

Dear Friends

My name is Gustavo Gusso, I am 41 years old, father of 2 beautiful ladies, Beatriz and Letícia, and husband of Angelica, who is also a family doctor.

I graduated Medical School from the University of São Paulo and did my residency training in the South of Brazil, one of the most traditional programs since 1981. After that I did my masters in Family Medicine at the University of Western Ontario (Canada) and my PhD at the University of São Paulo, where I became a professor of General practice.



Group that founded the Young Doctors movement in Orlando, USA (2004)

With Barbara Starfield in Parati, Brazil.



With Ian McWhinney in London, Canada.

I was the Director of the Brazilian Society of Family and Community Medicine (SBMFC) from 2004 to 2008 and since then I have been somehow linked to this organization. I am now the editor of our Scientific Journal. I was the president of SBMFC from 2008 to 2012 and we were able to continue the job started by my colleagues Maria Inez (now president of CIMF) and João Werner Falk. We have expanded a lot since then, with many publications and thousands of doctors have joined our society. I have been in many WONCA

meetings and I was part of this council three times: 2004, 2010 and 2013. In 2004 I was part of the group that founded the Young Doctors movement. I have been a member of WONCA International Classification Committee since 2005. From 2006 to 2008 I was the coordinator for the Health Education Strategy by the Ministry of Health and helped in the development of the Brazilian Primary Care Program. I was the editor of the Brazilian Family Medicine Textbook in 2012. My greatest inspirations are Barbara Starfield and Ian McWhinney, among others

My main motivation to become the president of WONCA is to accelerate its globalization towards equity. We have never elected a president from the IberoAmerican Region. We do Family Medicine in many languages and most family doctors do their best in different health systems, contexts and cultures. In Brazil for example we do a more community and team

work-oriented Family Medicine than in other places and it is an asset. We have principles, we must be good communicators, we must be scientific, we must be patient-centered and share decisions but there is not one single way to practice family medicine and WONCA must represent its diversity. Low and middle-income countries usually have health systems with limitations, and so do many rich countries. One of WONCA's main task is to support family doctors in their reality and culture. **To be more straightforward, my propositions for the 2018-2020 term are the following:**

Scientific Goals

- To develop a multi language Continued Professional Development program focused in countries that don't have one
- To provide relevant and selected information and tools in more languages such as Spanish, French, German, Chinese, Japanese and Portuguese
- To support the development of ICPC 3 in such a way that it is flexible and connected to the global needs of places like Africa and other regions
- To organize the certification process for Family Doctors
- To play a more important role in the scientific milieu (undergraduate and graduate levels)
- To support teamwork

Business Goals

- To Continue providing support to Working Parties and Special Interest Groups (SIG)
- To continue providing support to the great job young doctors have done strengthening the fellowship programs
- To seek financial support for the WONCA Regions
- To build a more integrated structure between WONCA regions
- To put young doctors in key executive positions in WONCA.

Political Goals

- To Continue to narrow WONCA's relations with WHO
- To have a clear definition of Primary Care and work with partners such as WHO to incorporate its definition
- To organize associations in countries with no WONCA membership
- To develop strategies to engage GPs with no residency training and with no any scientific association

In short, my proposal is to bring WONCA closer to family doctors to be family doctor-centered as we do in our practice with patients. Of course, the main task is to follow your demands and proposals. We must be a varied and big organization not only in size but in color, heart, soul, and aims. Let's promote equity together.