

The global movement toward integrated people-centred health services:

Family Medicine's Vital Contribution

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Services Organization and Clinical Interventions

Service Delivery and Safety

World Health Organization

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The changing global context: Challenges & opportunities



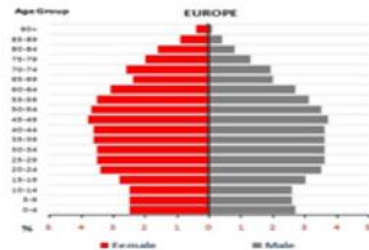
SDGs



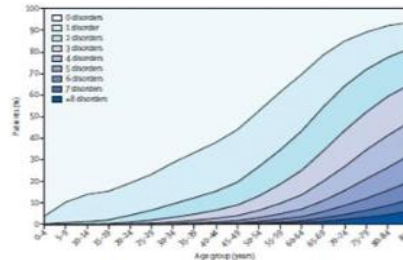
Globalization



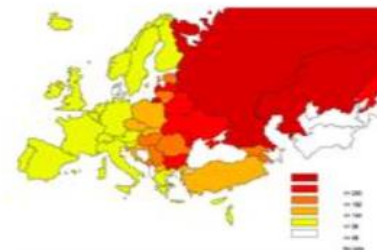
Migration



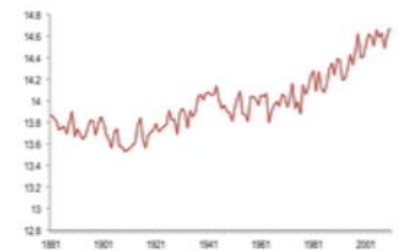
Ageing



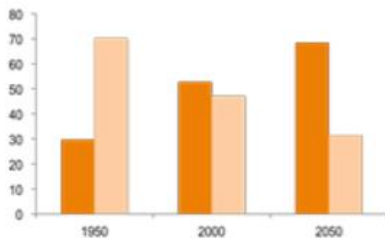
Multi-morbidity



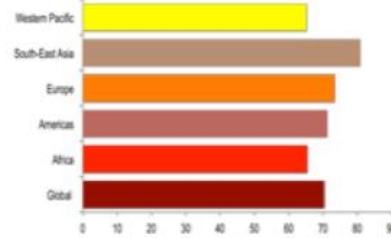
NCDs



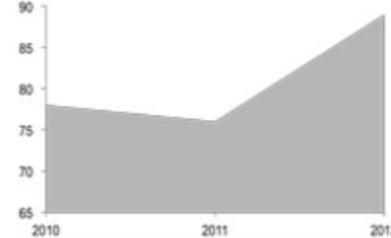
Climate change



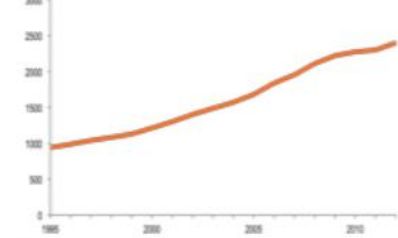
Urbanization



Citizen voice



Innovation



Rising costs

Source: WHO Global Health Observatory Data Repository, 2015



3.8 Achieve universal health coverage, including financial risk protection, **access to quality essential health-care services** and access to safe, effective, quality and affordable essential medicines and vaccines for all

© UNDP Burkinafaso / Giacomo Pirozzi

One in eight people worldwide live in extreme poverty in 2012, with poverty remaining widespread in sub-Saharan Africa, where more than 40 % of people lived on less than US\$ 1.90 a day (UN, 2016)

Thirty four (34) countries are facing fragile situations, which means 17% of Member States (World Bank, 2016)

Nearly 800 million people worldwide still lack access to adequate food (UN, 2016)

In 2013, there were still 757 million adults unable to read and write, of whom two-thirds were women (UN, 2016)

Globally, over 400 million people lack access to essential health services typically delivered through primary care (WHO, 2016)

Worldwide, only about 14% of people who need palliative care receive it. Seventy-eight percent of people who need palliative care live in low- and middle-income countries (WHO, 2015)

Of 421 million annual global hospitalizations, 42,7 million result in adverse events, which represents 23 million DALYs, 66% of which occur in low and middle-income countries (BMJ, 2013)

From 20% to 40% of all health spending is currently wasted through inefficiency (WHO, 2010)

People-centred and integrated health services in the NUKA health system, Alaska, USA

Case management in Torbay, UK

Shared accountability contract for population health outcomes, Kinzigtal, Germany

Promoting service coordination in Lithuania

Integrated care in South Karelia, Finland

Balanced scorecard to promote accountability, Afghanistan

Promoting HIV/AIDS literacy in Angola

Integrated health care networks in Brazil

What are the experiences to date?

Integrating traditional and complementary medicine in Asia

Integrated health care networks in Chile

Social participation in Tupiza, Bolivia

Integrating HIV/AIDS and TB in Mali

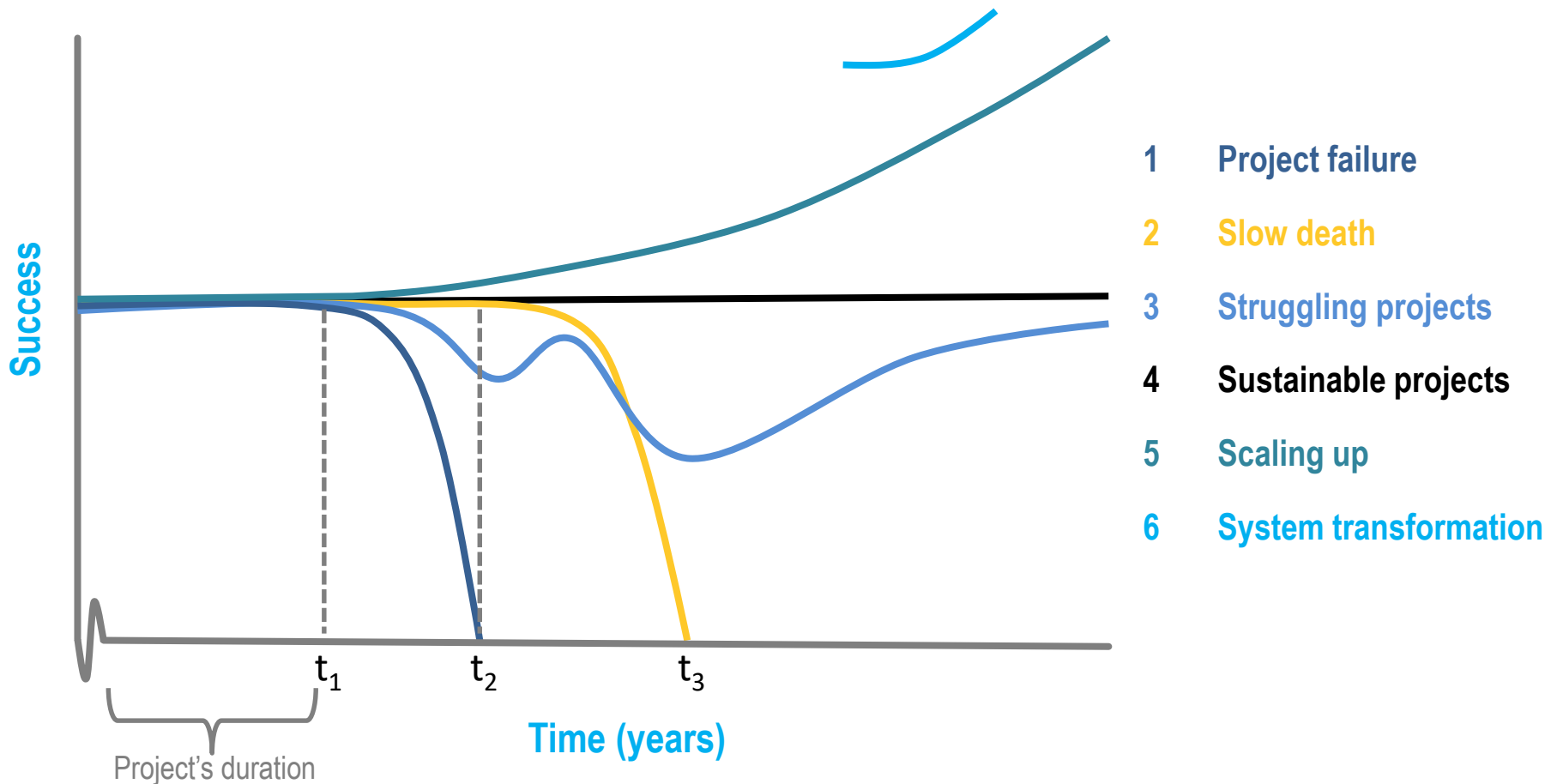
Mobilizing communities to reduce maternal and neonatal deaths in Malawi

Family medicine in Thailand as part of UHC

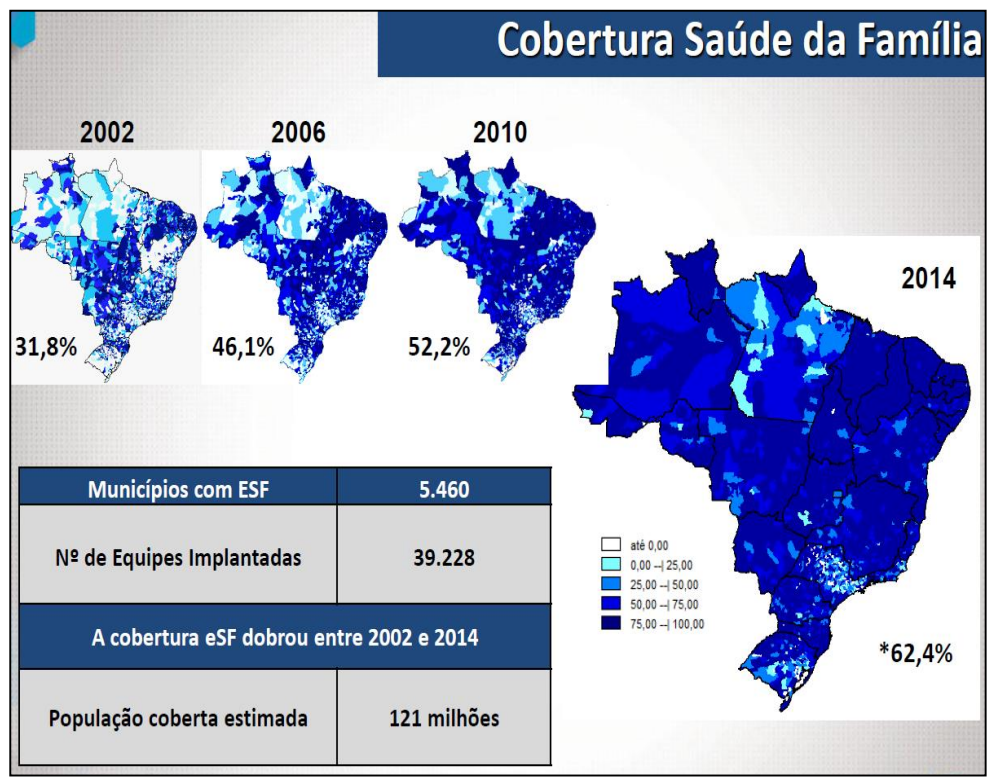
Community-owned primary care networks in Mali

Lessons from implementation: challenges to achieve sustainability and scale

Source: Adapted from Amelung et al. 2014

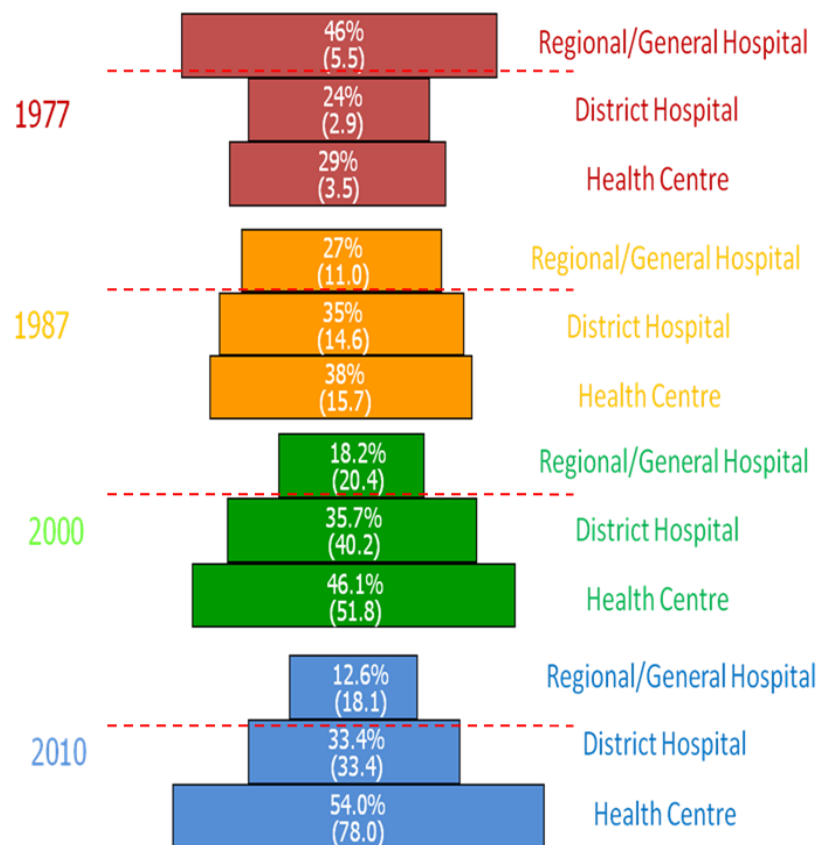


Brazil: Family Health Strategy



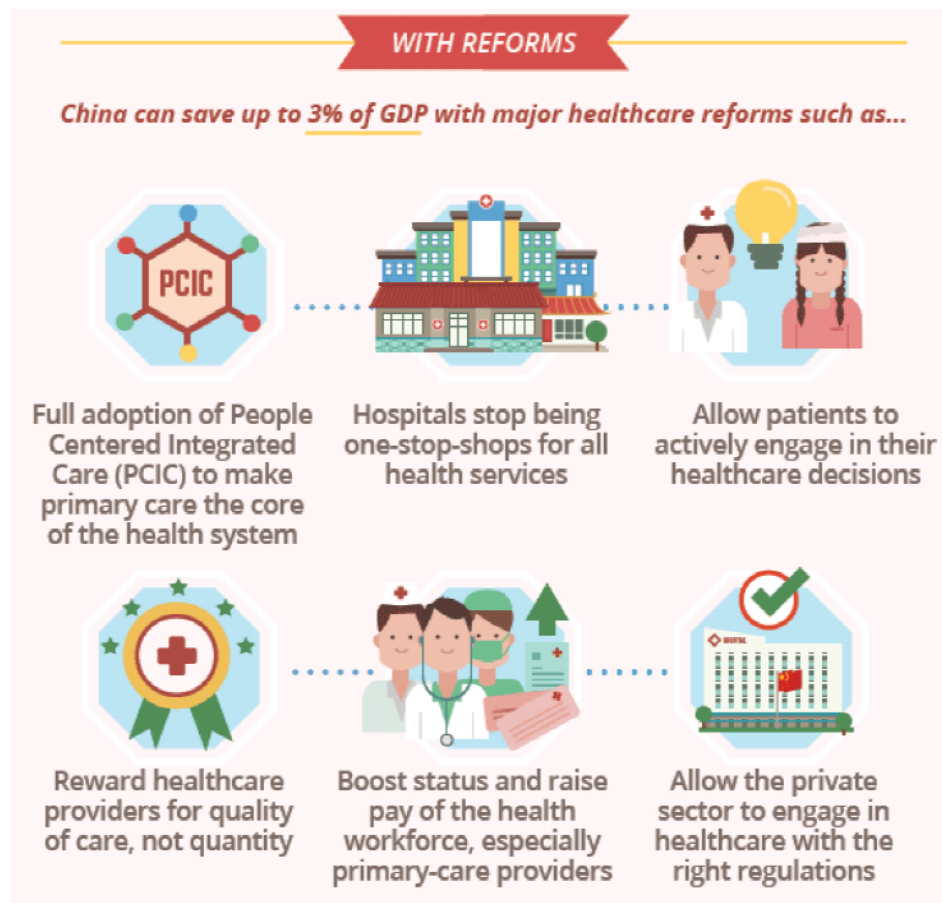
(Portal da Saude, 2016)

Thailand: District-based Primary Care



(NHSO, 2012)

China: Deepening health care reform



(IBRD, 2016)

WHO's 12th General Programme of Work 2014–2019



Principles for progress on health financing reforms for UHC

Reliance on
compulsory
sources

Reduce
Out-of-Pocket
payments

Increase
domestic
contribution

Reduce
fragmentation
in pooling

Capacity for
strategic
purchasing

Research for
accountability
and adaptation

Progress on health workforce for UHC



Global strategy on human resources for health: Workforce 2030

1. Optimize the existing workforce
2. Anticipate future workforce requirements
3. Strengthen capacity to manage HRH policy, planning and implementation
4. Strengthen data, evidence and knowledge

1. Job creation
2. Gender equality and women's rights
3. Education training and competencies
4. Health service delivery and organization
5. Technology
6. Crisis and humanitarian settings
7. Financing and fiscal space
8. Partnerships and cooperation
9. International migration
10. Data, information and accountability

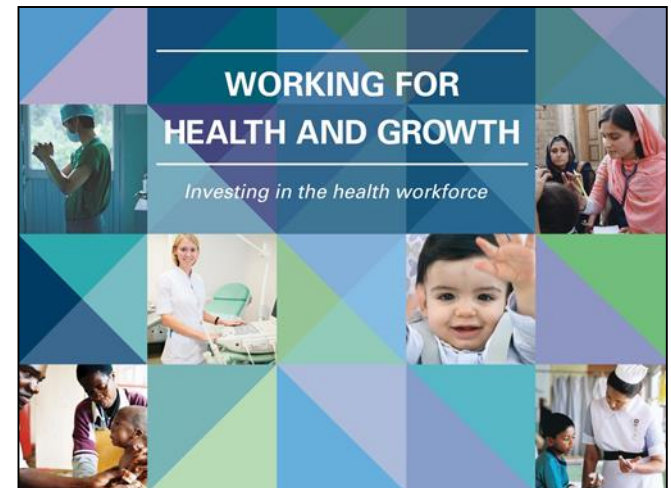
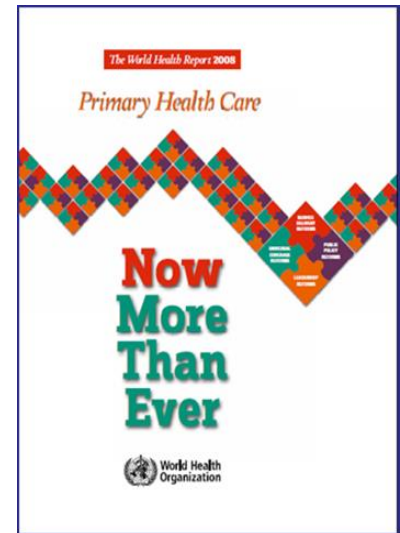
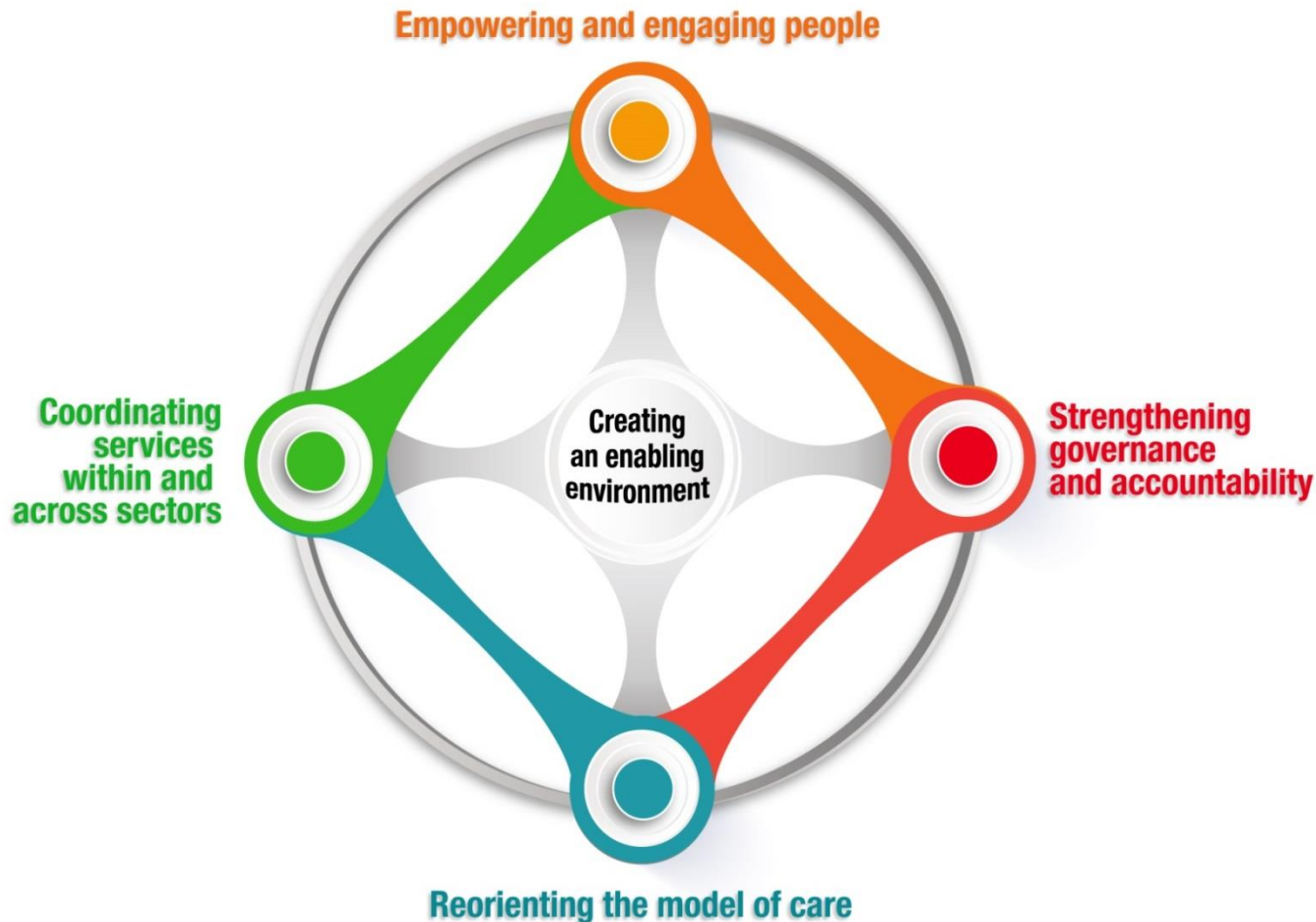


Figure 1 The PHC reforms necessary to refocus health systems towards health for all



Integrated People-centred Health Services



<http://www.who.int/servicedeliverysafety/areas/people-centred-care/en/>

PHC is the foundation of integrated, people-centred health services

- Care is first sought from the primary care provider when a new health or medical need arises.

First contact



- Addresses unselected health problems of the whole population; takes care of a defined practice population

General



- Care that is respectful of and responsive to individual preferences, needs, and values, whole-person care: biological, emotional, social and cultural

Person-centred



- Long-standing personal relationship between the person and the practitioner; care over substantial periods of their lives

Continuous/
Longitudinal



- Provides integrated health promotion, disease prevention, curative care, rehabilitation, and physical, psychological, and social support

Comprehensive



- Whenever necessary, ensures appropriate and timely referral of the person to specialist services or to another health professional

Coordinated



- Works with other medical, health and social care providers, whenever appropriate; part of functioning multidisciplinary care team

Collaborative



- Addresses the health problems of individuals in the context of their family circumstances, their social and cultural networks

Family-oriented



- Addresses the health problems of individuals in the context of his or her life in the local community

Community-oriented

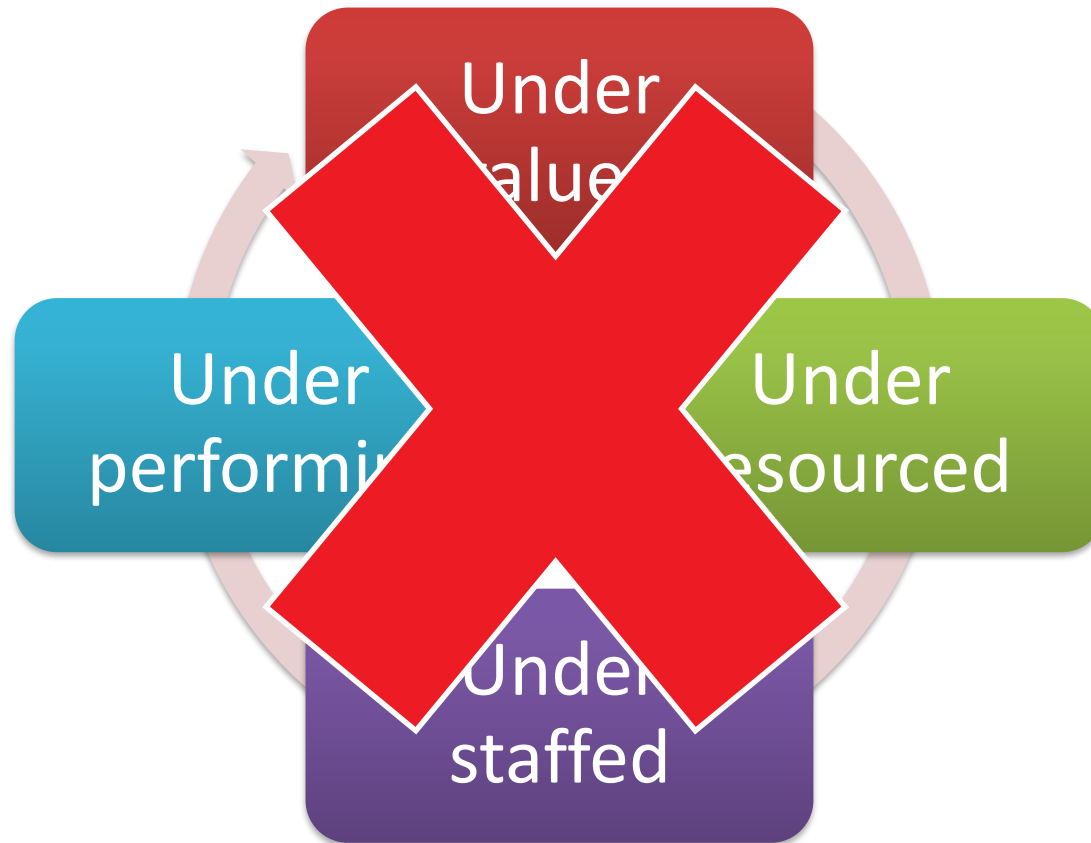


Dr Margaret Chan Director-General of WHO

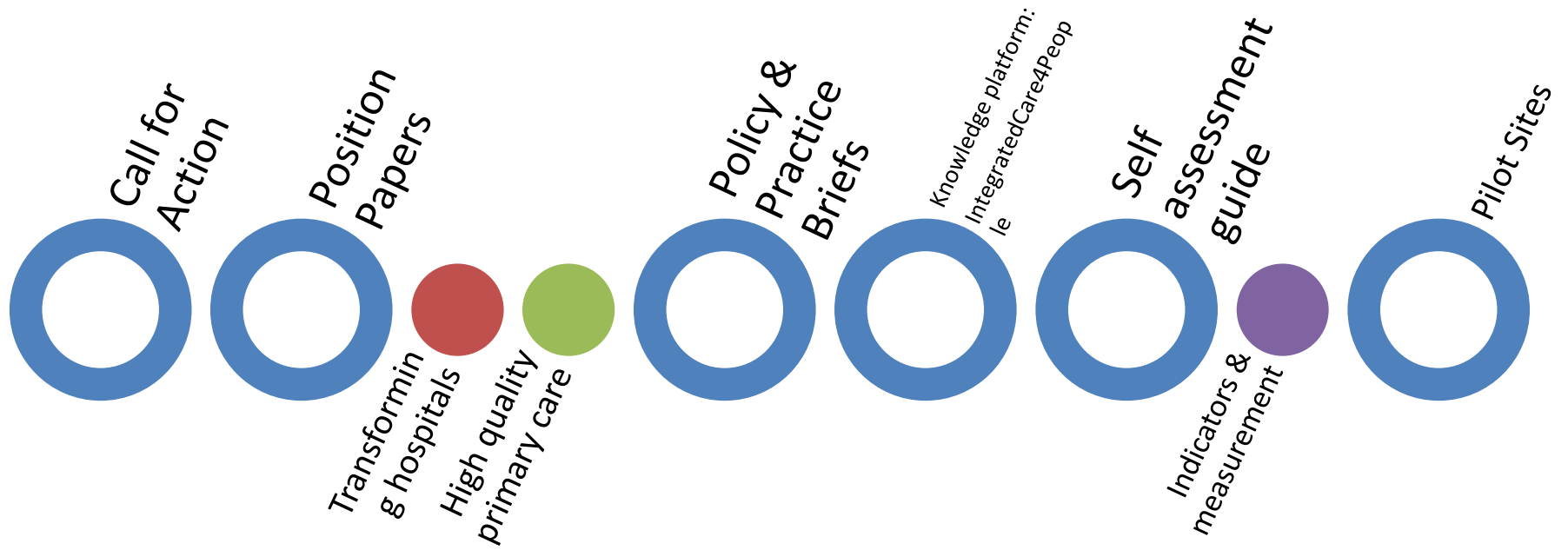
"A health system where primary care is the backbone and family doctors are the bedrock delivers the best health outcomes, at the lowest cost, and with the greatest user satisfaction."

Source: Keynote address by DG at the 2013 World Congress of the World Organization of Family Doctors, Prague, Czech Republic, 26 June 2013

But unfortunately the reality in many countries is that...



Supporting Implementation of IPCHS



Escola Andaluza de Salud Pública
CONSEJERÍA DE SALUD

WHO Collaborating Centre for Integrated Health Services based on Primary Care

HOME RESOURCES PRACTICES COMMUNITIES

COME AND JOIN
Our global community

RESOURCES
Support information such as articles, reports, management models, studies and legislation related to PCIS.

PRACTICES
Virtual space devoted to stimulate, spread and share innovative management experiences and initiatives across the Regions.

COMMUNITIES
Virtual communities of practice and work collaboratively combining efforts.

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WHO Regional Frameworks

The Americas (PAHO)

- Transforming the model of care toward integrated, people- and community-centered care
- Move beyond health sector to address social determinants
- Emphasis on equity
- Increasing public expenditure on health to 6% GDP
- Moving toward elimination of direct payments at point of care

Eastern Mediterranean (EMRO)

- Scaling up Family Practice for UHC
- Three family physicians/10,000 population by 2030
- Bridging program for existing 250,000 public general physicians
- Linkages of FP with implementation of the updated EHSP
- Sustainable funding for FP and establishing strategic purchasing methods
- Implementing 36 quality indicators for primary care level



"Primary care is our best hope for the future. Family doctors are our rising stars for the future." M. Chan, DG WHO



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For more information on health services delivery visit

<http://www.who.int/servicedeliverysafety/areas/people-centred-care/en/>

Contact information