



**Feedback on second draft of *Declaration for The Second International Conference on Primary Health Care: towards universal health coverage and the sustainable development goals***

**July 20, 2018**

**Program on Primary Healthcare Services  
HQ/HIS/SDS/SCI  
World Health Organization  
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Dear colleagues,

I am writing to provide feedback from the International Federation of Community Health Centres (IFCHC) on the revised, second draft of the *Declaration for The Second International Conference on Primary Health Care*. These are in addition to our feedback on the first draft, in April 2018.

Established in 2013, the IFCHC advances global collaboration in community-oriented primary health care and access to Community Health Centres (CHCs) as a critical way to achieve the World Health Organization's vision of "health for all" and access to primary health care. The federation is led by a diverse group of national and regional CHC associations around the globe, with participation from individual CHCs in countries located in all six WHO Regions.

We wish to thank colleagues at WHO and the global advisory group for your continued work on the draft Declaration. The revised draft makes some improvements on the original draft. However, we feel that there continue to be a few significant gaps. We respectfully urge WHO and the International Advisory Group on Primary Health Care for Universal Health Coverage to incorporate our feedback below into the final draft of the Declaration.

Our responses and recommendations, below and in April 2018, are grounded in *Resolution WHA62.12 – Primary health care, including health system strengthening*, that was adopted in 2009 during the 62<sup>nd</sup> World Health Assembly, in Geneva. We believe therefore that our feedback is an extension of commitments already made by WHO and Member States.

**WHO QUESTIONS ON SECOND DRAFT AND IFCHC RESPONSES**

**QUESTION:** Do you have any comments about the following guiding principles for the Declaration? Societies and environments that prioritize and protect people's health; Health care that is available and affordable for everyone, everywhere; Health care of good quality that treats people with respect and dignity; People engaged in their own health.

**IFCHC RESPONSE:** This vision refers only to prioritizing and protecting health, and then makes the leap to health care. It implies that only health care contributes to health whereas the very exercise of conceptualizing and promoting "primary health care" is to address the deep interconnections between political, environmental and social drivers of health, of which health care is one piece. The guiding principles must more explicitly reference the conditions necessary to achieve and maintain health, for individuals, families and communities. We suggest adding an additional guiding principle: "Societies and governments that invest in equitable access to the social and economic means and inputs necessary for health."



**QUESTION:** Does the vision in the Declaration adequately capture what is needed in PHC for today?

**IFCHC RESPONSE:** For the section *"To address the health and development challenges of the modern era, we need PHC that..."*, we recommend strengthening point (3) so that it recognizes the need for policy that reflects the interconnections between diverse social sectors (healthcare, housing, justice, education and others) and notes the importance of practical integration between services across these sectors within primary health care. Limiting references in this section to the connection between "public health" and "primary care" serves to perpetuate the status quo of societies treating health as the supposed product exclusively of medical and bio-medical systems and structures. In addition, this is a specific location where the example of Community Health Centres as integrated, multi-sector primary health care organizations would be valuable and assist in achieving the core principles for the Declaration as they are articulated.

**QUESTION:** Does the vision accurately express the linkages between primary health care (PHC) and universal health coverage (UHC) and the Sustainable Development Goals (SDGs)?

**IFCHC RESPONSE:** While the conceptual linkages between PHC, UHC and SDGs are fairly well presented, the Declaration as crafted does not adequately account for or address barriers to health and wellbeing for diverse groups that are marginalized as a result of social and political exclusion. In order for the Declaration to be the powerful tool it has the potential to be, it must explicitly name the existence of social exclusion and marginalization in countries around the world on the basis of factors such as race, ethnicity, sex, gender, sexual identity, religion and other factors. It must state that PHC is a concentration of policy focus, resources and services across sectors to address and challenge social exclusion and to provide remediation through appropriate services and supports.

**QUESTION:** Are the drivers for success well explained?

**IFCHC RESPONSE:** Progress has been made over the first version of the Declaration. However, there are several glaring omissions still that must be addressed:

- The "Knowledge" section is meaningless unless there is reference to examples of applied learning and practice. To say that "we know what works and what does not" is meaningless unless we articulate what these factors actually are. We feel strongly that reference to Community Health Centres and other examples of effective primary health care in action would strengthen this section considerably.
- The "People" section should mention compounding and intersecting factors that affect many individuals and groups. The revised draft of the Declaration still does not provide any examples of marginalized and vulnerable groups. If groups are not mentioned, the Declaration must at least note that poverty, homelessness and other social barriers to health are very often correlated with other forms of exclusion such as discrimination on the basis of race, sex, gender, sexual orientation and other characteristics.

**QUESTION:** Is the description of today's challenges appropriate?

**IFCHC RESPONSE:** This section has many strengths, but it is glaringly silent on the qualities and nature of "violence" as mentioned in the sentence "Violence, epidemics, environmental disasters and desperation have driven people to move to stay safe and healthy, often to crowded cities." We strongly recommend amending the sentence to read: "Epidemics, environmental disasters, and social, political and economic violence including the rise of neoliberalism have driven people to move to stay safe and healthy, often to crowded cities and very often across border."

**QUESTION:** Would you add or remove anything from the section: "To address today's challenges and seize opportunities for a healthy future we must...?"

**IFCHC RESPONSE:** For the section "Put public health and primary care at the centre of UHC" we recommend:

- adding "...and others" to the public health and primary care workforce list that is provided. This small amendment will help guard against excluding important contributors and to some terms being perhaps lost in cultural or linguistic interpretation.



- amending it so that it includes and emphasizes the following: interprofessional primary care at the centre of UHC; increasing capacity and quality through a commitment to evidence and evaluation; reforms to education across health professions to ensure interprofessionalism / transprofessionalism at the level of training

**QUESTION:** Does the closing include all the key action elements? Is it motivational and inspirational?

**IFCHC RESPONSE:** The conclusion is fairly strong, but in order for the very last phrase, which reads *"Together we will achieve health and well-being for all, leaving no one behind"* to be genuine, some amendments are required to the conclusion. Specifically, we recommend adjusting the following section.

- Change *"We envision a future where physical, mental and social well-being are assured, where everyone has access to the health care they need without fear of financial hardship. We commit to strengthening PHC globally as part of our collective effort to achieve health and well-being for all at all ages"* to *"We envision a future where physical, mental and social well-being are assured, where everyone has access to the accessible and appropriate health care and social services they need without fear of financial hardship. We commit to strengthening PHC globally as part of our collective effort to achieve health and well-being for all at all ages and regardless of race, ethnicity, sex, gender, sexual orientation, religion or other social characteristics."*

We thank our colleagues at WHO and the International Advisory Group on Primary Health Care for Universal Health Coverage for providing us the opportunity to provide input, and for your thoughtful review of our recommendations. We are at your disposal should you wish to further involve IFCHC at any point before or during the upcoming Global Conference on Primary Health Care.

Respectfully yours,

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