

WEBINAR SERIES ON PRIMARY HEALTH CARE WITH A TERRITORIAL PERSPECTIVE



WEBINAR #3. Tools and Practices to Operationalize the Primary Health Care Approach Executive Summary

KEYNOTE PRESENTATION

The third webinar in the series on [Primary Health Care \(PHC\) with a territorial perspective](#) took place on July 3, 2024, with the aim of presenting some tools for the operationalization of PHC and following up on the discussion on the implementation and prioritization of the strategy as a fundamental element in the process of strengthening and transforming health systems in the Americas. The triggering presentation allowed an approach to the [Operational Framework for PHC](#) published by the WHO in 2021 and the publication [Implementing the primary health care approach: an introduction \(a first\)](#) presented in May during the 77th World Health Assembly.

861 participants

53 countries



Shams Syed, Special Programme for Primary Health Care
, WHO

Highlighted the political commitment to primary health care, as emphasized by the WHO director-general. Primary care is considered the most inclusive, equitable, cost-effective and efficient path to universal health coverage. An integrated territorial approach that focuses not only on First Level of Care services but also on Essential Public Health Functions (EPHFs) is what the WHO and UNICEF operational framework also contributes.

The framework provides 14 interdependent levers, divided into strategic (such as political commitment and financing) and operational (such as models of care and quality of care), each with specific actions and resources. It also includes a measurement framework for monitoring health systems from this perspective. This framework will allow for more effective tracking compared to previous attempts. The recent "PHC Primer" brings together key information on primary health care, highlighting its foundations, implementation, and potential. This compendium includes about 200 published case studies and about 100 in preparation.

It is our responsibility to gather experiences from the Americas and learn from other parts of the world to address the practical challenges of primary health care. Finally, highlighted that it is crucial to maintain a focus on the core values of PHC, such as solidarity, social justice, people-orientation, equity and a bold commitment to health for all.

EXPERTS PANEL



Katherine Rouleau, Professor in the Department of Family and Community Medicine, University of Toronto

In Canada, one of the main challenges in PHC is that few medical graduates opt for comprehensive family medicine. Although historically 50% of graduates choose this specialty, the organization of services and models of care have not been adapted to the current needs of patients, especially in multidisciplinary teams. Financial models are also misaligned with these needs.

In addition, Canada faces problems due to the lack of a population-based approach, such as the one they have in Brazil. Many people don't have access to a family doctor because doctors can close their practices. Despite learning from countries like Brazil and Chile, Canada needs to improve harmonization between the public and private sectors in health, and collaboration between the two sectors is crucial. It is critical to clearly prioritize health and well-being goals, address social determinants such as housing, minimum wage, and childcare, and ensure equitable allocation of resources. It is also essential to ensure community participation and recognize those responsible for financial decisions to achieve the desired results in communities.



Sergio Minué, Professor, Andalusian School of Public Health, Spain, WHO Collaborating Centre for Primary Health Care

From the collaborating center of the Andalusian School of Public Health in Granada, Spain, they have been collaborating with the WHO for more than ten years. Initially with the framework on integrated people-centered services in 2016 and since 2021 based on the Astana Declaration. They use the "Primary Health Care for People" platform, structured in four areas: international events, updating resources, sharing experiences in communities of practice and identifying good practices. They focus on the operational framework and performance indicators, providing informative videos and supporting countries in assessing their performance in primary health care.

Referring to the main challenges to operationalize PHC, he highlighted as positive that institutions such as the WHO, PAHO, World Bank, OECD and the IDB coincide in their vision to strengthen PHC and achieve the sustainability of systems and universal health coverage. He also added that the main challenge is to attract and retain human talent in PHC, since it is based on human interaction and traditional values such as listening, touching, waiting and maintaining continuity over time. This approach contrasts with the current trend of immediacy and continuous change. Keeping the same GP for more than 15 years can reduce mortality by up to 30%. The difficulty of attracting and retaining talent affects both countries with remote areas and developed nations such as Europe, the United States and Canada.



Patricia Castillo, director of health, Renca, Chile; representative of the Executive Committee of the Movement of Healthy Municipalities, Cities and Communities of the Americas (HMCC)

In Chile, PHC is based in the municipalities, which has offered the local level a better position to articulate with the community, attending to specific needs. Renca's experience with binding citizen dialogues has been very positive and has helped to plan, adapt and prioritize projects. For 4 years the municipality has had strategic objectives and resources aimed at these citizen dialogues. It has made it possible to integrate strategies such as telemedicine, mental health, and access to medications based on those needs. He also stressed that based on the reform they have managed to offer universal access to the community, regardless of the user's insurance.



Ernesto Báscolo, Unit Chief, Primary Health Care and Integrated Service Delivery, PAHO/WHO

PAHO's new framework and technical cooperation on EPHF are key tools for operationalizing PHC. In the region of the Americas, EPHFs has more than two decades of history and its new conceptualization is aligned with the universal health strategy approved in 2014, seeking to strengthen the governance of health systems. Integrating primary care with financing reform is crucial, starting from the needs of the population and addressing the limitations of the health system with an intersectoral approach. Since its launch, 14 countries have assessed their progress in these functions and 10 of them have developed strategic plans to meet the challenges.

The commune of Renca is prioritizing the improvement of the relationship between the community and health facilities. This year the citizens dialogue focuses on climate change and health, and in 2023 it has been in relation to universal care and system improvements. The bet is to have multidisciplinary teams; and greater efficiency in the use of resources. For the latter, it is essential to have data on use (something not so frequent at the local level). Finally, she stressed that information is key for decision-making, and to generate strategic planning based on needs.

PAHO's recent resolution highlights three key elements: strengthening the leadership and governance of the health system, improving the capacity to evaluate functions at different levels, and strengthening the training of public health personnel to apply essential functions. This strategy underscores the importance of integrating resources, developing technical and policy capacities, and focusing primary care to carry out a complex and indispensable agenda. The active participation and strengthening of staff are critical to the success of this transformation in public health in the region.

Referring to the integration of PHC with strategies for the elimination of communicable diseases and the approach to non-communicable diseases (NCDs), **Ernesto Báscolo** highlighted that PHC should serve as a platform, focusing on a territorial perspective that articulates services at different levels and sectors. This involves recognizing epidemiological and social problems, improving accessibility to health services, and mapping key actors who can intervene effectively. PAHO and its stakeholders work to harmonize technical cooperation tools in the service of a comprehensive agenda, addressing both immediate needs and social determinants of health to improve the response to the needs of the population in each territory.

KEY MESSAGES

- The integration of services and networks is crucial to strengthen primary health care at the national and local levels. We must adapt the care model, learning from innovations during the pandemic.
- A territorial approach that integrates primary health care services and EPHFs is critical to the success of health systems. The Operational Framework provides strategic and operational guidelines for moving forward along this path, while the WHO Primer presents an important compendium of best practices.
- PAHO's proposed resolution on EPHFs also offers some ways to accelerate the processes of strengthening these functions.
- It is essential to connect financing with the availability of health personnel. Without an adequate, multidisciplinary workforce, primary care will not be sustainable.
- Working with the community to understand their needs is key to designing effective, people-centered health systems. This requires the active participation of leaders at all levels; autonomies and budget.
- PHC is vital to improve health security, achieve universal coverage and universal access and recover lost gains in health during the pandemic.
- It is essential to continue working at the local and national levels to maintain PHC as a central pillar for health equity.

To view the full recording and access the seminar materials, click [here](#).