

# Primary health care: Now more than ever.

## WHR2008

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The World Health Report 2008

## Primary Health Care



# Now More Than Ever



World Health  
Organization

# The World Health Report 2008

## Primary Health Care – Now more than ever

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1. The challenges of a changing world
2. Advancing and sustaining universal coverage
3. Primary care: putting people first
4. Public policies for the public's health
5. Leadership and effective government
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# Director General's message

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Four sets of reforms that reflect a convergence between the values of primary health care, the expectations of citizens and the common health performance challenges that cut across all contexts. They include:



- Universal coverage reforms that ensure that health systems contribute to health equity, social justice and the end of exclusion
- Service delivery reforms that re-organize health services around people's needs and expectations
- Public policy reforms that secure healthier communities
- Leadership reforms

Dr. Margaret Chan

Director General

World Health Organization

**Figure 1** The PHC reforms necessary to refocus health systems towards health for all





## Advancing and sustaining universal coverage



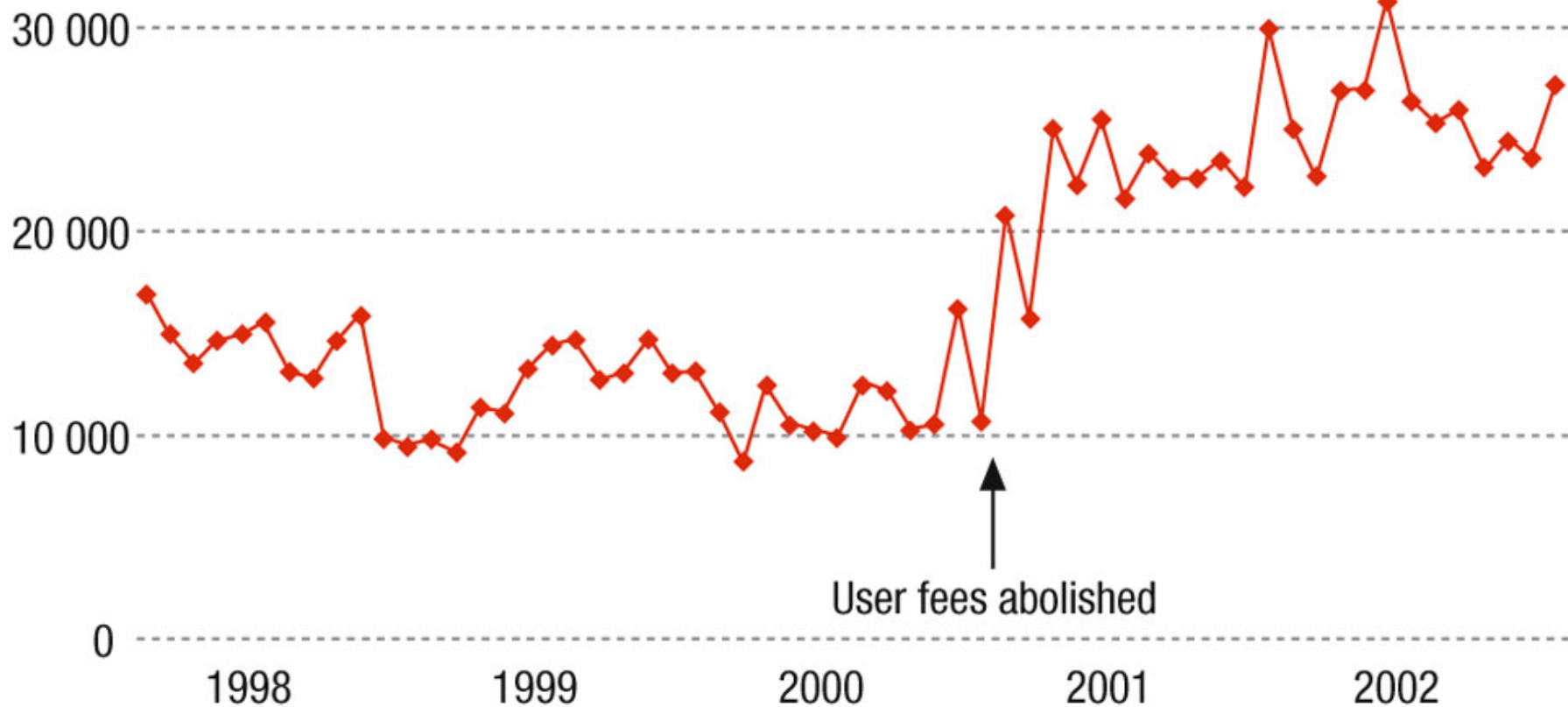
*People expect their health systems to be equitable. The roots of health inequities lie in social conditions outside the health system's direct control. These root causes have to be tackled through intersectoral and cross-government action. At the same time, the health sector can take significant actions to advance health equity internally. The basis for this is the set of reforms that aim at moving towards universal coverage, i.e. towards universal access to health services with social health protection.*

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**Figure 2.3** Impact of abolishing user fees on outpatient attendance in Kisoro district, Uganda: outpatient attendance 1998–2002<sup>23</sup>

Outpatients per month



**Figure 1** The PHC reforms necessary to refocus health systems towards health for all





## Primary care Putting people first



*This chapter describes how primary care brings promotion and prevention, cure and care together in a safe, effective and socially productive way at the interface between the population and the health system. In short, what needs to be done to achieve this is “to put people first”: to give balanced consideration to health and well-being as well as to the values and capacities of the population and the health workers’. The chapter starts by describing features of health care that, along with effectiveness and safety, are essential in ensuring improved health and social outcomes.*

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# Integration of personal and community health care

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The promotion of primary health care since 1978<sup>1</sup> has had a profound political impact: it forced medical educators around the world to address the health needs of all people and it spurred the global recognition of family doctors as the primary medical providers of health care in the community. Yet, on the 30th anniversary of the Alma-Ata Declaration,<sup>2</sup> disillusionment with and failure to appreciate primary care's contribution to health persist. The missing link in the translation of the principles of Alma-Ata from idealism to practical,

at the expense of population health. The challenge of this balancing act is illustrated in the interchanged use of the terms "primary care", which usually means care directed at individuals in the community, and "primary health care", which usually means a population-directed approach to health. To simplify this discussion and to reduce confusion, we will use the term "personal care" instead of "primary care" and "community-oriented primary care" (panel) instead of "primary health care".

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**Figure 1** The PHC reforms necessary to refocus health systems towards health for all



# Public policies for the public's health

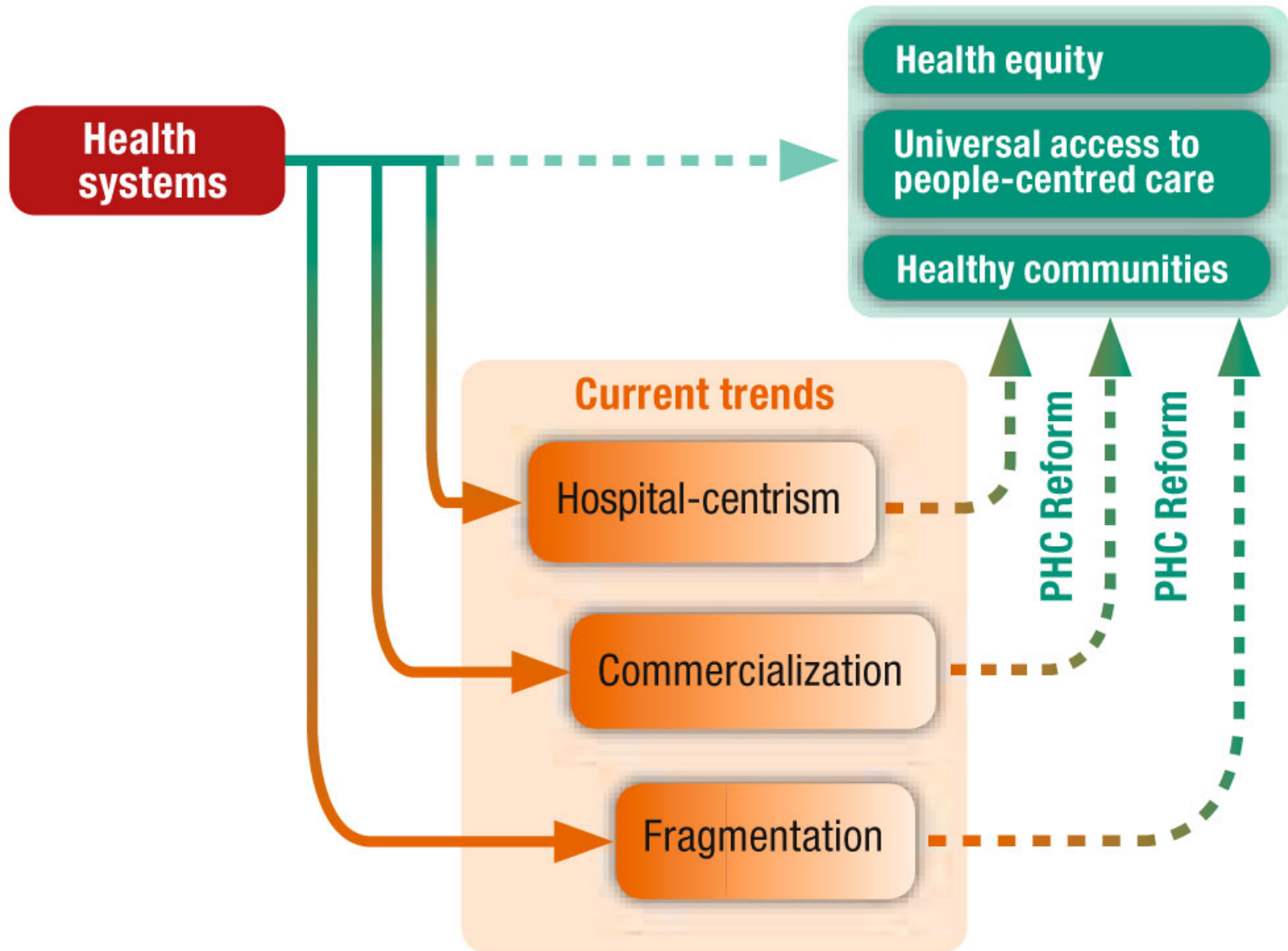


*Public policies in the health sector, together with those in other sectors, have a huge potential to secure the health of communities. They represent an important complement to universal coverage and service delivery reforms. Unfortunately, in most societies, this potential is largely untapped and failures to effectively engage other sectors are widespread. Looking ahead at the diverse range of challenges associated with the growing importance of ageing, urbanization and the social determinants of health, there is, without question, a need for a greater capacity to seize this potential. That is why a drive for better public policies – the theme of this chapter – forms a third pillar supporting the move towards PHC, along with universal coverage and primary care.*

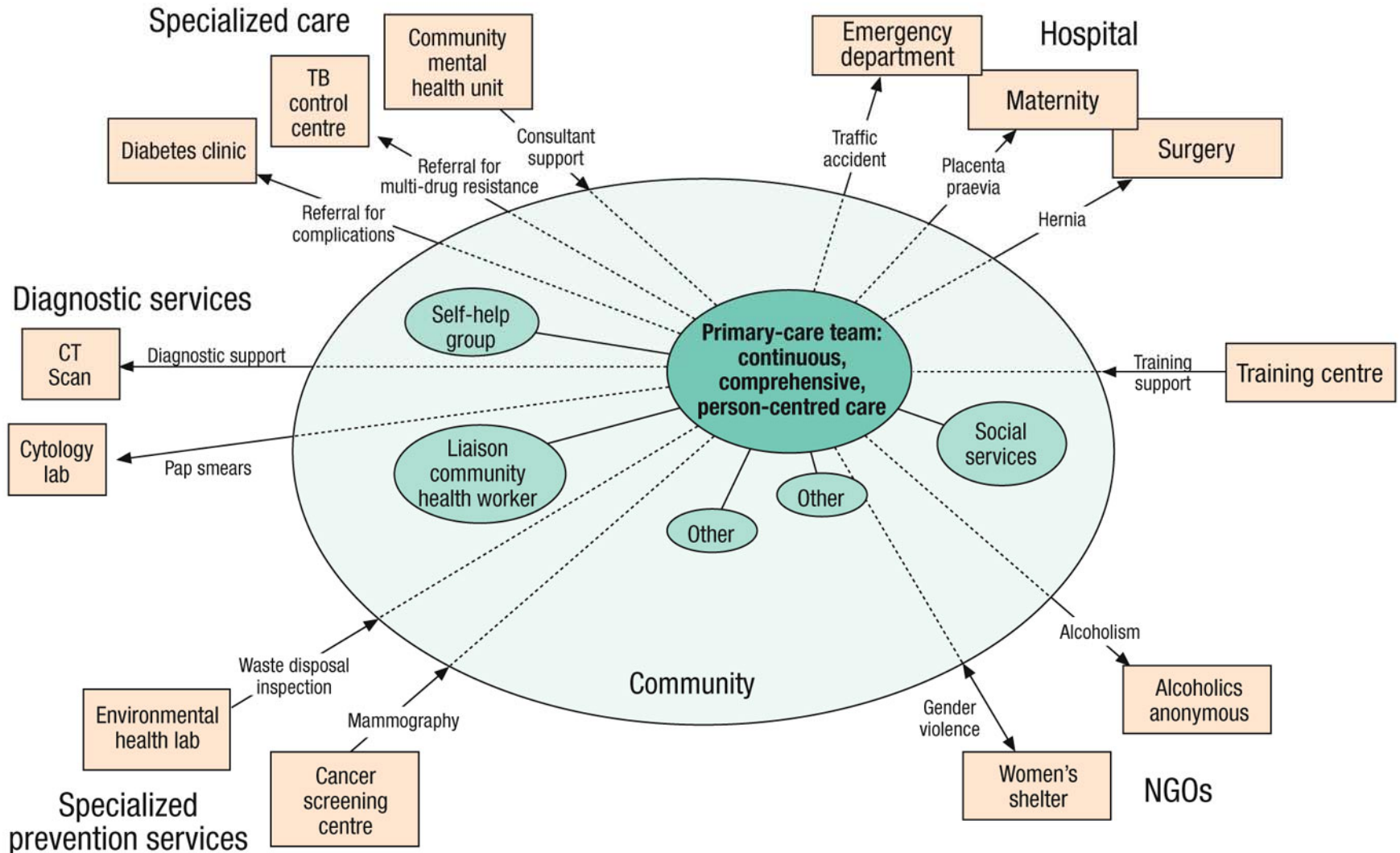
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**Figure 1.10** How health systems are diverted from PHC core values



**Figure 3.5** Primary care as a hub of coordination: networking within the community served and with outside partners <sup>173,174</sup>



**Figure 1** The PHC reforms necessary to refocus health systems towards health for all





# Leadership and effective government



*The preceding chapters have described how health systems can be transformed to deliver better health in ways that people value: equitably, people-centred, and with the knowledge that health authorities administer public-health functions to secure the well-being of all communities. These PHC reforms demand new forms of leadership for health. This chapter begins by clarifying why the public sector needs to have a strong role in leading and steering public health care reforms, and emphasizes the fact that this function should be exercised through collaborative models of policy dialogue with multiple stakeholders, because this is what people expect and because it is the most effective. It then considers strategies to improve the effectiveness of reform efforts and the management of the political processes that condition them.*

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# MINISTRY OF HEALTH

## KENYAN FAMILY MEDICINE STRATEGY

September 2007

## From Alma-Ata to Almaty: a new start for primary health care

On Oct 14, *Now more than ever*, the World Health Report for 2008, was launched at Almaty, a city formerly called Alma-Ata and well known for the 1978 WHO declaration on primary health care.<sup>1</sup> Although many countries tried to put primary care into practice, the declaration's goal of Health for All was not achieved. Will all countries now establish strong and efficient primary care as an integral component of their health systems? Is 2008 different from 1978?

The multiple interacting health problems that are intractable cannot be dealt with without a person-focused population-oriented approach. Vertically oriented and externally funded services interfere with the responsibility of the state to improve its own health services.<sup>5</sup>

The need for integration of health services by primary health care was emphasised by a workshop in May, 2008, in Geneva.<sup>6</sup> The 15by2015 campaign (launched in March,

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