

# WONCANews

An International Forum for Family Doctors



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World Organization of Family Doctors  
[www.GlobalFamilyDoctor.com](http://www.GlobalFamilyDoctor.com)

**Wonca President**  
 Prof Richard Roberts  
 Department of Family Medicine  
 University of Wisconsin  
 School of Medicine & Public Health  
 1100 Delaplaine Court  
 Madison WI 53715 USA  
 Ph +1 608 263 3598  
 +1 608 424 3384 (clinic)  
 Fax +1 608 2 63 5813 (office) /  
 +1 608 424 6353 (clinic)  
 Email: [President@wonca.net](mailto:President@wonca.net)

**Wonca Chief Executive Officer**  
 Dr Garth Manning (from October 3)

**Wonca World Secretariat**  
 World Organization of Family Doctors  
 12A-05 Chartered Square Building,  
 152 North Sathon Road,  
 Silom, Bangrak, Bangkok 10500, THAILAND  
 Phone: +66 2 637 9010  
 Fax: +66 2 637 9011  
 Email: [admin@wonca.net](mailto:admin@wonca.net)

**President-Elect**  
 Prof Michael Kidd (Australia)

**Immediate Past President**  
 Prof Chris van Weel (Netherlands)

**Executive Member at Large & Honorary Treasurer**  
 Dr Francine Lemire (Canada)

**Executive Member at Large & WHO Liaison Person**  
 Dr Iona Heath (United Kingdom)

**Executive Member at Large**  
 Dr Wesley Schmidt (Paraguay)

**Regional President, Wonca Africa**  
 Dr Sylvester Tola Osinowo (Nigeria)

**Regional President, Wonca Asia Pacific**  
 Dr Donald K T Li (Hong Kong)

**Regional President, Wonca East Mediterranean**  
 Prof Nabil Al Kurashi (Saudi Arabia)

**Regional President, Wonca Europe**  
 Dr Anthony Mathie (United Kingdom)

**Regional President, Wonca Iberoamericana-CIMF**  
 Prof Liliana Arias-Castillo (Colombia)

**Regional President, Wonca North America**  
 Dr Dan Ostergaard (USA)

**Regional President, Wonca South Asia**  
 Dr P Wijegoonewardene (Sri Lanka)

**Editor, Wonca News & Editorial Office**  
 Dr Karen M Flegg  
 PO Box 6023  
 Griffith ACT 2603 Australia  
 Email [editor@wonca.net](mailto:editor@wonca.net)



## From the WONCA President: Turkish delights

Lying on my hotel bed, the view was stunning through the window that framed the Bosphorus Bridge. The soft lights of the low-rise buildings along both shores outlined the glassy black water that pulled my gaze to the bridge. My eyes refused to close, even though they were aching for sleep after 23 hours in transit followed by a late night dinner with my Turkish hosts. The dancing shapes of the violet-blue-white lights of the bridge were magical as they shimmered into the dark night sky and onto the black water. Months later, I continue to think back to that vista – it soothed me into deep slumber as I reflected on the wondrous place known as Istanbul.



The Bosphorus Bridge at night, Istanbul, Turkey

Countless others have used the metaphor of a bridge to describe Istanbul. Yet, Istanbul is more than a peninsula where two continents connect. It is more than an inland passage linking the Black Sea and the Sea of Marmara. It is more than an exotic trove of Roman, Byzantine, Latin, and Ottoman antiquities. It is a complex mosaic with cultures layered onto each other, rather than an historical chalkboard that erases one empire when another replaces it. Mindful of its past, Istanbul is also very much about the present and the future. Its young demographics, expanding population (about 14 million), and vibrant economy position it as one of the great cities of the world. Against this backdrop of old world tradition and new world vitality, Family Medicine is beginning to find its place in the Turkish health care system.

Family Medicine is a relatively nascent specialty in Turkey. With a population of approximately 73 million, Turkey has about 111,000 doctors in active practice: 32,000 are general medical doctors (“practitioners”), 58,000 are specialists (2500 of whom are qualified family doctors) and 21,000 are residents in specialist training. There are 74 Turkish medical schools, with 16 private and 58 public. Collectively, they graduate 4800 new doctors each year. Each year, about 5% of

medical school graduates choose to train in Family Medicine, which is a three-year program following the six years of medical school. The average pay of a Turkish family doctor is about USD 1500 per month. There are several distinct types of hospitals in Turkey: 61 University hospitals, 61 government hospitals with training programs, and 645 district hospitals without trainees. Turkish family physicians, especially in rural areas, are more likely to be involved with a hospital than family doctors in other parts of Europe.

Two important organizations represent Family Medicine in Turkey, TAHUD and TAHEV. TAHUD ([Türkiye Aile Hekimleri Uzmanlık Derneği](#) or Turkish Association of Family Physicians) is the national college that provides advocacy, education, and qualification of practicing family physicians. TAHUD has about 1000 members. TAHEV (Türkiye Aile Hekimliği Vakfı or Turkish Foundation of Family Medicine) is a foundation that brings together a number of key stakeholders in primary care and sponsors educational and other initiatives to promote primary care in Turkey. Both organizations play important roles in supporting family doctors and promoting primary care.

During my week in Turkey, I delivered plenary lectures at the 2nd Acibadem Family Medicine Symposium at Acibadem University in Istanbul and at the annual Family Medicine Fall School (Aile Hekimliği Güz Okulu) co-sponsored by TAHEV and TAHUD in Antalya. My travel to Turkey also gave me a chance to catch up with my good friend, Prof Chris van Weel, Immediate Past President of WONCA. Chris and I had the honor to be the visiting faculty for these important educational programs.



Prof Chris van Weel, Mehmet Sargin, Richard Roberts, and Resat Dabak at the Diabetes Outpatient Clinic of Kartal Lutfi Kırdar Hospital in Istanbul





Audience at Family Medicine Fall School, Antalya, Turkey



Poster walk at Family Medicine Fall School co-sponsored by TAHEV and TAHUD



Audience at the 2nd Acibadem Family Medicine Symposium

In addition to the Symposium, my one day in Istanbul included a whirlwind tour of several health centers, which were associated with training



Dr Ufuk Cagman and Prof Richard Roberts in the family health center in Istanbul.

hospitals. At one of the hospitals, I toured the diabetes clinic, which was led by a family doctor, Dr Mehmet Sargin. I also visited a typical community-based primary health care center known as a “family health center” (Aile Sağlığı Merkezi) which was linked to the Ministry of Health and was not connected to any hospital. Dr Senem Aslan Tangürek is a qualified family physician; she has been at the center for seven years. The other doctor is Dr Ufuk Çağman; he is a practitioner, or general doctor, who has been at the center for two years and who hopes to train in pediatric surgery. They provide person-centered, community-responsive care to entire families, from newborns to the aged.

Although, I was not able to visit any practices outside Istanbul, the Family Medicine Fall School



in Antalya provided a wonderful opportunity to Prof Richard Roberts and Ankara Provincial Health Director Mustafa Aksoy in Antalya

speak with many family physicians from across Turkey. I enjoyed learning from them about their views of practice, Family Medicine, and the future of health care in Turkey. Antalya offered additional special pleasures – a beautiful seacoast, bright sunshine, and all inclusive resorts with great food and facilities.

My impressions after my brief visit are that there are similarities and differences between family physicians in Turkey and those in Europe and the surrounding region. Similarities include that family doctors are generally in small practices (1-4 physicians). In the cities, they are unlikely to attend births or patients in hospital, although in rural communities they more often provide these services. Many of the primary care practices are staffed by practitioners (general doctors) as there is a significant shortage of qualified family doctors.

Some differences are that Turkish family doctors and their practices appear to be more frequently and closely linked to hospitals, even though they may not be active in inpatient care. Compared to other family doctors in the region, Turkish family physicians look to be more involved with the care of entire families and all age groups.

My overall impression is that Family Medicine is on the rise in Turkey, with greater awareness of the need for qualified family doctors and an upsurge in the status of the discipline. Among the family doctors I met, there seemed to be a general sense of optimism and better days ahead. There was a feeling of shared purpose, a desire to do better, and a spirit of camaraderie and cohesion. These gains have not been accidental. They reflect the hard work of the leaders of TAHUD and TAHEV, the efforts of academic family physicians, and the commitment of practicing family doctors to improve Family Medicine, primary care, and health care in Turkey.

At the end of my week, I was happy to return home, as I always am, but I was sad to leave Turkey. The warm hospitality and weather, the energy and enthusiasm of the family physicians, and the growing importance of Family Medicine made for a most enjoyable and exciting stay. And I did not even have much of a chance to take in the tourist sites. All the better reason to plan for a return visit, watch bridge lights dancing on sky and water, and savor the Turkish delights.

I would like to offer a special thanks to Prof Pinar Topsever, who was an excellent host and who assisted with this column, including photographs and translation to Turkish.

Professor Richard Roberts

President

World Organization of Family Doctors



## From the CEO's desk: New year, new challenges

Greetings again from Bangkok. December has been a much more settled and routine month, as we get to grips with the various administrative and logistics aspects of the WONCA Secretariat, but my special thanks go to my Chief Admin Officer, Dr Nongluck, who has been a massive strength and support throughout.



Chief Admin Officer, Nongluck, can be emailed on [manager@wonca.net](mailto:manager@wonca.net)

We have had a steady stream of Direct member applications, which is great, and a fantastic way to individually support the work of WONCA. We expect many more applications leading up to the early bird conference registration deadline of February 19, for Prague – Direct Members get a discount on conference fees, which makes it very worthwhile.

More about joining as a WONCA Direct Member <http://www.globalfamilydoctor.com/AboutWONCA/Membership1.aspx>

January is a busy time for the Secretariat as we prepare and send out the annual invoices to our Member Organizations. We have also used this opportunity to try to get up to date contact information from the organizations so that we can maintain better contact with them, but it is a constant struggle. We urge any organisation which appoints any new officer to let us know so that we can amend our records accordingly.

Of course the next six months will be especially busy, leading up to the World Council in June. As this will be the current Secretariat's first World Council we are only too aware of how much work has to be done, but we have worked out our time lines and hope to be well prepared by June.

On a final note, we have already welcomed a couple of WONCA visitors to our new Secretariat offices, and would welcome anyone visiting Bangkok to make contact and come in and see us. The February Core Executive meeting will be in Bangkok so we look forward to welcoming our President, Rich Roberts, President-elect Michael Kidd and Treasurer Francine Lemire to the new HQ.

From all of us in the Secretariat we wish you all a very Happy New Year and look forward to meeting many of you in Prague.

Garth Manning  
CEO

### **New Secretariat Contact details**

CEO: [ceo@wonca.net](mailto:ceo@wonca.net)  
 Chief Admin Officer: [manager@wonca.net](mailto:manager@wonca.net)  
 Admin: [admin@wonca.net](mailto:admin@wonca.net)  
 Accounts: [accounts@wonca.net](mailto:accounts@wonca.net)

Our address:  
 12A-05 Chartered Square Building,  
 152 North Sathon Road,  
 Silom, Bangrak,  
 Bangkok 10500,  
 Thailand  
 Phone: +66 2 637 9010  
 Fax: +66 2 637 9011

### **African family doctors' forum created**

African family doctors now have their own discussion area in the WONCA discussion forum.

WONCA Africa Executive recently met in Victoria Falls, Zimbabwe. Dr Shabir Moosa was appointed as chair of the Communications Sub-Committee. He has supported the development of this discussion area for African family doctors (and other interested family doctors) to exchange views and comment on issues of importance in the WONCA Africa region.

To join in the discussion login to the WONCA forum area

[www.globalfamilydoctor.com/WONCAForum](http://www.globalfamilydoctor.com/WONCAForum)

If you have not yet registered for the WONCA forum you will need to register first

[www.globalfamilydoctor.com/register](http://www.globalfamilydoctor.com/register)

## FEATURE STORIES

### Unveiling the speakers for WONCA Prague 2013

**Dr Margaret Chan:** World Health Organization (WHO) Director-General

**Prof Michael Kidd:** WONCA President Elect

**Prof Amanda Howe:** Honorary Secretary Royal College of General Practitioners (RCGP)

**Dr Karen Kinder:** Executive Director of ACG International

**Prof Igor Švab:** Immediate Past President of WONCA Europe region

**Prof Jan Škrha:** Vice-rector Charles University, Prague - the local expert on diabetes

#### Dr Margaret Chan



Dr Margaret Chan will give a lecture entitled "*Family doctors in an era of inequality: from unsung heroes to rising stars*".

Dr Margaret Chan, from the People's Republic of China, obtained her medical degree from the University of Western Ontario in Canada.

She joined the Hong Kong Department of Health in 1978, where her career in public health began.

In 1994, Dr Chan was appointed Director of Health of Hong Kong. In her nine-year tenure as director, she launched new services to prevent the spread of disease and promote better health. She also introduced new initiatives to improve communicable disease surveillance and response, enhance training for public health professionals, and establish better local and international collaboration. She effectively managed outbreaks of avian influenza and of severe acute respiratory syndrome (SARS).

In 2003, Dr Chan joined WHO as Director of the Department for Protection of the Human Environment. In June 2005, she was appointed Director, Communicable Diseases Surveillance and Response as well as Representative of the Director-General for Pandemic Influenza. In September 2005, she was named Assistant Director-General for Communicable Diseases.

Dr Chan was elected to the post of Director-General on 9 November 2006. The Assembly appointed Dr Chan for a second five-year term at its sixty-fifth session in May 2012. Dr Chan's new term will begin on 1 July 2012 and continue until 30 June 2017.

#### Professor Michael Kidd



Professor Michael Kidd is the President-elect of the World Organization of Family Doctors (WONCA) and will take over as World President in Prague. He will speak in Prague on *Family Medicine and WONCA: the challenges ahead*

Michael has been a member of the WONCA executive since 2004. He was an elected Member-at-Large of WONCA from 2004-2010 and served as Honorary Treasurer from 2007-2010. He was the WONCA liaison person with the World Health Organization from 2005-2010 and convened the WONCA Education Working Party from 2006-2010. He was a member of the WONCA Asia Pacific Regional Council from 2004-2007. He was the inaugural convenor of the WONCA Informatics Working Party from 1995-2007.

He is now the Executive Dean of the Faculty of Health Sciences (including the Schools of Medicine and Nursing and Midwifery) at Flinders University based in Adelaide and with clinical schools and research centres in South Australia, the Northern Territory and Western Victoria. He also works part-time as a general practitioner in South Australia and the Northern Territory with special interests in the care of people with HIV and Indigenous Health.

Michael's research and education interests including primary health care and general practice, e-health, health policy, medical education, safety and quality in primary care, and the primary care management of HIV, hepatitis C and sexually transmissible infections.

For more about Prof Michael Kidd

<http://www.globalfamilydoctor.com/AboutWONCA/ExecutiveCommittee/President-Elect.aspx>

**Professor Amanda Howe**



Professor Amanda Howe MD FRCGP FAcadMEd was elected RCGP Honorary Secretary in 2009. She practises at the Bowthorpe Medical Centre in Norwich, England and has been Professor of Primary Care at the University

of East Anglia since 2001. "I wanted to be a GP when I was a medical student, despite influences from tutors to do otherwise", says Professor Howe. "I'm fascinated by the role that the GP consultation can play in helping patients make sense of their lives, and overcome physical and mental adversity."

Amanda has been deeply involved with WONCA since 2000, when she facilitated a workshop for their Working Party on Women and Family Medicine. She is on their Executive, chaired the group from 2007-2009, and hosted an international meeting at UEA in 2009. She now serves on the newly created Equity Committee, is a member of WONCA Europe's Bylaws Committee, and (also as part of her role as RCGP Honorary Secretary), often attends WONCA conferences in Europe and around the world to contribute relevant papers and promote the development of family medicine.

For more about Prof Amanda Howe

<http://www.globalfamilydoctor.com/News/ProfessorAmandaHoweRCGPHonSecretarytospeakinPrague.aspx>

*Doctors' health and wellbeing*

Family medicine is both rewarding and challenging. Family medicine practitioners are some of the best doctors in the world, working heroic hours and spreading their skills across the needs of all patients, young and old – often also being teachers, researchers, and leaders of their communities and health services.

Our own health and wellbeing is crucial to dealing with the demands of our professional lives, but we know that doctors allow themselves to override boundaries which we would recommend to our patients – whether alcohol, sleep deprivation, or working when unwell. The statistics for doctors' health problems are very worrying – yet some doctors seem able to be highly resilient, and to be better at self care and stress management, while others underperform, go off sick, and are lost to the service which has invested in their training.

This talk, given by Professor Amanda Howe who is a UK academic family medicine practitioner and Honorary Secretary of the RCGP, will: examine the facts of doctors' ill health; look at the systems factors which contribute; and look in detail at what a sound preventive strategy might look like.

Prof Howe is inviting contributions from WONCA members via the new WONCA website (you need to join the WONCA forum to add your story [www.globalfamilydoctor.com/register](http://www.globalfamilydoctor.com/register)). So please consider adding to the theme – Amanda is encouraging member engagement in everything she does!

Professor Amanda Howe

[honsec@rcgp.org.uk](mailto:honsec@rcgp.org.uk)

**Dr Karen Kinder**



Dr Karen Kinder PhD MBA, is an associate faculty member of the Health Policy and Management Department at Johns Hopkins University, Bloomberg School of Public Health where she received her doctorate. Through both educational and professional experience, Dr Kinder has accumulated in-depth knowledge of health care

systems worldwide.

With an emphasis on promoting the importance of primary health care delivery, Dr Kinder's research interests center on how countries can improve the efficiency and effectiveness of their primary health care systems. Specific areas of expertise focus on how health information technology can be applied to improve the delivery of primary care, the impact of the financing system and the organization of the delivery of care on a population's access to quality health care, the measurement of morbidity within that population and the need for risk adjustment in financial, clinical and managerial decisions as well as the effective coordination of primary and specialty care. She has contributed her expertise to numerous international projects in developed and transitional countries.

In her current capacity as Executive Director of ACG International, Dr Kinder oversees the application of the Johns Hopkins ACG® System, the most widely used population based case-mix system in the world and supports users in its implementation.

*Improving Coordination between Primary and Secondary Health Care through Information*



Family Doctors are under pressure due to falling practice incomes, diminishing continuity of care within primary care and a fragmented healthcare environment. Meanwhile populations are ageing with increasingly complex patients with multi-morbidity who could be better cared for within the community.

Dr Kinder's keynote will address the impact of information, gained through routinely collected data, on improving coordination and continuity of care across the spectrum of the health care system. Dr Kinder will speak on the existing scientific evidence regarding:

- the differentiation between primary and specialty care, and issues surrounding coordination and continuity,
- the importance of delivering care in the appropriate setting based on patients' morbidity profile,
- the impact of multi-morbidity on the delivery of care, including the identification of patients at risk of poor coordination.
- strategies to implement more appropriate interfaces between primary and specialty care within their organization.

**Prof Igor Švab**



More than thirty years ago I started working as a family doctor in a rural practice. Even if I still practice, my main job now is the one of a professor of family medicine. I enjoy both: to be a family doctor and to be a teacher. I consider myself a lucky man, doing the best job in the world and teaching about it.

*Do we dare to be different?*

My keynote in Prague is going to address the challenge of family medicine to keep its values and the dilemmas we are facing when we try to maintain them. I hope you will find it interesting.

I will start from the statement that family medicine has already been successful in identifying its principles and characteristics. A lot of time and effort has been put into this exercise, starting from the first Leeuwenhorst group in Europe. Although it is important that the international organisation of family medicine periodically checks whether the definition is still valid, it is much more important to see how the principles are applied in practice.

My thesis is that we as a discipline must be ambitious and brave. This implies that we must often take a different path from other disciplines when we address the issues of policy, research and education. By doing this we risk that our positions will not always be understood or accepted. But the other option is much worse: when we try to be as similar as possible to other disciplines in order to comply with their ways of thinking, we lose our identity. If we lose this, we are no longer needed as a profession, because we can be replaced by others.



**Prof Jan Škrha**

Prof Jan Škrha MD, DSc was born in 1954 in Prague. After graduation at Charles University, Medical Faculty (1979, MD) he has been working at Department of Endocrinology and Metabolism in the field of diabetes mellitus.

He published more than 250 articles, participated in about 200 congresses, symposia and meetings and received several awards for scientific work in diabetology. He has been a member in scientific organizations: Czech Diabetes Society (Secretary, President and Vice-chairman), Czech Medical Association (Vice-President), European Association for the Study of Diabetes (Secretary of the Postgraduate Education Subcommittee, Honorary Treasurer), and others. He represents Czech Medical Association in the UEMS where is now as Vice-President. He is Scientific Secretary of the Accreditation Committees for Postgraduate education by Ministry of Health. He is Vice-Rector of Charles University.

*Diabetes = global pandemic*

In this lecture he will focus on present and future problems of diabetes mellitus, especially on early diagnosis, treatment and prevention.



## REGIONAL NEWS

### GPAN CONFERENCE 2012



The national conference of General Practitioners' Association of Nepal (GPAN) Conference was held in the beautiful city of Dharan, Nepal, from November 25–26, organized by General Practitioners' Association of Nepal (GPAN) and Department of General Practice and Emergency Medicine, BP Koirala Institute of Health Science, Dharan. The conference was mostly about scaling up capacity building in general practice and primary health in Nepal.



Prof Kanu Gopal Bala, Bangladesh and Prof Pratap Prasad

There were over 300 delegates from different parts of the country and international guests from Bangladesh, India and Australia. Prof Balbhadra Prasad Das, Vice chancellor of BP Koirala Institute of Health Sciences with President of GPAN Prof Dr Pratap Narayan Prasad, inaugurated the conference. Prof Pratap Prasad delivered the welcome speech in the inauguration ceremony and he also spoke about current development in the field of general practice, in Nepal. The inauguration ceremony was completed by delivering vote of thanks by Dr Pramendra Prasad Gupta, organizing secretary of conference.



Photo: (l to r) Dr Raman Kumar (from India), Dr Pramendra Prasad Gupta, and Prof Pratap Prasad.

The theme of the conference was *Role of General Practitioners in Primary health and emergency care-present and future*. The keynote speaker, Prof Kanu Gopal Bala, from Bangladesh, spoke on the theme. Dr Gunaraj Lohani, Deputy Director General, Ministry of Health Sciences, who was the national guest speaker, spoke about advocacy of general practitioners in Nepal.

The Nepal Government has announced that the higher authority post of district hospitals and primary care centers, will be given to general practitioners, in 23 districts of Nepal. It has also been announced to open a Department of General Practice and Emergency Medicine in every medical college of Nepal and to be added in the curriculum of undergraduate students soon.

Other guest speakers spoke about the present condition of family medicine in their countries. There were total 25 oral paper presentation and eight poster presentations. Each paper was of different diversities from the field of general practice and reflects the theme of the conference.

Dr Pramendra Prasad Gupta delivered the last plenary about the Spice Route Movement (the WONCA South Asia Region group for new and future family doctors) with Dr Raman Kumar.

The evening of November 25 was packed with a cultural programme, a welcome cocktail and a conference banquet.

Ultimately it was a memorable GPAN conference in Nepal.

*Prof Dr Pratap Narayan Prasad & Dr Pramendra Prasad Gupta*

*President & General Secretary*

*GPAN Organising Committee*

## AAFP Global Health Workshop gains more international interest

The American Academy of Family Physicians Center for International Health Initiatives (AAFP-CIHI) held its annual Family Medicine Global Health Workshop, in Minneapolis, September 6-8. The workshop demonstrated a constantly growing interest in global health among AAFP members: this year's attendance increased by about 25%; the number of abstract submissions grew from 103 last year to 155 this year; students and residents' participation noticeably increased as well. With the thematic byline *Family Medicine: Educating and Caring for the World*, the workshop gathered together family medicine educators, practicing family physicians, family medicine residents, medical students and health allied professionals with an undivided interest in global health. This year's workshop again served as a forum for AAFP members and international participants to elaborate and reflect upon the growing importance of family medicine and primary care as foundational to global health.

Dr Dan Ostergaard, AAFP Vice President and WONCA North America Region President, in his welcoming remarks, pointed out that we in family medicine and other colleagues in primary care have multiple opportunities to improve care for the people of the world. It is our responsibility, he said, to educate each other and share our resources to do so. Dr Ostergaard thanked the CIHI Advisory Board and workshop educational chairs, Drs Cynthia Haq, Edward Shahady and Brian Jack for their enthusiasm, energy and professional input. He also extended his gratitude to the AAFP Foundation that has been supporting this important CME activity since 2005.



Dr Dan Ostergaard greeting the workshop participants at the opening session.

The workshop started with the key-note address from Prof Richard Roberts, WONCA President, who emphasized the

fact that the nature of global health was changing shifting from communicable to chronic disease, from

vertical programs to horizontal systems. These changes, said Prof Roberts, create extraordinary opportunities and challenges for primary care.

The workshop has been consistent in its growth and has become an educational and networking event of the year for family physicians and family medicine educators in the field of global health.

This is the event that the AAFP has designed to be a connecting hub for globally-minded members to communicate, interact, network and learn from each other.

It was encouraging to hear that all of the participants found this continuing medical education activity valuable to AAFP members and their professional development. In their evaluations, many of the participants praised the workshop for its educational depth and variety, expertise of presenters and collegial atmosphere. The range of presentations covered topics that met interests of beginners in global health as well as seasoned international medicine experts. Those who are just making their first steps in their global health career realized that like any other worthwhile activity, "getting started" could be the most challenging step. Through specially designed workshops, they were provided with a "get started" framework to develop a vision and capacity for their global health activities and make them an integral part of their overall professional and personal life.

Learning from others through formal lectures and informal interactions has always been the direction we have taken at the workshop and especially when "others" are global health experts and educators with 25-30 years of successful experience in training and guiding young doctors to provide health care in a variety of international and intercultural settings. One of the sessions presented achievements and challenges of the US nation's oldest family medicine residency track in global health. It generated an interactive discussion of critical principles and lessons learned in developing and maintaining successful programs at home and abroad.



Dr Bruce Dahlman, a family physician from Minnesota who worked more than 15 years in Africa shares his observations with Prof Rich Roberts, WONCA President.

Participants enjoyed plenty of opportunities to meet their peers – physicians, residents, faculty and medical students with similar goals and interests, and learn from each other about what is going on around the world and how ideas and



projects can be adapted or replicated in other countries and regions. The workshop program included the Networking Reception with Poster Presentations, “Meet the Global Health Mentor” Student/Resident Reception, facilitated discussion and networking groups on Africa and China and common interest lunches where participants could reconnect with old friends/colleagues, meet new ones, share and network.



Lauren Brown, a medical student from California, talks about her research project with Dr Sam Matheny, Assistant Provost for Global Health Initiatives, University of Kentucky College of Medicine.

One of the educational goals of the workshop was to broaden participants’ clinical knowledge about diseases rarely encountered in their home country. The workshop encouraged submission of abstracts on global clinical issues and it resulted in highly evaluated talks on parasitology (Part I – Gastrointestinal, Part II – Tissue dwelling), tropical and HIV dermatology, malaria, global nutritional diseases, tropical medicine case studies and leprosy. There were numerous recommendations from the participants to organize a preconference on clinical topics which the workshop education committee will seriously consider for the 2013 AAFP Global Health Workshop in Baltimore.

It would take a long list to enlist all presentations made at the workshop. There were six plenary sessions, 36 breakout sessions, 48 peer sessions and 43 poster presentations. If interested, most of them can be accessed through the Family Medicine Digital Resource Library ([www.fmdrl.org](http://www.fmdrl.org)) or the AAFP International Activities Office ([aivanov@aafp.org](mailto:aivanov@aafp.org)).

**International participants**

The 2012 workshop continued the initiative to increase the number of workshop attendees from resource-constrained countries started in 2010 and 2011. Interaction with international colleagues, especially from the countries and regions where AAFP members provide technical assistance in establishing and improving primary care, family medicine, human resources for health and medical education, was one of the highlights

of the participant’s experience in Minneapolis. The workshop was attended by health professionals and family physicians from Albania, Brazil, Canada, Ecuador, Ethiopia, Iraq, Japan, Malawi, Nigeria, Pakistan and Vietnam. Such broad international participation contributed to the educational and networking value of the workshop and enhanced participants’ vision and understanding of what really works in global health.

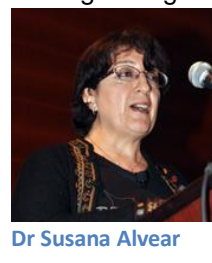


Dr Al-Kazzaz

The workshop program received a tremendous boost from presentations from the representatives from all of the above countries. Three international participants were plenary speakers. Dr Hassan H

B Al Kazzaz, Director General-Public Health Affairs from the Iraqi Ministry of Health, made a presentation on the role of family medicine in the quality and accessibility of health services, especially at the level of first contact with the health care system.

Dr Susan Alvear, a family physician from Ecuador, in her plenary address raised important issues of ethics in global health. Her message strongly suggested that ethics can not only guide, but strengthen our program design, partnerships and global health efforts, in general. Development of personal and organizational ethics unifies the efforts that family physicians and teams are making throughout the world to address global health challenges, encourage engagement, advocacy and action.



Dr Susana Alvear

Dr Pham Le An, Director of the Family Medicine Center, Ho Chi Minh City University of Medicine and Pharmacy, presented a remarkable story of the family medicine

development in Vietnam. This

story stands out as an example of persistency and



Dr Pham Le An

collaboration between Vietnamese health authorities and US medical education centers, specifically Boston University and Maine Medical Center. It started in 1997 with a primary care needs assessment implemented by Drs Alain Montegut and Steve Cummings from the Division

of International Health Improvement, Maine Medical Center at the request of the Ministry of Health of Vietnam. Based on their three-year study, they made a recommendation to the Vietnamese MOH to create educational programs



that will lead to a specialty that will be the cornerstone for the delivery of primary health care to the people of Vietnam. This 15-year collaborative effort evolved from building initial relationships to the declaration of family medicine as an official specialty to the development family medicine residency programs in universities across the country to the advocacy for national policy to promote family medicine in primary care.

Other international presentations covered such topics as developing family medicine as an academic discipline in Malawi (Dr Luckson Dullie), progress and challenges of family medicine in Albania (Dr Valbona Ijazzi), role of family physicians in providing continuity of care in Fukushima, Japan, a year after the Great East

Japan Earthquake (Drs Keitaro Harasawa and Tadao Okada), Brazilian “paradox” (Dr Aldo Ciancio), a study on frequency and severity of depression and its contributing factors among mothers of children with cancer in a teaching hospital in Karachi, Pakistan (Dr Marian Ghufuran).

The workshop was made possible thanks to the financial support from the AAFP Foundation.

The 2013 Family Medicine Global Health Workshop will be held in Baltimore, Maryland, USA, October 10-12, 2013. For information about the workshop registration, hotel accommodation and abstract submission please go to [www.aafp.org/intl/workshop](http://www.aafp.org/intl/workshop) or contact Rebecca Janssen, Senior Program Coordinator, at [rjanssen@aafp.org](mailto:rjanssen@aafp.org)

## WONCA North America meets during the AAFP Assembly in Philadelphia

WONCA North America Region organizations – American Academy of Family Physicians (AAFP), Society of Teachers of Family Medicine (STFM), College of Family Physicians of Canada (CFPC), Caribbean College of Family Physicians (CCFP) (full members), American Board of Family Medicine (ABFM) and Association of Departments of Family Medicine (ADFM) (associate members) – got together for their annual meeting during the AAFP Scientific Assembly held in Philadelphia, Pennsylvania, October 17-21, 2012.

The meeting was moderated by Dr Dan Ostergaard, AAFP Vice President and WONCA North America President. The agenda included such items as President’s report to WONCA Executive, WONCA in transition, nominations for standing committees and WONCA awards (WONCA Fellowship, Honorary Direct Life Membership, Foundation Award and 5 Star Doctor) and preparation for the WONCA 2013 World Conference in Prague.

Dr Ostergaard announced that the CFPC had nominated Dr Ruth Wilson to be the next WONCA North America Regional President effective after the completion of the WONCA 2013 World Conference in Prague. In advance of the meeting in Philadelphia, Dr Ostergaard had communicated with the Canadian College to come up with the nomination. Dr Ruth Wilson is a former CFPC President. Dr Wilson’s nomination was accepted with no objections.



Participants of the meeting (left to right): Dr Perry Pugno, AAFP Vice President for Education, Dr Francine Lemire, CFPC Vice President (and WONCA Member at Large), and Dr Sandy Buchman, CFPC President.

In concluding the meeting, each member organization reported on their recent and coming international projects and initiatives that covered such areas as ACGME-International programs in Singapore and plans to start similar programs in Omar, Qatar and United Arab Emirates (ABFM); a CFPC international meeting on Global Health to identify the specific needs of family medicine departments to build capacity in family medicine in and mid income countries; an annual CCFP meeting; collaboration between STFM and CFPC in developing an assessment process for residency programs; and AAFP’s facilitation efforts to assist members in their international experiences.

## AAFP members discuss international issues in Philadelphia

The AAFP International Networking Meeting was one of the special events during the AAFP Scientific Assembly, in Philadelphia. It was organized by the International Activities Office to provide AAFP members interested in global health with an extra opportunity to share, network and develop connections that potentially would lead to opportunities for individual physicians, educators or institutions to collaborate.

The underlying theme of the meeting was “*who is doing what, where*”. About 80 members and international guests participated in the event. Dr Ostergaard, AAFP Vice President for Health of the Public and Interprofessional Activities, facilitated the networking by introducing participants and giving them a chance to tell about their projects and programs in different parts of the world.



Dr Bohumil Seifert, Chair of the Organizing Committee of WONCA 2013 World Conference in Prague, and Dr Sylvester Tola Osinowo, WONCA Africa Regional President, were among international assembly participants who found time in their busy schedule to

attend the International Networking meeting.

WONCA 2013 Prague World conference was given a complimentary in-house booth in the Assembly’s Exposition Hall where Dr Seifert and his staff disseminated information about the upcoming triennial conference in Prague: its scientific program, invited speakers, registration and abstract submission. This live CME activity has been reviewed and is acceptable for up to

20.25 prescribed credit(s) by the American Academy of Family Physicians.

One of the highlights of the meeting was the AAFP Foundation’s announcement about launching a new humanitarian program, *Family Medicine Cares – International*. Dr Mary Jo Welker, AAFP Foundation President, informed participants that the program will be implemented in Haiti in collaboration with Heart to Heart International, a US-based non-profit disaster relief organization. The first group of volunteers – physicians, medical educators and service project non-medical volunteers – is scheduled to go to Haiti, in February 2013.



Dr Tessa Robinson, of the St. Lucia hospital telling the participants of their collaboration with Dr Lisa Fleischer (sitting) from Montana

The meeting was sponsored by Welch Allyn, a US manufacturer of diagnostic equipment and a long-standing supporter of AAFP’s global humanitarian projects.



Dr Mary Jo Welker (first on the right) with colleagues from Heart to Heart International and AAFP members: (sitting right to left) Dr Franz Codio, Haiti Project Medical Director, Dr Gary Morsch, Heart to Heart President, Mr. Andre Butler, Heart to Heart

## WORKING PARTY NEWS

### Activities of the WONCA Working Party on the Environment

#### Prague presence

The next WONCA World Conference will be in Prague June 2013, and there are a number of WONCA working party on the environment activities planned.

We will hold our working party meeting on the morning of June 25 .

We have been pre-approved for two workshops: one on climate change and health which Grant Blashki and I will lead; the second will be a more general discussion on environmental health and the family doctor, what are we doing; what should we be doing?

If you have something you would like to contribute, please contact Alan Abelsohn, chair of the committee.

#### E-book

We are proposing an eBook: *Family doctors in the field: stories from environmental family doctors from across the globe.*

The idea is to get all of you, and anyone else you know who is active in environmental issues in any way, to contribute a short (1-2 page) "story" about yourself. Grant Blashki and I are preparing a formal proposal of the book project to WONCA executive. The idea is to strengthen the WONCA Working Party on the Environment, and support individual docs in the field. If you are interested in contributing, please let us know.

#### Climate and Health petition: please consider signing

There is an active health lobby at the Doha round of the UNFCCC climate change talks. Please consider signing this petition of support via the websites below:

<http://dohadeclaration.weebly.com/>

<https://www.change.org/en-GB/petitions/governments-and-negotiators-including-health-and-wellbeing-in-climate-discussions-and-policies-is-vital>



Alan Abelsohn  
[alan.abelsohn@gmail.com](mailto:alan.abelsohn@gmail.com)

## MEMBER ORGANISATION NEWS

### Dr Rob Dijkstra appointed as President of the Dutch College of General Practitioners

The new president, Rob Dijkstra, follows Arno Timmermans who left the Dutch College a few months ago to become CEO of a regional hospital.



Rob Dijkstra studied Medicine at St Radboud University, Nijmegen, The Netherlands from 1979-1988. After preparatory training in surgery and obstetrics, he moved to Tanzania, where he was the officer in charge at the

Bukumbi Hospital, from 1990-1994. After his return to The Netherlands, he followed postgraduate training in Family Medicine, and started his PhD research on *Implementing Diabetes Guidelines at outpatient clinics*. He obtained his PhD, in 2004, to continue as senior researcher at IQ Healthcare, Nijmegen. In the meantime, he became a Family Doctor, in a small community of around 2500 inhabitants, near Nijmegen. In 2007, he left IQ Healthcare and moved to the Dutch College where he became responsible for Implementation - a difficult part of introducing new knowledge or procedures in daily practice.

As the new president he plans to:

- execute the recently accepted *Future Vision on Family Medicine 2022*
- continue to work on up-to-date guidelines,
- support the family doctor in dealing with an increased flow of (digital) information,
- pay attention to the other members of the primary health care team,
- guide the development of e-health
- work with partners in the different healthcare settings

He will keep practising part time to stay in contact with developments in daily practice.

As summarized by the chair of the selection committee: *"Rob Dijkstra is approachable and brings a unique combination of scientific oriented leadership and experienced family doctor."*



## FEATURED DOCTORS

### Dr Luckson Dullie: Malawi

#### My family medicine story



When I graduated from the College of Medicine of the University of Malawi, in 2001, I was certain I wanted to specialize in internal medicine though my mind would wander towards obstetrics and gynecology sometimes. However, after the grueling five years of

Medical school, I decided instead of going into a residency program straight on, I would work at a mission hospital for a while to recuperate. That took me, after completing my internship, in 2003, to the Malamulo Mission hospital, a rural 300+ bed hospital in Thyolo district, 50km from Blantyre, and run by the Seventh-Day Adventist church.

A beautiful facility, with bustling community outreach programs, Malamulo was a pioneer in prevention of mother and child transmission of HIV in Malawi. I joined a medical team of one pediatrician, one general practitioner, a dentist, six clinical officers and three medical assistants. Soon afterwards however, the delusion of 'I know-it-all post internship' fervor evaporated against the harsh reality of facing a myriad of conditions, across all disciplines, in all ages of patients. This was coupled with the expectation that I was now, for the most part, the "consultant" among the clinical officers, while I was looking for one myself. I realized I liked the idea of dealing with all types of patients, but also that I needed to upgrade my skills in surgery, and obstetrics to function optimally in such situations, where I had no immediate consultant to turn to.

I need to point out that the College of Medicine is the only medical school in Malawi and the curriculum did not have family medicine, or concepts of the undifferentiated patient at all, until 2011.

#### Becoming a family physician

As the idea of becoming an all-round medical officer for the rural practice was taking some shape in my mind, I contacted Dr Wilbert Hurlow, Medical Superintendent of Maluti Adventist Hospital, in Lesotho. Dr Hurlow is a South African general practitioner, with extensive experience in surgery, and who had worked at Maluti hospital for over 20 years.

I was aware that Maluti had a large volume of obstetric and surgical patients and senior doctors in those fields. They also had started a wellness center for HIV/TB care, with community outreach programs. I decided that was enough to learn from and it would help me to come back to Malamulo a better doctor.

January 3, 2006 saw my wife, our three year old daughter and myself on a 36 hour bus trip to Johannesburg, where we would connect with another bus for six more hours to get to the mountain kingdom of Lesotho. For the next several weeks, I worked with Dr Hurlow to develop what we termed my learning outcomes towards my "general and rural medicine" training program. We later learnt that what I had set out in search of and the wheel we were trying to invent already existed and was called 'Family Medicine'.

In the meantime, Dr Brian Jack, of Boston University, working with Lesotho-Boston Health Alliance (LeBoHa) was exploring the possibility of working with University of the Free State (UFS), in South Africa (250km away from Lesotho), to establish a family medicine specialty training program, in Lesotho. The aim was to attract back doctors and medical students who went to South Africa for training. He and LeBoHa were the first to introduce the idea of using the UFS Family Med department for family medicine training, in Lesotho. This idea was picked up by the Adventist church to set up the Maluti-UFS program. That resulted into two distinct family medicine programs – LeBoHa Family Medicine Specialty Training Program (FMSTP) and the MALuti-UFS program. Maluti was also used by LeBoHA as a training site and this was an opportunity for the two programs to interface.

#### The beginning of a family medicine faculty in Malawi

I graduated from the Maluti-UFS, in 2008, and worked as faculty in the LeBoHA FMSTP, in 2009, before returning to Malawi, in September 2009. I subsequently joined the College of Medicine, in 2011, as the first full time faculty in family medicine, in order to initiate the development of family medicine clerkship and residency programs.

In March 2011, the College of Medicine piloted its family medicine module, which is taught in the fourth year of the five-year medical training program, as part of the core curriculum for fourth-year students. This introductory training in family medicine is a critical platform for the effective integration of primary care services that encompass a wide spectrum of priority diseases

including: HIV, TB, malaria, and maternal, neonatal and child health conditions. The six weeks' module focuses on comprehensive care and includes a week (approximately 35 contact hours) of classroom lectures, a four-week preceptorship, at four rural hospitals, and is completed with a week of assessments.

The preceptorship introduces students to the challenges and rewards of primary care medicine, in rural or underserved settings or at sites where they are exposed to different patient profiles that they do not experience at the central teaching hospital. It is thus anticipated, that the family medicine module and rotation will help students develop a culture of working in rural and resource-constrained settings. The ultimate goals of the family medicine module is: to develop into a stand alone department that will be able to deliver academic programs at both undergraduate and postgraduate levels; to participate in service delivery; and to be able to conduct research that can guide clinical practice and policy making in family medicine and primary health care.

The family medicine program, in Malawi, has links with Witswatersrand University in South Africa through a twinning project; has received support from the I-TECH program implemented by University of Washington Global Health Department; and is actively pursuing possible collaboration through Michigan State University, and the Global Health Service Corps in the US. Dr Brian Jack facilitated my attendance to the AAFP Global Health conference, in Minneapolis, in September 2012, where I made an oral presentation on the development of family medicine in Malawi. It was also an opportunity to network and create possible collaborations.

The family medicine clerkship is now in its third academic year and will be evaluated on the impact on students as well as preceptor sites. A four year postgraduate training curriculum towards Masters of Medicine in Family Medicine is being finalised and training is planned to start in 2014. Currently we also have a US Fullbright scholar attached to the program and another part time faculty.

Our current challenges are human resources and financial constraints. We need to develop faculty in order to grow into a robust academic department as well as develop rural sites for training. However, the program is looking at the possibility of developing a model site at which the integration of family medicine into the health system as well as its benefits can be demonstrated. The family medicine program, in Malawi, also envisages advocating for changes in curricula for other health care providers to reflect efforts to depart from disease oriented primary care to people-centered and community oriented

primary care. This may also involve development of multidisciplinary teaching approaches in order to mold cohesive primary health care teams. Training sites for family medicine would therefore create an environment where the different cadres of the PHC team interact and learn together.

Dr Luckson Dullie, MBBS

Family Medicine Coordinator

College of Medicine

University of Malawi.

## Dr Ramnik Parekh: India – WONCA leader

Dr Ramnik Parekh, MBBS, DIH(London),DIM,FIAOH(Hon), FCGP(Hon) is currently the President of Federation of Family Physicians' Associations of India (FFPAI); also a founder member and ex-president of General Practitioners' Association - Greater Bombay.



Ramnik Parekh presenting at the WONCA SAR conference in Mumbai in 2011.

### Path to Family medicine

He was born in Karachi, then undivided India, and migrated to India in 1947. He qualified in medicine in 1962.

Soon after starting his family practice in 1963, he became a direct member of WONCA and also the Royal College of General Practitioners (UK) from where he drew inspiration to achieve goals of ideal family practice. He, with his GP wife, Dr Jyoti Parekh, pioneered systematic record keeping, interior design for clinics, stationery for doctors, practice management etc way back in 1964. They set an example of creating an ideal clinic and founded a trophy for Ideal Family Practice, in Mumbai, in 1970, coinciding with first ever GP conference in India.

### A second career in medicine

After about 20 years of family practice, Ramnik trained in occupational health, in London, and accepted the chair of National Medical Adviser for Unilever Group, in India until 1995. He then

established the first ever Executive Health Centre in Mumbai. In 1996, he started a joint venture in Health Management Services with Sedgwick Plc of UK and then with UnitedHealthcare of USA where he is still a board member. He is CEO of an Occupational Healthcare (OH) provider Matrix Medicare Private Limited, and served in recent past as Chairman of leading Lab Diagnostic Manufacturer SPAN.

He served as an Expert for Indian Council For Medical Research's OH projects under National Institute of OH and as research committee member for Ergonomics Man Power Development for Government of India. He also was chairman & member of Board of Governors for National Safety Council of India for 25 years. He served several medical professional societies like IAOH, CHEMTECH, ICOH, ICMA etc. in various management positions.

His international forays include a number of orations in several forums and:

- Major Speaker at Worksafe Australia conference, 1987,
- Organising committee member for first ever ILO's World Safety Congress in India,
- Chairman for one of six workshops on environment in new millennium for G7 nations, held in Canada, in 1993.

#### **After retirement from active medicine**

After his retirement, his contribution to the cause of family practice continues as he still represents India in WONCA; he pioneered formation of The Spice Route (movement for young and new family doctors in the WONCA South Asia region); and with his perpetual engagement with GPs for new inroads.

<http://www.globalfamilydoctor.com/groups/YoungDoctorsMovements/TheSpiceRoute.aspx>

Dr Parekh says: " *I have immensely enjoyed my involvement with WONCA South Asia region (SAR) in particular. I am proud to be associated with the Spice Route initiative which Sonia Mehra and Raman Kumar are very ably trying to grow. In a short span of the WONCA - FFPAL relationship, we have gained international recognition through hosting the WONCA SAR conference in December 2011 and on personal front I have enriched myself through meeting the many international and towering personalities of WONCA. I feel honoured and privileged to work at the centre.*"

#### **Other passion in life**

Also after retirement from active medical practice he qualified in Graphic Design and Digital Film Making from New York Film Academy at the age of 72! He has held two Photography exhibitions in Mumbai, solo in 2009 and jointly with Jyoti in 2012.

[http://ramnikjyoti.photoshelter.com/gallery/Exhibition2012-Photos-on-Canvas/G0000hzQI\\_hVSFs4/](http://ramnikjyoti.photoshelter.com/gallery/Exhibition2012-Photos-on-Canvas/G0000hzQI_hVSFs4/)

## RESOURCES

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The following resources have been added to the WONCA website in the past month.

#### **PEARL 376 No evidence for topical preparations in preventing stretch marks in pregnancy**

[www.globalfamilydoctor.com/Resources/PEARLS/376Noevidencefortopicalpreparationsinpreventingstretchmarks.aspx](http://www.globalfamilydoctor.com/Resources/PEARLS/376Noevidencefortopicalpreparationsinpreventingstretchmarks.aspx)

#### **PEARL 377 Caution required with total disc replacement for chronic back pain**

<http://www.globalfamilydoctor.com/Resources/PEARLS/377Cautionrequiredwithtotaldiscreplacementforchronicbackpain.aspx>

#### **RACGP Abuse and violence: Working with our patients in general practice (white book)**

<http://www.racgp.org.au/your-practice/guidelines/abuse-and-violence/>

#### **WHO. Antibiotics Smart Use: a workable model for promoting the rational use of medicines in Thailand**

<http://www.who.int/bulletin/volumes/90/12/12-105445/en/index.html>



## WONCA CONFERENCES 2013-2014 AT A GLANCE

### 2013

#### Extra early bird WONCA PRAGUE registration fee reduction for WONCA direct members ends February 19

26 – 29 June 2013	20 <sup>th</sup> WONCA WORLD <b>CONFERENCE</b>	Prague CZECH REPUBLIC	Family Medicine: Care for Generations <a href="http://www.wonca2013.com">www.wonca2013.com</a>
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### 2014

May 21 – 24, 2014	WONCA Asia Pacific Regional Conference	Sarawak MALAYSIA	Nurturing Tomorrow's Family Doctor <a href="http://www.wonca2014kuching.com.my">www.wonca2014kuching.com.my</a>
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July 2 – 5, 2014	WONCA Europe Regional Conference	Lisbon PORTUGAL	New Routes for General Practice and Family Medicine <a href="http://www.woncaeurope2014.org/">http://www.woncaeurope2014.org/</a>
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WONCA Direct Members enjoy *lower* conference registration fees.

See WONCA Website [www.globalfamilydoctor.com](http://www.globalfamilydoctor.com) for updates & membership information

## MEMBER ORGANIZATION MEETINGS

### South Asia Research Methodology conference for Primary Care Physicians

**Host:** South Asian Primary Care Research network

**Theme:** *Strengthening Primary Care Research through Family Doctors*

**Date:** 19-20 January 2013

**Venue:** Colombo, Sri Lanka

**Website:** [www.sapcrn.org](http://www.sapcrn.org)

**Contacts:**

Dr Basharat Ali [drbasharatali@hotmail.com](mailto:drbasharatali@hotmail.com)

[dr.basharatali@yahoo.com](mailto:dr.basharatali@yahoo.com)

Dr Dinusha Perera [dinushapp@yahoo.ca](mailto:dinushapp@yahoo.ca)

Dr Seema Bhanji [seema.bhanji@aku.edu](mailto:seema.bhanji@aku.edu)

### FMPC 2013 India

Date: April 20-21, 2013

Venue: New Delhi, India

Host: Academy of Family Physicians of India

Theme: Preparing multiskilled and competent primary care physicians

Web: [www.fmpc2013.com](http://www.fmpc2013.com)

Email: [dr\\_raman@hotmail.com](mailto:dr_raman@hotmail.com)

### City health conference

Host: The Royal College of General Practitioners (England)

Date: April 24-26, 2013

Theme: Tackling inequalities, preventing illness, improving health

Venue: Euston Square, London, UK

Web: [www.cityhealthconferences.org.uk](http://www.cityhealthconferences.org.uk)

### EGPRN spring meeting

Host: European General Practice Research network (EGPRN)

Theme: Risky behaviours and health outcomes in primary care and general practice

Date: May 16-19 2013

Abstracts close: January 15, 2013

Venue: Kusadasi, Turkey

Web: [www.egprn.org](http://www.egprn.org)

### 12th Brazilian Congress of Family and Community Medicine

**Venue:** Belem, Brazil

**Theme:** Family Medicine and community : access to quality

**Website:** [www.sbmfc.org.br/congresso2013](http://www.sbmfc.org.br/congresso2013)

**Email:** [juliana@oceanoeventos.com.br](mailto:juliana@oceanoeventos.com.br)

**XXXIII Congreso de la semFYC**

Host: SemFYC

Date: June 06-08 2013

Venue: Granada, Spain

Web: [www.semfy2013.com](http://www.semfy2013.com)**RNZCGP conference for general practice**

Host: Royal New Zealand College of General Practitioners

Theme: to be advised

Date: July 11-13, 2013

Venue: Wellington, New Zealand

Web: [www.rnzcgp.org.nz](http://www.rnzcgp.org.nz)**18th Nordic Congress of General Practice**

Host: Finnish Association for General Practice

Theme: Promoting partnership with our patients - a challenge &amp; a chance for primary care

Date: August 21-24, 2013

Venue: Tampere, Finland

Web: <http://nordicgp2013.fi>**European forum for primary care conference**

Date: September 9-10, 2013

Venue: Istanbul, Turkey

Host: European forum for Primary care (EFPC)

Theme: Balancing The Primary And Secondary Care Provision For More Integration and Better Health Outcomes

Web: <http://nvl007.nivel.nl/euprimarycare/efpc-conference-istanbul-9-10-september-2013>Email: [dr\\_raman@hotmail.com](mailto:dr_raman@hotmail.com)**AAFP annual scientific assembly**

Host: The American Academy of Family Physicians

Date: September 24-28, 2013

Venue: San Diego, USA

Web: [www.aafp.org](http://www.aafp.org)**RCGP annual primary care conference**

Host: Royal College of General Practitioners

Theme: Progressive Primary Care

Date: October 3-5, 2013

Venue: Harrogate, United Kingdom

Web: [www.rcgp.org.uk](http://www.rcgp.org.uk)**RACGP GP '13 conference**

Host: The Royal Australian College of General Practitioners

Date: October 17-19, 2012

Venue: Darwin, Northern Territory, Australia

Web: [www.gp13.com.au/](http://www.gp13.com.au/)**2013 Family Medicine Global Health Workshop**

Host: American Academy of Family Physicians (AAFP)

Date: October 10-12, 2013

Abstracts close: May 15, 2013

Venue: Baltimore, Maryland, USA

Web: [www.aafp.org/intl/workshop](http://www.aafp.org/intl/workshop)Email: [Rebecca Janssen](mailto:Rebecca.Janssen@aaafp.org) or [Alex Ivanov](mailto:Alex.Ivanov@aaafp.org)**The Network: Towards Unity for Health annual conference**

Host: TUFH

Theme: Rural and Community Based Health Care: opportunities and challenges for the 21st century

Date: November 16-20, 2013

Venue: Ayutthaya, Thailand

Web: <http://www.the-networktufh.org/conferences/upcoming>


Family Medicine - Care for Generations

25-29 June 2013  
Prague, Czech Republic  
[www.wonca2013.com](http://www.wonca2013.com)

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