

## 40 years after Alma-Ata

### Primary Health Care in 2018 and beyond, in South and North

Symposium on 23 October 2018 at the Institute of Tropical Medicine Antwerp

In 1979, the 32<sup>nd</sup> World Health Assembly launched the *Global Strategy for Health for All by the year 2000*<sup>1</sup>, endorsing the Report and **Declaration** of the International Symposium **on Primary Health Care** (PHC), held in Alma-Ata, USSR, in 1978. It was the culmination of a growing international awareness on the problematic functioning of health systems: limits of largely biomedically-oriented and hospital-centred health systems, limited contribution of the healthcare sector on its own in achieving better health, patronizing health systems with patients and communities reduced to passive and obedient beneficiaries, ... It denounced the widening health inequities within and among countries as morally, socially and politically unacceptable.

PHC is a philosophy, a strategy and a new approach to health. It presented a radical shift in thinking about health, health care and health development. PHC remains a strong source of inspiration in the design, funding and organisation of health systems. It is driven by an ethos of social justice and has a strong and coherent value base (solidarity, equity, participation, autonomy,...)<sup>2</sup>. From the perspective of the Institute of Tropical Medicine (ITM) and its many partners around the world, PHC is core-business shaping to an important extent its *raison d'être* (see Antwerp Declaration on Health Care for All)<sup>3</sup>.

The launch of PHC however rapidly met with 'scepticism' and was deemed by some stakeholders as unfit to achieve impact on the short- and middle term. A case in point was the movement of selective PHC (SPHC)<sup>4</sup>, later gradually evolving into a plethora of vertical programs, often drawing down limited resources from the foundational base. Furthermore, despite a number of success stories, the implementation of the voluntarist and progressive PHC philosophy was further impeded by the global debt crisis and conservative macroeconomic policies; the imposition of structural adjustment rules in the 80s and 90s (fiscal stringency, user charges, etc. ...); health sector reforms, based on market principles, economic efficiency and cost-effectiveness, paired with governance problems and unfinished decentralization arrangements.

Many challenges gradually surfaced in the last decades. Current global health powers seem to be more a conservative community than 40 years ago (not really mentioning a 'New International Economic Order' as in the late 70s); planetary changes; geopolitical changes with some of the traditional donors pulling back from the health sector, and others more influential (e.g. China); global health initiatives; demographic growth; privatisation of healthcare delivery systems and commercialisation of health care; ageing populations; migration; urbanization; rise of non-communicable diseases and of antimicrobial resistance;... Nevertheless, positive developments can be

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<sup>1</sup> WHO (1981). *Global Strategy for Health for All by the Year 2000*. Geneva, Switzerland.

<sup>2</sup> Declaration of Alma-Ata (1978). International Symposium on Primary Health Care, Alma-Ata, USSR, 6-12 September 1978

<sup>3</sup> Declaration on "Health Care for All" (2001). Formulated by a ministerial working group endorsed by the participants of the Symposium on "Health Care for All", Antwerp, 25-26 October 2001. *Int J Health Plann Mgmt* 2003; 18: S103-S106.

<sup>4</sup> Walsh & Warren (1979) Selective Primary Health Care: an interim strategy for disease control in developing countries. *N Engl J Med*; 301:967-974

highlighted: the digital and technological revolution, the greater (worldwide) demand for accountability, etc. These changes cannot but further challenge PHC proponents.

Despite the obstacles encountered and challenges ahead, PHC remains a very relevant policy worldwide - hence ITM's aspiration to organise this Symposium.

Two current priorities make PHC even more important right now—Universal Health Coverage (UHC), a top priority for Dr Tedros, current Director-General of the World Health Organization, and the Sustainable Development Goals (SDG). The SDG – many related to health other than the SDG3 alone, are, in a way, the natural 'successor' of the multi-sectoral and holistic thinking of Alma Ata. "The health-related SDGs cannot be achieved through reliance on disease-specific achievements or financial reforms alone. It requires a strong commitment to creating people-centred, high-quality health services."<sup>5</sup> Revisiting the people and community centred ethos of Alma Ata might help UHC overcome the challenges it faces and achieve its true promise.<sup>6</sup>

PHC is to be the backbone of national and local health systems. International evidence indicates that strong primary care is associated with better population health; lower rates of unnecessary hospitalizations; and relatively less socioeconomic inequality.<sup>7 8</sup> PHC can meet 80-90% of people's health needs over the course of their life. A health system with PHC as its core can deliver better health outcomes, efficiency and improved quality of care compared to other models.<sup>9</sup> PHC is a sound strategy in a health systems strengthening perspective, and therefore essential in advancing towards UHC and the SDGs.

Without nostalgia for the past, the red thread in this Symposium will be to analyse future trends and opportunities in terms of implementation of PHC-inspired policies aiming for "Health for All" in a changed and changing context.

The Symposium will be organised in Antwerp, at the Institute of Tropical Medicine, on Tuesday 23 October. It will gather an audience of academia, public health students, health professionals, civil society organisations, bilateral aid organisations, and institutional partners of ITM from the South.

Organising committee: Bart Criel ([bcriel@itg.be](mailto:bcriel@itg.be)) and Valeria Campos da Silveira ([vcdasilveira@itg.be](mailto:vcdasilveira@itg.be)), Department of Public Health, ITM Antwerp

The Symposium will be followed later in the year by an inter-ministerial conference jointly organized by the Belgian federal authorities of Public Health and Development Cooperation. The aim of this event is to bring the renewed declaration on Primary Health Care of the World Health Organization to the attention of the Belgian public in general, and Belgian health professionals in particular.

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<sup>5</sup> WHO, Organisation for Economic Co-operation and Development, and The World Bank (2018). Delivering quality health services: a global imperative for universal health coverage. Geneva, Switzerland

<sup>6</sup> Pandey K R (2018) From health for all to universal health coverage: Alma Ata is still relevant. *Globalization and Health* 14:62

<sup>7</sup> Starfield B, Shi L and Macinko J (2005). Contribution of Primary Care to Health Systems and Health. *The Milbank Quarterly*, Vol. 83, N°3, pp. 457-502

<sup>8</sup> Kringos, D.S., Boerma, W., Zee, J. van der, Groenewegen, P. (2013) Europe's strong primary care systems are linked to better population health but also to higher health spending. *Health Affairs*: 32(4), 686-694

<sup>9</sup> <http://www.who.int/primary-health/en/>