborative ethos, underpinned by a commitment to iterative learning and adaptation, epitomizes PHC in action.

In conclusion, the collaboration between Italian and Portuguese healthcare systems stands as an exemplar

Azienda Unità Sanitaria Locale della Romagna, University of Bologna. Bologna, Italy.

^{2.} USF Marginal, ULS Lisboa Ocidental. Estoril, Portugal.

^{3.} Associação Nacional das Unidades de Saúde Familiar (USF-AN). Porto, Portugal.



of international cooperation in PHC. Leveraging the concept of 'singularization' to embrace diversity, this collaborative endeavor embodies the transformative potential inherent in cross-cultural synergies. As we move forward, our unwavering commitment to collaboration remains steadfast, driving us towards impactful and enduring solutions aimed at fortifying community health and well-being.

CORRESPONDING AUTHOR

Ardigò Martino E-mail: ardigo.martino@unibo.it https://orcid.org/0000-0003-0429-7772