What

An international institutional network

The World Health Report 2008 "Primary health care: now more than ever!"\(^1\) emphasizes the importance of strengthening health primary care in addressing the health challenges, both in developed and developing countries. There is a need for capacity building of primary care physicians, prepared to work in the context of interdisciplinary teams in districts. Primary health care is seen as a strategy to address inequities in health\(^2\).

The Primafamed Network ("Primary Care & Family Medicine" Network) is an international institutional network active in the field of capacity building, research and service delivery in primary health care worldwide.

To strengthen Family Medicine education and training and enhance the quality and accessibility of Primary Health Care in Africa

The network aims at developing and strengthening Family Medicine higher education and training in Africa through for example, capacity building, curricula enhancement, academic research development. Due attention is also paid to interprofessional training and training of other professionals in PHC such as nurses, mid-level care workers and community health workers.

The ultimate goal of the network is to contribute to accessible, affordable and equitable health care, focusing on underserved populations. Strengthening primary health care, will contribute to the realization of the United Nations "Sustainable Development Goals", specifically goal 3 ("Ensure healthy lives and promote well-being for all at all ages"). Primary health care is a strategy to achieve more health equity as reiterated by the Commission on Social Determinants of Health (CSDH).

Through a strategy of South-South cooperation

The network is based on South-South cooperation where partners learn from each other. Instruments of cooperation and exchange of knowledge & experience are:

\(^{1}\) [www.who.int/whr/2008/en](http://www.who.int/whr/2008/en)

- The website
- The African Journal of Primary Health Care and Family Medicine (www.phcfm.org)
- Annual workshops
- Twinning activities

Objectives

Educate and train
Educate and train family physicians in providing interdisciplinary Primary Health Care services, oriented on the needs of individuals, their families and their communities and by doing so, contribute to the health of African society through the development of accessible, responsive and high quality health systems.

Develop and strengthen
Develop and strengthen African academic departments of Family Medicine and Primary Health Care that promote education and training at the undergraduate and postgraduate level.

Network
Establish an institutional network between African academic departments of Family Medicine and Primary Health Care on the basis of South-South cooperation.

History and Milestones


London, October 1995. The newly appointed professor in PHC of Cape Town University, professor Dumo Baqwa, met with professor Jan De Maeseneer, Chair of the Department of Family Medicine and Primary Health Care of Ghent University. During this meeting it became clear that there was a strong movement in South Africa towards the development of PHC, with the ‘family physician’ as the medical discipline. Professor Baqwa invited professor De Maeseneer to South Africa for a study visit where contacts with the most important stakeholders in the development of FM were scheduled.
In light of the positive experience of interuniversity cooperation between South Africa and Flanders (Belgium), the possibility for cooperation between the Departments of Family Medicine of the 8 medical faculties in South Africa and the Department of Ghent University was explored. Financed by the Minister of Education of the Flemish Community, a workshop took place on "Training in Family Medicine and Primary Health Care in South Africa and Flanders" in September 1997 in Durban.

At the end of the workshop, the “Durban Declaration” was adopted, stating that the 8 South African departments responsible for FM were to form a consortium, called FAMEC (Family Medicine Educational Consortium), and would work together on common objectives by:

- Forging a network for communication and consultation;
- Adopting common vision and concerted action e.g. on vocational training;
- Developing methods to represent the perspectives of the consortium;
- Sharing and exchanging knowledge and expertise;
- Optimising and potentiating one another by collective use of resources in order to serve all districts in the country;
- Contributing to the management of the change, the basic curriculum and vocational training.

Between 1995 and 2004 FAMEC regularly organised interuniversity meetings between all departments of Family Medicine. Major challenges addressed by the consortium were the elaboration of a ‘core-curriculum’ and the development of appropriate assessment-systems.

**2003 - VLIR-UOS support**

From 2003 onwards, the cooperation was financed with a grant the Flemish Interuniversity Development Cooperation (VLIR-UOS), in the framework of a project on the “Optimisation of the vocational medical training in Family Medicine & Primary Health Care in South Africa: a contribution to the realisation of health for all”. Yearly training workshops were organised and two groups of South African teachers in FM visited the Flemish departments in order to exchange experiences on training of family physicians. The synergy in strategic and educational developments in the North and the South was most striking. Courses were developed in an electronic environment, training was organised in PHC-centres and district hospitals with direct supervision of the trainees. In all South African provinces training complexes (consisting of PHC-centres with related clinics and district health hospitals) were developed.
2005 - Expansion of the network outside South Africa

The positive South African experience inspired the continuation in the framework of a new VLIR-UOS project: “Development of training in Family Medicine/Primary Health Care in Southern and Eastern Africa: a contribution to the realisation of quality and equitable healthcare through a South-South Network”.

The first contacts outside South Africa were established and the project included FM departments from Tanzania, Kenya, DRC, Rwanda and Uganda. The strategy of South-South cooperation was developed as it was clear that, as far as the content of the training programs was concerned, all the expertise was located in the South.

The project also focused on strategies for information sharing and on translating results into an appropriate educational context. Through the South-South cooperation, the impact of the developmental progress improved considerably, as models developed in one site could be implemented in other places.

2007 - Consolidation of PRIMAFAMED network, the African Journal for PHC

In 2007, a successful application was made in the framework of the ACP-EU cooperation programme on higher education (Edulink). The project was named: “Primafamed Network: Primary Care and Family Medicine Education Network”. The project aimed to establish an institutional network between beginning and established departments or units of FM and PHC in Sub-Saharan Africa. The geographical scale increased considerably: the 8 departments of Family Medicine in South Africa were associates, and also departments from universities in Tanzania, Kenya, Uganda, DRC, Rwanda, Sudan, Ghana and Nigeria joined the network. In the different countries training complexes were established with financial support from the project. There were opportunities for staff-mobility whereby departments could invite teachers from other Southern partners or associates to enhance the local training capacity.

Later on each of the South African FM departments twinned with a another African region to train family physicians, even if in that region there is no medical faculty, or even no university, yet. The criteria for "eligibility" for the departments was that at least there was an institutional intent to start with a program in Family Medicine training, at one of the four developmental stages as described in an analysis done in 2010:

- level 1: structural implementation of the training program in the department is in preparation;
• level 2: department/unit of family medicine exists or is part of other departments (Community Medicine), training complexes are under development, family medicine is part of undergraduate training;
• level 3: department/unit of family medicine exist, training complexes are in place, curriculum is written, post-graduate training has started;
• level 4: department/unit of family medicine exists, training complexes are in place; curriculum is written. Post graduate training has started; the ministry of health has excepted family medicine as specialization and graduated family physicians are part of the health-care system.

The article “Medicine training in Sub-Saharan Africa: South-South cooperation in the Primafamed project a strategy” describes the evolution of 10 Primafamed-network members in the period 2008-2010. At the end of the period these departments were scaled in at least 1 level higher than the level they started at in 2008.

Another major achievement was the launch of the “African Journal for Primary Health Care and Family Medicine” (www.phcfm.org). This journal aims to document the development of the discipline of Family Medicine and Primary Health Care in Africa. The journal stimulates African authors to publish their first articles and to document important aspects of epidemiology of PHC, PHC processes, implementation of Evidence Based Medicine in the African context, etc.

Cooperation was further facilitated through a twinning project, again funded by VLIR-UOS: “Strengthening developmental capacity for Family Medicine training in Africa: the South African Family Medicine Twinning project”.

The project aimed at developing a strategy to stop the internal brain-drain on the African continent. By establishing training complexes in the countries of origin, and by stimulating departments of FM to develop, the chances increase that after graduation, family physicians will stay in the country of origin.

2008 -2017 Primafamed workshops

For the exchange of knowledge and experiences, several workshops were organised since 2008. Although the context in the different countries is quite different, similar strategies can be used, with an emphasis on social accountability and practice-based learning, in the context of training complexes.

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<tr>
<th>Workshop</th>
<th>Topic</th>
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<tr>
<td>1st Primafamed workshop, Uganda (2008)</td>
<td>Improving the Quality of Family Medicine in Sub-Saharan Africa</td>
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<tr>
<td>3rd Primafamed workshop, Swaziland (2010)</td>
<td>Research integrated in Family Medicine training</td>
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<td>4th Primafamed workshop, South Africa (2011)</td>
<td>Advocacy in Family Medicine and Development of Community Oriented Primary Care in the Context of Family Medicine in Sub Saharan Africa</td>
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<td>5th Primafamed workshop, Zimbabwe (2012)</td>
<td>Scaling up capacity building in Family Medicine and Primary Health Care in sub-Saharan Africa</td>
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<td>6th Primafamed workshop, South Africa (2014)</td>
<td>Capacity Building and Priorities in Primary Care Research in Africa</td>
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<td>7th Primafamed workshop, Ghana (2015)</td>
<td>Developing a sustainable workforce in Family Medicine and Primary Health Care in order to address the challenges of multimorbidity, chronic care and palliative care in Africa</td>
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Activities

• **International workshops and projects**: conferences and workshops are being organized to bring together partners, share information, provide teaching and motivate partners in their quest to improve family medicine and primary health care delivery and education in their home countries. In view of the expansion of the Network to partners in Asia and Latin-America, possibilities for workshops in other continents will be explored, provided that we can find synergies with local actors.

• **International research projects**: Bringing partners in the network together to develop joint research to prove how their work and education makes a difference in the communities they serve is of utmost importance. There is a constant look out for research opportunities. In the period 2010-2015, different partners of the network participated in the EU-funded FP7 research project on "Human Resources for African Primary Care – Huraprim", coordinated by Ghent University. Nowadays a number of the Primafamed partners work together in the EuropeAid project “Strengthening primary health care through primary care doctors and family physicians” (2014 – 2016).

• **Using "South-South cooperation"** as an innovative approach, the department brings partners in the same regions together to strengthen forces and learn from each other: every partner in the network is both source of inspiration and a resource for the other partners and takes advantage of the capacities available in the network. An illustration of the South-South cooperation is the mutual exchange of "external examiners" between the participating departments.

• **Advocacy** for primary health care: the Primafamed-network acts as an advocacy-platform for strengthening the development of primary care worldwide. This includes: participation in WHO-activities, integrating Primafamed in the activities of the WHO Collaborating Centre on Primary Health Care, in EU-funded projects, liaising with likeminded organisations and networks worldwide ...

• **To keep all partners up to date and connected** we are improving the Primafamed website and mailinglist ([www.primafamed.ugent.be](http://www.primafamed.ugent.be)). The current website is static and does no longer meet the needs of our extended network. To enhance communication between partners, we need to update the website to become more interactive, a community where "offer and demand" in term of tools, strategies, courses,… can be exchanged.
• One method to enhance scientific work is **stimulating and supporting PhD-projects**. For example, On the 28th of October 2016, dr. Shabir Moosa (University of Witwatersrand, South Africa) defended his PhD at Ghent University in the Faculty of Medicine and Health Sciences.

• **Train-the-trainers module** will be another element for supporting the post-graduate training in primary care and family medicine. Various universities in Sub-Saharan Africa (Rwanda, Malawi, Uganda and Ghana) have already shown strong interest in this new initiative. Based on a needs assessment specific gaps and underdeveloped topics of the family medicine will be identified and consequently specialized family medicine tutors from Europe (Belgium, The Netherlands and Denmark) with a vast experience of the cultural settings and the required topic will visit the site and increase the capacities of the university through a train-the-trainers approach.