

WONCANews

An International Forum for Family Doctors



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World Organization of Family Doctors www.GlobalFamilyDoctor.com

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FROM THE WONCA PRESIDENT :

GENEVA BRINGS CHANGE

The WHO annual Assembly in May 2009 will in all probability become a landmark event in the history of family medicine and primary care. The WHO member states vowed in a resolution unanimously to invigorate their health care systems through a strengthening of primary health care. This return to primary health care as the core component of the system was prompted to achieve equity in access to, and quality of delivered care. The detailed resolution stipulated further – amongst others – to put people in the centre of care, to work for universal coverage and to have WHO monitor global progress in its implementation. A key aspect of the resolution is in investing in the human capital of primary health care: member countries are urged to train sufficient numbers of health workers, in particular nurses, midwives, allied health professionals and family physicians. The historic resolution is published in this issue of Wonca News.

In particular the latter is a major step forward: the specification of the core participants of the primary health care team, lends clout to the nuts and bolts of the buildup of these essential community based facilities. And it brings to a close a longstanding debate of primary health care as a community based service versus a mainly conceptual health care structure. The resolution states implicitly that it is both. In fact, its strength is in the combination of an innovative concept of engaging populations' health with a hands-on personal care for people and families. As a priority to deliver in the coming years, is this interface between public health and individual health care perspectives and services.



Wonca President Chris van Weel celebrates passage of historic primary health care resolution with Jan de Maeseneer, Secretary-General of the Network: Towards Unity For Health and World Health Assembly delegate

Resolutions do not change the world. At best they provide conditions to change. That is exactly the importance of what happened in Geneva: the beginning of a new era.

Wonca has for long worked to strengthen the international support for primary health care, but Wonca is not in a position to propose or adopt resolutions at the World Health Assembly. However, in a most inspiring partnership with The Network: Towards Unity of Health (TUFH), and in close consultation with senior WHO staff, Wonca has been able to tempt countries in submitting a resolution, to specify it through amendments, and in the end to carry it. As Non Governmental Organizations in collaboration with WHO, Wonca and TUFH were allowed to address the Assembly on this issue and did so – with the most satisfying result in the end.

With this, I am convinced Wonca has been able to help shaping an initiative that offers great perspectives for all its member organizations – of the developing and developed world, of east and west, north and south. Because it will be on country level that the next important steps have to be made: by national governments, by national colleges and academies of family medicine, in collaboration with the other professionals specified in the resolution: nurses, midwives and allied

health professionals. The resulting actions and activities will provide valuable material for the upcoming Wonca conferences. In developing action, member organizations might be advised to include as well another resolution adopted in Geneva, on the Social Determinants of Health. That resolution stressed again the importance of primary health care and forms a most valuable additional frame of reference for health care in inner-city metropolises and rural and remote settings.

The World Health Assembly took place against the background of the evolving influenza pandemic, and understandably a substantial part of the agenda was directed at this topic. In fact, the meeting had been shortened, with a restricted agenda. That the primary health care resolution was retained was in itself a sign of the countries' and WHO's determination. It was fascinating to see primary health care and preparing for a pandemic discussed next to each other, without anyone making a connection between the two. But the connection is obvious, with the emphasis of prevention, protection and monitoring and on keeping the majority of patients at home, in the community, while protecting the hospital sector through restricted, selected and supervised referral of those in need of specialized facilities. It is not unlikely that the projected benefits of strong primary health care might become urgently called to attention, soon. In that respect it might be of interest to know of the pending publication of an information and guidance book on Influenza, by the European Scientific Working group on Influenza (ESWI). ESWI is an international collaboration of leaders in the field of infectious diseases and primary care/general practice – the type of primary care – public health collaboration that is such a priority. It may signal that there is already much under way to capitalize upon.

The more reason to expect a flurry of activities in the coming times. Now, more than ever it is up to our member organizations to act. I look forward with high expectations and full of confidence to what is coming!

Professor Chris van Weel
President of Wonca

FROM THE CEO'S DESK:

HIGHLIGHTS OF THE WONCA HONG KONG EXECUTIVE COMMITTEE

The Wonca Full Executive met for three days in Hong Kong from 2nd – 4th June 2009 just prior to the Wonca Asia-Pacific Regional Conference. During the month of May 2009, there was some anxiety as to the possible last minute cancellation of both the meeting and the conference because of the thread of the H1N1 Influenza Pandemic. But as things turned out, all went well and the Executive Meeting and the Regional Conference were held under very pleasant circumstances. There were no restrictions for travelers into Hong Kong from regions with the influenza outbreak. A significant part of this Wonca Executive Meeting was devoted to the eight recommendations of the GROW Initiative (Group to Redesign the Operations of Wonca) A fuller account of the GROW Initiative is given by the Chair of the GROW Committee, Prof Richard Roberts, in a separate article in this issue of Wonca News.

For the first time ever there were two breakout sessions during the

three days of the Executive Meeting to enable Members of Executive in two separate groups to study and comment on the recommendations. These recommendations, now refined by Wonca Executive, will next go before the Wonca World Council for further review and adoption in Cancun in May 2010.

The other issues of significance to Wonca members that were discussed at this Wonca Executive Meeting are summarized below.

Bylaws changes

The Bylaws and Regulations Committee had worked from 2007 to 2009 on a series of changes for presentation to the Council in Cancun in May 2010. The most major change in the proposed Bylaws and Regulations is a series related to equity with particular emphasis on gender equity. A significant change to the Bylaws recommended by the committee that met to discuss equity was the development of a preamble to the Bylaws. The Wonca Bylaws have never previously had a preamble, although Wonca has had a Mission and Objectives. The inclusion of a preamble was to add a more philosophical note to the reason for Wonca's being, to set forth principles of Wonca belief, and to point out the need for equity in Wonca and across the whole of society.

Wonca Executive accepted in total the recommendations of the Bylaws Committee and these will be now be on the agenda for the Wonca World Council in Cancun, Mexico in May 2010

World Family Doctor Day

Wonca had worked during the last few years, in close collaboration with TUFH (Towards Unity for Health) for a resolution on Primary Health

Care for consideration by WHO. On May 22nd 2009, during the World Health Assembly, a resolution was carried that re-establishes Primary Health Care as the core mechanism of accessible, equitable health care. It urges to address health through a primary health care team sensitive to the needs of people and communities, of which family physicians, together with primary care nurses and midwives, were specified as key professionals. All together, this was a most important development for primary care and for the Wonca mission.

The Wonca President, Prof Chris van Weel, spoke at the World Health Assembly in support of the resolution and became the first ever Wonca leader to address the world body. In view of this significant development and the growing acceptance of family physicians globally as a key player in the provision of Primary Health Care, it was recommended by the WHO-Wonca Liaison Person, Prof Michael Kidd, that Wonca should propose to the WHO the establishment of a World Family Doctor Day. Wonca Executive felt that there was merit in the proposal and also suggested that 19th May be the date annually for the event. Wonca Executive also suggested that 19th May 2009 be the first World Family Doctor Day as that is the date of the opening of the Wonca World Conference in Cancun, Mexico.

Establishing a formal relation between Wonca Region Europe and Wonca World

At the Wonca Executive Meeting in Buenos Aires, Argentina in October 2006, Wonca Executive decided that the CEO should liaise with Wonca's legal advisor to explore the development of sub-trust entities for Wonca Regions and in this process have them established as legal entities.

In line with this aim, several meetings were held between the Wonca Region Europe (WRE) Executive and Wonca World Core Executive Committee, as Europe was the most developed. Region Europe indicated that they were in favour of a more informal link in which the essence of the relationship between the two bodies was one of a collaborative nature. It was then decided that the WRE Executive should prepare a proposal on how they see the relationship between WRE and Wonca World could be formalized. After seeking clarification from the WRE Executive on some points in their proposal, the CEO met up with the Wonca Legal Adviser and requested that he draft a memo-of-understanding (MOU) based principally on the points contained in the WRE proposal.

The MOU prepared by Wonca's lawyer was discussed by the Wonca Executive Meeting and it was decided that the proposed MOU be now sent to the WRE Executive Committee for their acceptance. If agree reached, then the document will be presented to the Wonca World Council in Cancun in 2010 for ratification.

It is hoped that the MOU with WRE will, at the appropriate time, be the basis of future MOUs with the other Wonca Regions.

Financial Concerns of the Organisation

Wonca Executive also spent considerable amount of time discussing the issue of Wonca's financial situation for the next triennium.

Although the 2008 financial year ended with a balanced budget, this was achieved only because of the cost cutting measures instituted in the last quarter of 2008 after the Core Executive Meeting in Melbourne in September 2008. A similar exercise was carried out early this year to reduce the budget allocations for 2009 for all segments of Wonca.

In line with this decision to reduce expenditure, Wonca Executive decided that future issues of Wonca News will be produced only in the electronic form. This is in line with most other medical journals that have gone completely electronic. Wonca News will be put on the Wonca Website and will be pushed to the e-mail addresses of all Direct Members, Member Organisations, Organisations in Collaborative Relations, Wonca Academic Members and those who have subscribed to Journal Alerts/Clinical Reviews.

Wonca Executive also noted with some concern the declining support from the pharmaceutical industry and also the over dependence on them for 20-30% of the Wonca revenue. It was decided that Wonca should actively seek support also from other industry sectors like health-oriented foundations, medical equipment manufacturers, insurance and airline companies, banks, credit card companies etc.

Executive felt that over time, Wonca should depend more on the services and consultancies it can provide to aid agencies and governments in developing countries in their health care restructuring programmes.

Finally, several working papers were also tabled for discussion by Wonca Executive and these will have to be reviewed again at future Executive Meetings before being presented to Wonca Council for consideration and ratification.

These include development of a Wonca financial policy; Development of priority setting policies on budget allocation; Development of a policy on keeping Wonca operational in a global pandemic; Guidelines and procedures for satellite symposium at Wonca World Conferences; and development of a policy on Wonca participation in collaborative activities with other organizations.

Dr Alfred Loh

Chief Executive Officer

World Organization of Family Doctors

FROM THE EDITOR:

**FROM THE EDITOR:
STRENGTHENING HEALTH
SYSTEMS BASED UPON
PRIMARY HEALTH CARE**

The December 2008 issue of Wonca News reports on the World Health Organization's release of its 2008 WHO World Health Report, entitled "Primary Health Care – Now More Than Ever". The WHO focused global attention on this historic report by releasing it to coincide with the 30th Anniversary of the Alma Ata Declaration on Primary Health Care.

As reported in this issue of Wonca News, once again global attention is turned to primary health care and the role of the family doctor and the principles of family medicine in improving health systems to better meet people's health needs. At the 62nd World Health Assembly (WHA) in May, delegates from around the world passed a historic resolution calling upon WHO member countries to strengthen health systems based upon primary health care, and specifically pointing out the central role of the family doctor. In the issue, Michael Kidd, Wonca Liaison to the WHO, provides a comprehensive report of the 62nd WHA and the important behind-the-scenes efforts leading up to the adoption of the resolution. In his President's Column, Chris van Weel, who spoke eloquently on behalf of Wonca at the World Health Assembly, reflects upon this historic vote in Geneva. The complete resolution and the link to the WHO website for additional related information are published in this issue.

Finalize your travel plans to attend our two remaining Wonca's Regional Conferences taking place in the fall – the 15th Wonca Europe Regional Conference to be held from September 16-19, 2009 in Basel, Switzerland; and the 2nd Wonca Africa Regional Conference in Rustenberg, South Africa from October 25-28, 2009.

The 19th Wonca World Conference of Family Doctors in Cancun, Mexico, from May 19-23, 2010 will focus on the theme, "The Millennium Development Goals: The Contribution of Family Medicine". The Host Organizing Committee – The Mexican College of Family Medicine – could not have selected a more globally relevant theme. The more than 5,000 of our international colleagues expected in Cancun for this once-every-three-years global gathering will examine the implications of the historic 2008 World Health Report and the 2009 WHA Resolution reported on in this issue. Now is the time to register to be a part of this historic event.

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FEATURE STORIES

**WONCA IBEROAMERICANA
REGION CELEBRATES IN
PUERTO RICO**

Delegates celebrated the II Regional Congress Wonca - Iberoamerica from April 23-25, 2009 in the Convention Center of San Juan, Puerto Rico. A total of 369 participants attended the Congress, including Presidents and Board of Directors members from across the region and each member country, national and international family doctors, family medicine residents, and guests.

The day before the opening session, the Iberoamericana-CIMF Board meeting took place at the Condado Plaza Hotel, where they presented all their reports, discussed regional themes and elected the new Board of Directors: Dr. Liliana Arias - President, Dr. Cesar Brandt - Executive Director, Dr. Marina Almenas – Treasurer, Dr. Lourdes Arratia - Vice President Andina Region, Dr. Inez Padula - Vice President Cono Sur Region, Dr. Miguel Angel Fernández - Vice President Mesoamerica Region, Dr. Luis Aguilera - Vice President Peninsula Iberica Region.

That night, Wonca Iberoamericana delegates had the honor of receiving Dr. Mirta Roses, Director of the Pan-American Health Organization (PAHO) in Washington. The delegates warmly gave Dr. Roses her most deserved recognition and the Presidents of the Iberoamerica Associations shared their goals, challenges and accomplishments from their respective countries.

The Congress began officially the morning of April 23, 2009 with the Inaugural Plenary session, where delegates had the honor to have the

presence of Professor Chris van Weel, Wonca President, Dr. Rich Roberts, Wonca President-elect, Dr. Mirta Roses, PAHO Director, Dr. Liliana Arias, Wonca Iberoamericana Region President-elect, Dr. Marina Almenas, President AMFPR, Dr. Jaime Rivera Dueño, Secretary of Health of Puerto Rico, as well as member of the CIMF Board and The Academy of Family Physicians of Puerto Rico.



Members of the Opening Plenary, from left to right: Raul Castellanos, Liliana Arias, Rich Roberts, Jaime Rivera Dueño, Chris van Weel, Mirta Roses, Marina Almenas, and David Bushberg



Social activities during the evening Presidential Reception



Recognition night for Dr. Mirta Roses, Pan-American Health Organization Director



Iberoamericana-CIMF Executive Committee, from left to right: Luis Aguilera, Inez Padula, Liliana Arias, Cesar Brandtt, Marina Almenas, Lourdes Arratia, and Chris van Weel

The Congress title: “The Family Physician’s Role in Service, Investigation, and Education”, was explored sequentially each day. The first day focused on the Service theme, with important information given by Dr. Rich Roberts, Dr. Mirta Roses, Dr. Eno Dias, Dr. Evelyn Goicochea and Dr. Ruth Depaux.

The Second Day was dedicated to “Investigation”, where the presentations included four “Distinguished Papers”. We received approximately 30 Investigation works, from which the Scientific Committee selected the 4 “Distinguished Papers” and the other 15 were presented in “Poster Presentations” at the facilities of the Convention Center. The last day of the Congress was dedicated to the them of Education. We had lecturers from a great part of the Countries of Iberoamerica. During Friday afternoon we had the workshop: “Standards for Family Medicine Education and Training” by Dr. Marcelo De Marzo from Brazil, and the participation of the Education Group of Iberoamerica.

On Saturday afternoon, Dr. Julian Herrera from Colombia presented the workshop: “The Iberoamerican Investigation Grid”, with the participation of The CIMF Investigation Group. During the afternoon conferences were offered in the Convention of the Academy of Family Physicians of Puerto Rico.

The last day we closed the Congress with the picture “Las Alas de la Vida” (The wings of life), recognized at a worldwide level and winner of various prizes, presented by Dr. Luis Aguilera. The participants were aided by complete transportation and translation facilities, which made all the education activities all the more enlightening. The Congress participants were also treated to two joyous regional evening social events: “Iberoamericana Night”, with dining, dancing music and “plenarios”, with local and regional music played by musicians in their typical dress. Two awards were also given, one to the “Family Physician of the Year” and other to the Foundation “Make a Wish”. As the closure of the Congress, on Saturday night, we had a formal “Presidential Night” with dining and dancing at the Hotel Condado Plaza. All in all, the II Iberoamericana Regional Conference was a grand celebration.

Marina Almenas
Chair, Host Organizing Committee
II Iberoamericana Regional
Conference
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Se llevó II Congreso Regional Wonca Iberoamérica en Puerto Rico

Durante los días del 23-25 Abril 2009 se llevó a cabo en Puerto Rico el II Congreso Regional Wonca – Iberoamérica en el Centro de Convenciones de PR. Asistieron 369 Participantes Nacionales,

Internacionales, Médicos Residentes de Medicina Familiar, Miembros del CIMF y la Junta Directiva de la Academia de Médicos de Médicos de Familia de PR.

El día antes del inicio del Congreso se llevó a cabo la Reunión Ordinaria de Junta Directiva de CIMF en el Hotel Condado Plaza, donde se presentaron todos los informes, se discutieron temas de la región y se realizaron las elecciones para la Nueva Directiva, la cual ésta conformada por:

Dra. Liliana Arias
Presidenta
Dr. Cesar Brandt
Coordinador Ejecutivo
Dra. Marina Almenas
Tesorera Honoraria
Dra. Lourdes Arratia
Vicepresidente Región Andina
Dra. Inés Padula
Vicepresidente Subregión Cono Sur
Dr. Miguel Anguel
Fernández Vicepresidente
Subregión Mesoamérica
Dr. Luis Aguilera
Vicepresidente Subregión Península Ibérica

Ese día en la noche tuvimos el honor de reunirnos con la Dra Mirta Roses, Directora de la Organización Panamericana de la Salud en Washington, DC, donde se le hizo entrega de un reconocimiento y los Presidentes de las Asociaciones de Medicina Familiar de Iberoamérica compartieron inquietudes de sus respectivos países.

El Congreso comenzó oficialmente en la mañana del 23 de Abril de 2009, con los Actos Inaugurales, donde tuvimos el honor de contar con la presencia del Dr. Chris Van Wheel, Presidente de Wonca, Dr. Rich Robert, Presidente Electo, Dra. Mirta Roses, Directora OPS, Dra. Liliana Arias, Nueva Presidenta, Dra. Marina Almenas – Presidenta AMFPR, Dr. Jaime Rivera Dueño, Secretario

de Salud de PR., además de la Junta Directiva de CIMF y de la Academia de Médicos de Familia de PR.

El Congreso titulado: “El Médico de Familia en el Servicio, la Investigación y la Educación”, se dividió cada día por tema: El primer día tuvimos el tema del Servicio, donde destacamos las importantes conferencias ofrecidas por: Dr. Rich Robert (USA), Dra. Mirta Roses (OPS), Dr. Eno Dias (Brasil), Dra. Evelyn Goicochea (Perú) y la Dra. Ruth Depaux (Chile).

El Segundo día, fue dedicado a la Investigación, donde se destacó la presentación de los 4 “Distinguish Paper”. Se recibieron alrededor de 30 Trabajos de Investigación de los cuales el Comité Científico escogió los 4 “Distinguish Paper y otros 15 fueron presentados en “Poster Presentation” en los espacios del Centro de Convenciones.

El último día del Congreso se dedicó a la Educación. Tuvimos conferenciantes de gran parte de los países de Iberoamérica. Durante la tarde del viernes tuvimos el taller: “Stándar for Family Medicine Education and Training” por el Dr. Marcelo De Marzo (Brasil), donde participó el Grupo de Educación de Iberoamérica. En la tarde del sábado el Dr. Julián Herrera (Colombia) presentó el taller: “The Iberoamerican Investigation Grid”, con la participación del Grupo de investigación de CIMF. En las tardes contamos con las conferencias médicas ofrecidas en la Convención de la Academia de Médicos de Familia de PR.

El último día del Congreso se dedicó a la Educación. Cerramos el Congreso con la Película “Las Alas de la Vida”, reconocida a nivel mundial y ganadora de varios premios, presentada por el Dr. Luis Aguilera (España). Los participantes contaron con las facilidades de transportación

y traducción simultánea, además de todas las actividades educativas, los participantes del congreso tuvieron dos Actividades Sociales, “Noche Iberoamericana”, con cena, músicaailable y los pleneros, además de la entrega de dos premios, uno al Médico de Familia del Año y otro a la Fundación “Make a Wish”. Como cierre del Congreso durante la noche del sábado, tuvimos la “Noche Presidencial”, con cena y baile en el Hotel Condado Plaza.

CAN WONCA GROW?

Wonca has never been more influential, or more vulnerable. Member organizations have grown to 119 in number and represent nearly 100 countries, 250,000 family doctors, and 90% of the world’s population. Recent accomplishments include adoption of the World Health Assembly resolution on primary health care and the family physician; publication of two landmark monographs in collaboration with WHO (“Integrating mental health into primary care” and “Primary Health Care: Now More Than Ever”); agreement with IHTSDO to link its SNOMED and our ICPC classification systems; negotiations with several Persian Gulf countries to assist in the redesign of their health systems; and vibrant Working Parties leading the way on classification, mental health, research, women and gender equity, and other areas important to family doctors.

Yet, a global economic downturn, inadequate funds to bring leaders together with sufficient frequency to plan and execute change, and the constraints of running a world organization with a too small budget and too few part-time staff pose a serious challenge for Wonca – we may become a victim of our own success by raising expectations that cannot be met. Responding early to the looming financial crisis, President Chris van Weel last year announced

50% reductions in the already too meager amounts allocated to the various budget units, including Working Parties and Regions. Even with these cuts, the Wonca budget for 2009 looks grim with anticipated revenues of USD483,000 and expenses of USD706,000. The projected deficit of USD 223,000 will reduce Wonca’s limited reserves by about half. If a similar budget year occurs in 2010, then Wonca will be approaching insolvency.

Decisions, dues, and drug companies – The recent crisis has clarified an emerging reality about Wonca – we must transform from an academic club to a professional association. Our decision processes have been too slow. For example, bylaws changes require 6 years to take effect. At next year’s World Conference in Mexico, the World Council will consider bylaws amendments that will speed up how quickly we can change our bylaws and eliminate the 6-year waiting period.

Our funds are too few and our funding streams are too limited. In 2009, two sources of funds will account for 80% of Wonca revenues: dues from member organizations (60%) and pharmaceutical support (20%). Dues are paid by member organizations based on the number of family doctors they report as members. The amount paid per family doctor is adjusted based on that country’s level of development, according to the World Bank. Among the developed countries, the amount paid per family doctor is the same. The wide range in the number of family doctors in member organizations means however, that just a few countries represent most of the dues. For example, three countries (Canada, UK, USA) comprise more than half the dues; one member organization (AAFP) contributes nearly 20% of all Wonca revenues. When these large

organizations encounter financial difficulties, as has occurred recently, it becomes increasingly difficult for them to justify their current Wonca dues payments to their own members.

About 10 years ago, Wonca experienced similar financial difficulties. The decision at that time was to look to industry, mainly pharmaceutical companies, to fund global sponsorships and conference symposia. Those funds helped sustain Wonca and allowed it to expand its important work and reach out to more developing countries. The Wonca World Council at that time adopted rules to govern those relationships and assure that the companies did not have undue influence nor engage in inappropriate product promotion. Even so, there are growing concerns around the world about the linkages between the pharmaceutical industry and physician organizations. Consequently, the current Executive is committed to reduce the funding that Wonca receives from drug companies. While global sponsorships and symposia funded by pharmaceutical companies have shrunk over the past 2 years from 35% to 20% of Wonca revenues, we need to reduce further our reliance on pharma support and diversify our funding sources.

Wonca needs to GROW – Wonca leaders recognized the need for change some time ago and have been hard at work. At the next World Conference in Cancun in May 2010, the World Council will consider proposals to speed up the process for amending our bylaws. Cognizant that more than bylaws changes are needed, the Wonca Executive last year approved the creation of the Group to Redesign the Operations of Wonca (GROW). Members of GROW included the Core Executive (President Chris van Weel, President-Elect Richard Roberts, Honorary Treasurer Michael Kidd, and

CEO Alfred Loh), along with those with financial expertise (Asia-Pacific Regional President Donald Li and Iberoamericana Regional Honorary Treasurer Marina Almenas) and national college expertise (Dutch college CEO Arno Timmermans). Nikki Walker and Chester Chou of MCI, the world's largest association management firm, were engaged as consultants to the GROW project.

GROW study – As part of the GROW project, the MCI consultants conducted the first ever study of member organization attitudes and expectations about Wonca. The study consisted of a qualitative analysis of telephone interviews with 8 national leaders and funders and a quantitative web-based survey of 110 member organizations, with a response rate of about 45%.

Only 20% of member organizations said they get enough benefits for their membership dues (31% developing countries; 12% developed countries). When asked if Wonca provided value, 33% of developed countries said not at all, while 62% of developing countries thought very much so. In ranking preferences for improving the value of Wonca membership, the top picks for developing countries were hands-on practical training and ICPC, which ranked only 4th and 7th for developed countries, respectively. International guidelines were rated as the second highest priority by developed countries. Wonca's recognition as a collaborating organization with WHO was viewed as important by 85% of all respondents. 52% of developed countries, compared to 33% of developing countries, felt regional conferences were more relevant than the World Conference. The Wonca website was seen as playing an important role in learning from and sharing ideas with other family doctors around the world by 87% of developing versus 24% of developed

countries, and helping members connect with each other around the world by 73% of developing versus 20% of developed countries. Overall, 54% believed that "Wonca plays a relevant global role in the international field of family medicine today" (82% developing versus 40% developed).

In summary, the study revealed that the challenge facing Wonca is that the member organizations that provide the most funds to Wonca perceive that they get little of value from Wonca, while those that perceive the most value, and have the greatest need for even more services, do not have the means to pay for those services. All developed countries now have member organizations and they have indicated they cannot pay more dues; in the future new member organizations will come only from developing countries with limited abilities to contribute dues. Reliance on member organization dues must therefore give way to more diverse revenues from valued products and services.

How Wonca must GROW – How can Wonca grow while reducing its reliance on member organization dues and pharmaceutical support? By creating new products and services that are valued by members in both developed and developing countries and that generate more diverse sources of funding. The recent World Health Assembly resolution on primary care and family physicians; the linkage of ICPC and SNOMED; and the innovative products of the Working Parties on mental, research, and women represent just a few examples of Wonca's value to both developed and developing countries. These and other initiatives can better promote family medicine and primary care, but they will require careful planning and a more robust organization. To grow, Wonca will

need to become more nimble with quicker decision processes and more capable with better funding.

Executive agrees to GROW – The GROW group was tasked to meet once in February 2009, review the study findings, and issue a report with recommended changes for Wonca's governance, budget, and activities. The GROW group developed a report recommending sweeping changes that envision a larger and more engaged Wonca with a greater diversity of revenue sources resulting from a wider array of products and services that will be valued by those in both developed and developing countries. The GROW report was reviewed at the recent meeting of the Wonca Executive, which revised the GROW recommendations and adopted the resolutions that follow at the end of this report.

Bylaws and regulation proposals – Please note that the preamble presented in GROW resolution 1 has already been submitted to Council members as a proposed bylaws change to be considered at Cancun 2010. The proposed GROW vision, mission, and objectives statements also proposed in GROW resolution 1 will be considered by the Council, but not likely adopted as bylaws changes until after Cancun 2010. Finally, GROW resolution 2, which contemplates the creation of a new Committee to oversee the World Conference, will be circulated to the World Council for its consideration at Cancun 2010 as a possible change to the regulations.

Thank you – It has been an honor and a privilege to lead the GROW project. I would like to thank the Executive for having the courage to consider a new direction for Wonca. I am especially thankful for the time, effort, and talent given by the members of the GROW group and Wonca staff on behalf of this

initiative. GROW has helped me better understand the importance of having an organization to connect the family doctors of the world and the value of our efforts to assure that every family has a family doctor.

Next steps – Wonca leaders have already begun the dialogue with member organizations, with presentations given to the Iberoamericana and Asia-Pacific Councils at their recent regional meetings. Presentations are also planned for regional meetings in Europe, North America, and Europe later this year. This report and these resolutions represent the start of a global conversation on the future of Wonca. During the next 10 months, the hope is that the world’s family doctors and their national colleges will contribute to and improve on the ideas that the Council will consider in Cancun in May 2010. I do not know whether our member organizations and the family doctors they represent will support the proposed changes. I do know that the people of the world, and the family doctors who care for them, need Wonca to GROW.

Professor Richard Roberts
Chair, GROW project
Wonca President-Elect

GROW Resolutions Adopted by Wonca Executive, 4 June 2009, Hong Kong

RESOLUTION 1: The following are referred to the Bylaws Committee for development of new Bylaws and Regulations to be considered by the Wonca World Council.

PREAMBLE

1. Cognizant of the fundamental aspiration of all individuals, families, communities and people to achieve and maintain the highest quality of life:

2. Recognizing the centrality of improved and optimal health to the achievement of the highest quality of life:
3. Recalling the important provisions of the charters, declarations and instruments of the international organizations regarding human rights, equity, development, health and human dignity:
4. Recognizing that the elimination of other violations of universal human rights, equality including gender inequality, are important prerequisites for development including the improvement and achievement of optimal health:
5. Affirming that the improvement and achievement of optimal health is dependent on high standards and levels of health care provision, organization, teaching and research:
6. Convinced that general practice/family medicine is the cornerstone of the achievement of high standards and levels of health care provision, organization, teaching and research throughout the world: and
7. Noting the global benefit of organization and knowledge exchange between general practice/family medicine organizations and practitioners, and between general practice/family medicine and other organizations concerned with health and medical care:

The general practice/family medicine organizations of the world constitute themselves as the World Organization of National Colleges, Academies and Academic Associations of General Practitioner/Family Physicians.

Vision: A world where all people have the opportunity to attain

optimal health and quality of life, and their full potential.

Mission: Wonca will contribute to this vision by promoting the concept of every family in the world having access to a family doctor. New tagline – “For every family, a family doctor.”

Objectives: Wonca will advance its mission through its efforts to:

1. Foster high standards of care and the use of best practices in general practice/family medicine.
2. Promote the personal, compassionate, comprehensive, and continuous care of the individual in the context of the family and community.
3. Represent the policies and clinical, educational, and research activities of family doctors to other world organizations and forums concerned with health and health care.
4. Stimulate research, innovation, and the generation of new knowledge in general practice/family medicine.
5. Support and facilitate the development of general practice/family medicine throughout the world.
6. Encourage and support the development of academic organizations of general practice/family medicine.
7. Provide a forum for exchange between Member Organizations and between family doctors around the world.

Resolution 2: A Wonca Conference Committee will be established by Cancun 2010, which will:

1. Be responsible for the Wonca World Conference and work in collaboration with the Host Orga-

nizing Committee of the chosen region.

2. Consist of a representative of each Wonca region and such other members as may be necessary.
3. Advise the Executive and Host Organizing Committee on scientific and logistical matters regarding the World Conference.
4. Study the feasibility of an annual Wonca World conference that is rotated among regions.

Resolution 3: The CEO will develop a business plan by Cancun 2010, which will:

1. Establish a process such that Wonca could:
 - a) Provide global accreditation of training programs for family medicine.
 - b) Provide global certification of individual family doctors.
 - c) Endorse the accreditation programs of member organizations.
2. Create a compendium of and an accreditation program for online education programs that bring together materials developed by member organizations.
3. Develop a consulting service for governments, other organizations, and commercial interests seeking information, assistance, and advice on primary care and health care system redesign.

Resolution 4: The Publications & Communications Committee will develop by Cancun 2010:

1. A strategy for the more effective branding and use of the website.
2. A detailed business plan for the website.

Resolution 5: The Membership Committee will develop by Cancun 2010 a strategy to:

1. Establish a member organization in every country.
2. Increase direct membership.
3. Increase academic membership.
4. Address the concerns of, and make involvement in Wonca attractive for, new family doctors.
5. Attract and involve young members.
6. Secure a member organization in India by 2013.

Resolution 6: The Wonca International Classification Committee will by Cancun 2010:

1. Work with the CEO to develop a plan for funding the development, marketing, and distribution of ICPC-3.
2. Determine a date for the completion of ICPC-3.

Resolution 7: The Wonca World Executive will develop by Cancun 2010 a plan that includes a timeline and the financial implications for World Wonca and member organizations to:

1. Convene meetings of the Executive on a quarterly basis in conjunction with regional meetings.
2. Convene meetings of the World Council on an annual basis.
3. Revise the bylaws to:
 - a) Restructure the composition of the Council.
 - b) Simplify the governance model of Wonca.
 - c) Elect the President-Elect each year.
 - d) Recognize the time commit-

ment of the President and make available an appropriate honorarium.

4. Establish the CEO as a full-time position.
5. Locate a permanent Secretariat.

Resolution 8: The Wonca World Executive will develop by Cancun 2010 a plan to:

1. Provide resources to increase the capacity and vitality of member organizations.

WONCA REGIONAL NEWS

WONCA AFRICA REGION PLANS FOR ITS FUTURE

An informal meeting of Wonca Africa was called in Kampala, Uganda on the 18th of November 2008 during the Primafamed Conference 17-22nd November 2008. Twenty-nine people attended. The following countries were present: Nigeria, Ghana, Kenya, South Africa, Sudan, Uganda, Mozambique and Democratic Republic of Congo. The following countries were at the conference but not present at the meeting: Rwanda, Tanzania, Lesotho and Ethiopia but Rwanda and Tanzania were briefed after the meeting. There was a welcome and explanation of the purpose of the meeting by Prof Mfenyana as Chairman of the meeting and President of the Wonca Africa Region. The purpose of the gathering was to give information about Wonca and to encourage the formation of local professional family medicine organizations in different countries and their application to join as member organizations and to grow Wonca Africa.

Prof Mfenyana described the current membership of Wonca Africa: Nigeria (with 3 organisations as members -1 full and 2 associate), Ghana (with 1 organisation as full member), Kenya (with 2 organisations – 1 full member and 1 associate), South Africa (with 1 organisation as full member) and Zimbabwe (with 1 organisation as full member). There were also collaborating organisations that were raised as important: The Network: Towards Unity for Health (TUFH), Global Health through Education, Training & Service (GHETS). Prof Mfenyana indicated his desire to link up with World Health Organisation (WHO) in Africa. He also indicated that he has reported on the activities of Primafamed to Wonca Executive and that there was great excitement and support on the developments of Family Medicine in Africa.

Various questions were posed by the participants wishing to learn more about Wonca.

“What is the meaning of the name Wonca?” Professor Mfenyana responded that Wonca was an abbreviation for the original name of the organization that is now more simply called the “World Organization of Family Doctors”.

“What does it take to join Wonca?” Professor Mfenyana explained that Departments of Family Medicine could join but that he would like to encourage national professional organizations being established per country. He explained the process of application and directed participant to get further information at the website (including costs).

“Does one need government endorsement?” Any family medicine organization needed to follow the laws of the country to be registered as a constituted legal body but there was no requirement by Wonca for formal endorsement by any government.

The participants observed that could be considerable value to Family Physicians for relations to their governments as joining would link what might look like a small group to an international body like Wonca that has formal and strong links to WHO. This would improve Family Medicine Organization credibility within their own countries.

“How soon can we build Wonca Africa?” Professor Mfenyana encouraged applications and suggested that if applications were in by July 2009 for consideration by the Wonca Executive meeting in Hongkong, the new members could be submitted for approval at the Wonca World Conference in 2010 at Cancun. There was a request for constitutions to be shared. The constitutions of Kenya, Uganda and South Africa were discussed briefly. Prof Mfenyana stressed that Family Physicians must take the initiative on the ground and lead their country’s membership process.

“What services are available” Dr S. Moosa encouraged people to go to the website (www.globalfamilydoctor.org) and explore the valuable services available. It was resolved that an email would be sent out by Dr S. Moosa to give all participants at the conference the link to the Wonca Website and ask all to join the Google Group “African Family Medicine” to access the constitutions/charters of Uganda, Kenya and South Africa and general resources.

All those present agreed to work hard to set up Family Medicine organizations in their countries and make applications to join Wonca. It was made mention of the fact that there would be a formal Wonca Africa Regional meeting at the October 2009 Wonca Africa Conference in South Africa and all prospective member organizations, institutions

and individuals are invited to attend. Above all, everybody was invited to attend the Wonca Africa Congress 2009.

Dr. S. Moosa
Gauteng, South Africa

WONCA EUROPE TO GATHER IN BASEL SWITZERLAND

Wonca Europe and the Swiss Society of General Medicine (SSMG/SGAM) will be pleased to welcome you to the 15th Wonca Europe Conference 2009 which will be held together with the 32nd national SSMG/SGAM Congress in Basel, Switzerland from 16-19 September.

It is a great pleasure and honour for the SSMG/SGAM to organize this very important European conference in Switzerland for the first time in its history.

We promise you a very exciting conference to the theme of “The Fascination of Complexity – Dealing with Individuals in a Field of Uncertainty”. A deep understanding of complexity and a virtuous handling of uncertainty are very important competencies in the daily practice of family doctors.

The conference will highlight topics related to teaching, research, and quality in family medicine and the daily practice of family doctors. A substantial number of presentations will match the main topic of complexity and uncertainty. We invite you all to present your research and teaching activities and to discuss specific items out of your daily practices and health systems. We are looking forward to your abstract submissions.

And do not forget Basel and its surrounding countryside, either!

Switzerland with its rich culture, its famous mountains and its marvelous cities is well worth the visit! Additional information about the sites and attractions of this lovely part of Switzerland and the Wonca Europe conference can be found at www.woncaeurope2009.org

The Swiss family doctors will be pleased to welcome you all to the Wonca Europe Conference 2009 in Basel, the very highly regarded annual reunion of family doctors of Europe and beyond.

Bruno Kissling
President of the Organizing
Committee

Peter Tschudi
President of the Scientific
Committee

Lilli Herzig
Co-President of the Scientific
Committee

Carlos-Fernando Munoz
President of the SSMG/SGAM

Hansueli Späth
Past President of the Swiss Society
of General Medicine
François Héritier
President of the Swiss Society of
General Medicine

Igor Svab
President of Wonca Europe

Monika Reber Feissli
President of the Swiss Association
for Young and Future Family
Doctors

2nd AFRICAN REGIONAL CONFERENCE TO BE HELD IN SOUTH AFRICA

The 2nd Wonca Africa Conference will be held in Rustenburg Civic Centre in South Africa, from October 25-28,

2009. The conference will focus on the following major themes: 1) The African context: culture and diversity in health, values, traditional beliefs, family, generalists, connecting, and leadership; 2) Primary Health Care and Family Medicine – relationship, equity/advocacy, intersectoral work, and community-oriented primary care; 3) Training: the development of Training Complexes, and the context of training; 4) How to be “change agents” to improve quality of care; and 5) Teamwork and networking.

Abstract submissions will be accepted until 30th April, 2008. Prizes will be awarded at the end of the conference for the best paper and the best poster as judged by a panel to be appointed by the Scientific Programme Committee. In addition, in order to encourage presentations from important groups within family practice/ primary care, prizes will be presented in each of the following categories: best postgraduate student presentation; best undergraduate student presentation; best Primary Health Care nurse presentation. These may be for papers or posters.

Rustenburg is one of the fastest growing cities of South Africa. It lies 115 km north of Johannesburg and situated at the foot of the Magaliesberg mountain range in the North West Province of South Africa. The area is rich in wildlife and many exotic scenic exhibitions. The city of Rustenburg is a short drive away from Johannesburg and Pretoria (Tshwane). The Rustenburg weather is mainly pleasant during the daytime but cold at night. Rustenburg boasts of beautiful and luxurious Rustenburg hotels, B&B (bed and breakfasts) and guest houses.

There are various inclusive destinations in Rustenburg which visitors must see. One such destination is Kgaswane Game Reserve, which offers a unique

experience in wilderness areas of North West Province. Sun City (50 km away) and Rustenburg Natural Reserve are also popular Rustenburg destinations. Sun City is a world famous resort that is located near to Rustenburg, offering four top class hotels, two 18-hole golf courses, a man-made beach, an entertainment centre, casinos and much more.

One of the best ways to Rustenburg is through bus with Translux (www.translux.com) and Greyhound (www.greyhound.co.za) offering connections to major South African Cities. Also, all the major Rustenburg car hire companies are well represented in all major cities and at the OR Tambo Johannesburg airport. The conference will arrange airport shuttle with one local car hire company at extra cost to delegates interested in utilizing their service (details can be obtained from saafp@netactive.co.za)

To obtain additional conference information, to register and to learn more about the abstract submission process, please visit www.woncafrica2009.org.

Professor Khaya Mfenyana
President, Wonca Africa Region

HEALTH AND HEALTH SYSTEM NEWS

WONCA CONTRIBUTES TO HISTORIC 62ND WHO WORLD HEALTH ASSEMBLY

Wonca is recognised as one of over 180 nongovernmental organisations in official relations with the World Health Organization (WHO) and is the recognised non-government organisation for family medicine. This is recognition of the importance to global health of family medicine and the recognised role of Wonca as the international leader in setting standards for clinical practice and education and training and research in family medicine around the world. In this role Wonca can advocate for primary health care and for the role of family doctors in ensuring strong primary care is available to all people in each of the countries of the world.

The WHO is the authority on international health within the United Nations' system and is led by its Director-General. WHO experts produce health guidelines and standards, and assist countries to address public health issues. Through the WHO, governments can jointly tackle global and regional and local health problems and work together to improve the well-being of the people of the world.

The World Health Assembly is the annual meeting of the delegations from the 193 countries which make up the WHO membership. The World Health Assembly is held in the main United Nations assembly hall in the Palace of Nations in Geneva. Each national delegation usually includes that nation's Minister for Health and other senior government members and

senior Health Department bureaucrats. The assembly meets each year to set policy for the WHO, to approve the WHO budget and, once every five years, to appoint the Director-General. The work of the World Health Assembly is supported by a 34-member Executive Board which is elected by the Assembly. There are also six regional committees which focus on health matters of a regional nature. Non-government organisations in official relations with the WHO, including Wonca, are invited to attend the annual World Health Assembly as observers.

Wonca's delegation to the 62nd World Health Assembly was Wonca President, Professor Chris van Weel, Wonca Treasurer and member responsible for WHO Liaison, Professor Michael Kidd, and Chair of the Wonca Women in Family Medicine Working Party, Professor Amanda Howe. This was Wonca's busiest attendance at a World Health Assembly, as the WHO focuses on the "Renewal of Primary Health Care."



WHO Director General Dr Margaret Chan Speaking at the 62nd World Health Assembly



Wonca WHO Liaison Michael Kidd Meeting with WHO Mental Health Policy and Programs Coordinator, Dr Michelle Funk



President Chris van Weel Brings Greetings from Wonca to the World Health Assembly



Wonca President Chris van Weel and Professor Jan De Massaeneer Testifying on Behalf of the Primary Health Care Resolution at 62nd World Health Assembly

This year's World Health Assembly was shortened from ten to five days in order to allow delegates to return to their countries to continue the public health battle against Influenza A/H1N1 ("Swine Flu"). After registration the Wonca delegation was sent to a medical table. We expected we would be scanned to see if we were febrile and maybe quizzed about respiratory symptoms. Instead we were handed a plastic bag containing a small packet of tissues, a small bottle of hand cleaner and a handout on etiquette for people with flu-like symptoms showing us how to cover our mouth and nose when coughing or sneezing, how to dispose of used tissues and how to clean our hands after coughing or sneezing. Simple but important messages.

Address by the WHO Director-General

One of the highlights of the WHO World Health Assembly is the annual address where the Director-General,

Dr Margaret Chan, outlines the health challenges facing the world and the priorities for the work of the WHO over the coming year.

Dr Chan described how “our world is dangerously out of balance, and most especially so in matters of health, and the impact will be greatest in the developing world.” She said that “Populations all around the world can be grateful that health officials are recommitting themselves to primary health care. This is the surest route to greater equity in access to health care.

“Public health can be grateful for the backing from the Commission on Social Determinants of Health. The great gaps in health outcomes are not random. Much of the blame for the essentially unfair way our world works rests at the policy level,” said Dr Chan.

“Time and time again, health is a peripheral issue when the policies that shape this world are set. When health policies clash with prospects for economic gain, economic interests trump health concerns time and time again. Time and time again, health bears the brunt of short-sighted, narrowly focused policies made in other sectors. Equity in health matters. It matters in life-and-death ways. The HIV/AIDS epidemic taught us this, in a most visible and measured way”, said Dr Chan.

Dr Chan went on to look at the crises affecting the world. “Last year, our imperfect world delivered, in short order, a fuel crisis, a food crisis, and a financial crisis. It also delivered compelling evidence that the impact of climate change has been seriously underestimated.

“These crises come at a time of radically increased interdependence among nations, their financial markets, economies, and trade systems. All these crises are global, and all will hit developing countries and vulnerable populations the hardest. All (these crises) will show the consequences of decades of failure to invest in health systems, decades of failure to consider the importance of equity.”

Dr Chan went on to speak about the prospect of the first influenza pandemic of this century. “New disease are, by definition, poorly understood when they emerge, and this is most especially true when the causative agent is an influenza virus. A defining characteristic of a pandemic is almost universal vulnerability of the world’s population to infection. While many questions do not have firm answers right now, I can assure you on one point. When WHO receives information of life-saving importance, such as the heightened risk of complications in pregnancy women, we alert the international community immediately. An

influenza outbreak is an extreme expression of the need for solidarity before a shared threat.”

Dr Chan went on to describe how a pandemic would affect the most vulnerable populations of people on the planet. “The next pandemic will be the first to occur since the emergence of HIV/AIDS and the resurgence of tuberculosis, also in its drug-resistant forms. Most of these people live in countries where health systems are already overburdened, understaffed, and poorly funded. What will happen if sudden surges in the number of people requiring care for influenza push already fragile health services over the brink? What will happen if the world sees the end of an influenza pandemic, only to find itself confronted, say, with an epidemic of extensively drug-resistant tuberculosis? We have good reason to believe that pregnancy women are at heightened risk of severe or fatal infections with the new virus. We have to ask the question. Will spread of H1N1 virus increase the already totally unacceptable levels of maternal morbidity, which are so closely linked to weak health systems?”

Dr Chan concluded, “In the midst of all these uncertainties, one thing is sure. When an infectious agent causes a global public health emergency, health is not a peripheral issue. It moves straight to centre stage. An influenza pandemic is an extreme expression of the need for global solidarity. We are all in this together.”

Primary Health Care

The World Health Assembly votes on resolutions brought forward by member nations. This year Japan had developed a resolution about primary health care, including the need for health systems strengthening.

The resolution called for all member nations to reinvigorate their health care systems through a strengthening of primary health care. In partnership with The Network: Towards Unity for Health, Wonca had recommended that the resolution be amended to include mention of the need to invest in the human capital of primary health care and that member countries should be urged to train sufficient numbers of health workers, in particular primary health care nurses, midwives, community based allied health professionals and family physicians. Several Wonca member organisations had contacted their national Minister of Health and advocated for this change in wording.

Over half of the member countries spoke to this resolution and all spoke in favour of its adoption, as well as many making additional recommendations for improvement. For the first time at the WHO World Health

Assembly, the President of Wonca was invited to address the assembly. Our President, Professor Chris van Weel spoke in support of the resolution and also in favour of the change in wording which had been recommended by the delegation from the Netherlands. This was a historic moment in the history of Wonca.

The resolution was passed with the amendment recommended by Wonca. It is important to note that the resolution calls on the WHO to ensure adequate funding for health system strengthening and revitalizing primary health care in its budget for 2010-2011 and to report back to the World Health Assembly in 2010 on its progress in reinvigorating primary health care throughout the world and then every two years thereafter. The WHO now has primary health care firmly on its agenda.

The UN Secretary-General addresses the World Health Assembly

Among the plenary speakers at this year's World Health Assembly was the Secretary General of the United Nations, Ban Ki-Moon, who spoke about the importance of health to the well being of the whole world especially during a time of financial austerity. He stated that "cutting back on expenditure on health in a time of recession is not only morally wrong, it is a foolish mistake." He also spoke about the continuing unacceptably high rates of maternal mortality in developing nations and how "in the 21st century, no-one should have to give her life, to give life."

Wonca at the World Health Assembly

Wonca President, Chris van Weel had a busy time at the World Health Assembly. As well as speaking to the resolution on primary health care, Chris was an invited speaker at a special forum on The Role of Civil Society in Primary Health Care Renewal; this was an open dialogue at the Palace of Nations with WHO Assistant Director-General Carissa Etienne and representatives from the People's Health Movement, the Global Health Council and the Christian Health Association of Kenya. Chris also spoke at an event sponsored by the World Medical Association at the Headquarters of the International Red Cross on the dangers of counterfeit medications in many developing parts of the world.

Wonca held meetings with many of the staff members of the WHO involved in projects around the world involving Wonca members, including mental health, classification, rural health, health workforce, chronic disease prevention and management, women's health, occupational health and several other aspects of primary health care.

Final word – Climate Change and Health

The WHO has developed a strong focus on the health impacts of climate change. This was the theme of the 2008 WHO World Health Day. The WHO has produced a fact sheet on the Top Ten Actions that Health Professionals can take to Protect Health from Climate Change. It is available at www.who.int/phe and details what our global representative organisations can do, what our national organisations can do, and what each of us can do as individuals. I commend it to you.

Professor Michael Kidd
WHO Liaison person for the World Organization of Family Doctors (Wonca)
michael.kidd@flinders.edu.au

MEMBER AND ORGANIZATIONAL NEWS

19TH WONCA WORLD CONFERENCE IN CANCUN, MEXICO MAY 2010

On behalf of the Host Organizing Committee of the 19th Wonca World Conference of Family Doctors (Wonca Cancun 2010), I have the great pleasure of inviting you to join more than 5,000 of our international colleagues in Cancun, Mexico, from May 19-23, 2010. Give us the opportunity to share with you our culture as well as our hospitality.

Through Wonca Cancun 2010 we will analyze issues related with the technical and social role of Family Doctors in the achievement of the main international goals proposed during the 2000 Millennium Summit, the Millennium Development Goals (MDGs). We also will continue the Wonca tradition of distributing cutting edge technology, promoting global calls to action and announcing practical applications of the latest medical progress.

The Scientific Program for the Wonca Cancun 2010 will be structured around the MDGs most strongly linked to Family Medicine, and will respond also to Wonca Goals and scientific needs from the seven Wonca geographical regions.

The Plenary Sessions will include leaders of the United Nations health organizations as well as representatives of

other international organizations. The Program will also include a variety of activities oriented to increase and strengthen the knowledge and skills of all the potential participants: free standing papers, workshops, symposiums, poster presentations, and academic activities with Wonca Working Parties, Task Forces and Special Interest Groups.

The 19th Wonca world conference, the first ever organized in a Latin American country, promises to be a very stimulating international event with delegates coming from all Wonca regions. Wonca Cancun 2010 will provide the opportunity to bring together experts in family medicine and primary care from all over the world to exchange ideas, information and the most up to date findings allowing us to enhance family health across diverse cultures.

And for the delegates and their families the possibilities for entertainment, adventure and contact with history and nature are endless. Cancun truly has it all.

For more information and to register, please visit us at: www.wonca2010cancun.com

We look forward to seeing you at Wonca Cancun 2010!

Dr. Javier Dominguez del Olmo
Honorary Chairman
Host Organizing Committee
Wonca Cancun 2010

NOMINATIONS SOLICITED FOR WONCA MEMBER HONORS

The Wonca Nominating and Awards Committee has the responsibility of recommending to Wonca Council, Fellows of Wonca and Honorary Life Direct Membership, and to the Executive Committee, a recipient for the Wonca Foundation Award.

Fellowship of Wonca

The Fellowship of Wonca is Wonca's most prestigious award. It is awarded to individuals who have rendered outstanding service to the Wonca Organization. It is awarded every three years at meetings of the Wonca Council, but only if a suitably qualified candidate is identified.

It is the expressed wish of Wonca that this should continue to be a prestigious, well earned honour.

To date, the Wonca Fellowship have been awarded to:

- Dr Prakash Chand Bhatla, *(Deceased)* India, 1976
- Donald I Rice CM MD, *(Deceased)* Canada, 1980
- Professor Bent Guttorm Bentsen, Norway, 1989
- Dr David A Game AO KSJ, Australia, 1989
- Professor Max R Polliack, *(Deceased)* Israel, 1989
- Dr Jack Froom, *(Deceased)* USA, 1992
- Dr Lotte Newman CBE, United Kingdom, 1995
- Dr M K Rajakumar, *(Deceased)* Malaysia, 1995
- Giora Almagor MD, Israel, 1995
- Dr Douglas G Garvie OBE, United Kingdom, 1998
- A/Professor Goh Lee Gan, Singapore, 1998
- Donald W Rae OC MD *(Deceased)*, Canada 1998
- Professor Wesley E Fabb, Australia, 2001
- Professor Vincent Hunt, USA, 2004
- Professor Roger Strasser, Australia/Canada, 2004
- Professor Charles Bridges-Webb, Australia, 2004
- Professor Henk Lamberts *(Deceased)*, Netherlands, 2004
- Professor Richard Grol, Netherlands, 2004
- Dr Giorgio Visentin, Italy, 2004

Honorary Life Direct Membership

Honorary Life Direct Membership is awarded in recognition of contributions to the work of the Wonca Organization and/or to general practice/family medicine on a world basis.

Honorary Life Direct Membership is a category available to recognise significant contributions to Wonca in those instances where the award of Fellow would not be appropriate, but is felt that some recognition should be given. Thus, if a nominee for Fellowship is not recommended by the Nominating and Awards Committee for Fellowship, it may make a recommendation for Honorary Life Direct Membership.

All Fellows and Past Presidents of Wonca receive the award of Honorary Life Direct Membership. Council has resolved that Honorary Life Direct Membership be restricted to 25.

Nominations for the Fellowship or Honorary Life Direct Membership may be made by Member Organizations, Executive Committee or Council. Details of the merit of the candidate being proposed for the Award and a curriculum vitae should be submitted to the Chair of the Nominating and Awards Committee.

In making its recommendations, the Nominating and Awards Committee ensures that the prestigious nature of the Fellowship is at all times maintained, and that the total number of persons holding the Honorary Life Direct Membership is restricted to the number determined by Council.

The Awards are presented to the successful nominees at the ceremony at the World Conference. All nominations for the Fellowship of Wonca and Honorary Life Direct

Membership must be accompanied by a detailed curriculum vitae detailing the nominee's contribution to the advancement of Wonca, his/her own organization and the discipline of general practice/family medicine on an international scale.

NOMINATIONS SOLICITED FOR WONCA FOUNDATION AWARD

The Wonca Foundation Award has been made possible by an initial donation of ten thousand Pounds Sterling from the Royal College of General Practitioners. This Award is made once every three years at the Wonca Council Meeting. If the successful winner is in attendance, the Award is presented to him/her at the World Conference.

The Award is to be used to further the aim of "fostering and maintaining high standards of care in general practice/family medicine" by enabling physicians to travel to appropriate countries to instruct in general practice/family medicine, and appropriate physicians from developing countries to spend time in areas where they may develop special skills and knowledge in general practice/family medicine.

The value of the Award is determined by the Executive Committee. The current amount of the Award is GB Pounds £1,500. A certificate is given with the Award.

Application Procedure for the Wonca Foundation Award

Applications should be submitted to the Chair of the Nominating and Awards Committee, with details of the project to which the Award would be applied, together with the candidate's credentials. A relevant curriculum vitae is required. There is no official application form.

The application should outline the specific purpose for which the Award will be used, the time frame, and how the objectives would be achieved. The recipient will be expected to furnish the Executive Committee with a detailed report of his/her activities at the conclusion of the task, and this report would be the property of Wonca. If the project should extend over more than one year, a progress report to the Executive Committee is required.

Nominations for the above 3 categories are to be sent to:

Professor Richard Roberts, MD, JD
 Wonca President Elect and Chair,
 Nominating and Awards Committee
 by email Richard.Roberts@FAMMED.
 WISC.EDU

and to the Wonca World Secretariat
 by email admin@wonca.com.sg

and the original signed copies by
 post to:

World Organization of Family Doctors
 (Wonca)
 7500A Beach Road
 #12-303 The Plaza
 SINGAPORE 199591

NOMINATIONS FOR WONCA AWARD OF EXCELLENCE IN HEALTH CARE: THE "5-STAR DOCTOR"

Nominations are called for the Wonca Award of Excellence in Health Care, otherwise known as "The 5-Star Doctor" at the Wonca Regional level.

This is an award to be conferred on physicians, who in the opinion of the Council, have made a significant impact on the health of individual and communities, through personal contributions to health care and the profession. It is instituted in

an attempt to increase the global development of Family Medicine, global networking and partnership. The award is preferably given to those who are still active in the field for which they are nominated. Nominations are not limited to Wonca members.

The award will be offered on a Regional basis and on a Global basis. The Regional Awards may be awarded on an annual basis and the Global Award be awarded every third year (ie in the year of the Wonca World Conference). The Global award will take the form of a crystal trophy and a certificate.

Suitably motivated and validated nominations for Regional Awards should be submitted to the Chairman of the Nominating and Awards Committee and to the appropriate Regional President for regional consideration. The Global Award will be chosen from the recipients of Regional Awards for that triennium.

The criteria for the Wonca Regional Five Star Doctor Award are:

1. A nominee must have the attributes of the 5-Star Doctor (see below).
2. A nominee should be a serving physician in mid-career who in addition to providing regular service:
 - provides innovative services to a community or special group
 - developed services where they were previously not available
 - supports colleagues in another region, country or college and also performs academic work (teaching, research, quality assurance) of exceptional quality and relevance
3. A nominee can work outside his or her region, or create something that can be used outside his or her region or serve as a role model to other regions

4. The attributes of the 5-star doctor are:

- * a care provider who considers the patient as an integral part of a family and the community and provides a high standard of clinical care (excluding or diagnosing serious illness and injury, managing chronic disease and disability and provides personalised preventive care whilst building a trusting patient- doctor relationship
- * a decision maker, who chooses which technologies to apply ethically and cost-effectively while enhancing the care that he or she provides;
- * a communicator, who is able to promote healthy life-styles by emphatic explanation, thereby empowering individuals and groups to enhance and protect their health;
- * a community leader, who has won the trust of the people among whom he or she works, who can reconcile individual and community health requirements and initiate action on behalf of the community;
- * a team member, who can work harmoniously with individuals and organisations, within and outside the health care system, to meet his or her patients and community's needs.

Contact details:

Professor Rich Roberts
Chair, Wonca Nominating and
Awards Committee Email admin@
wonca.com.sg

Regional Presidents:

Wonca Africa, Prof Khaya Mfenyana;
kmfenyana@wsu.ac.za
Wonca Asia Pacific: Dr Donald Li;
dr2318@hotmail.com

Wonca Europe: Prof Igor Svab;
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WONCA CLARIFICATION OF PRIOR ARTICLE IN WONCA NEWS

In the previous issue of Wonca News, an interview was published ('Pfizer, Family Doctors and Improving Health') that gave an incorrect impression of how Wonca is involved with the pharmaceutical industry. The Wonca Executive was not involved in the editorial decision to conduct or publish the interview, but the Executive is responsible for all matters Wonca. At its just completed annual meeting, the Executive discussed this interview at length and felt that its promotional nature was not consistent with the policies or integrity of Wonca. For that lapse, I would like to apologize on behalf of the Executive.

In two aspects, the interview fell painfully short of the standards that Wonca subscribes to and operates under – standards that should have been referred to whenever presenting Wonca's engagement with (pharma) industry. First, Wonca has an explicit policy with regards to its dealings with the pharmaceutical industry. With this, the Wonca Council has endorsed the current sponsorships of Wonca website, conferences, and other activities. The Wonca CEO operates in his dealings with industry under this policy, and his proposals are appraised by Executive against it. In addition, all members of Executive

and the CEO have submitted a statement of their personal conflicts of interest.

The second point is the role of the pharmaceutical industry in improving the health of people. There can be no doubt that the development and production of drugs are important factors in improving health, and that makes the pharmaceutical industry one of the partners Wonca and other players in the field of global health deal with. But it is unduly naïve to describe – or accept without further challenge – that the only mission of the pharmaceutical industry is to work for the health of people. Marketing of drugs and making a profit from their products are part of their mission as well and this is where the conflict of interest lies. That is in itself no reason to avoid contacts, but any collaboration should take place with reference to the potentially conflicting – and sometimes damaging – interests that are at stake.

Times change, and policies should change to reflect that. During the past months the guidelines for the interaction of the medical and scientific community with industry have been revised. Wonca's policies regarding interactions with the pharmaceutical industry need to continue to evolve. At the Cancun Council, Executive will present proposals to upgrade the conditions and precautions that guide this interaction. Upon acceptance by Council, that will be the new frame of reference.

Professor Chris van Weel
President of Wonca

RESOURCES FOR THE FAMILY DOCTOR

THE HISTORIC WHA RESOLUTION ON PRIMARY HEALTH CARE

As evidenced by the historic World Health Assembly (WHA) resolution on this subject, a growing number of World Health Organization (WHO) member states and the world's political and international health leaders recognize the urgent need to make a major, sustained commitment to strengthening health systems based upon primary health care. This renewed political interest presents the important opportunity needed to make sustainable improvements that benefit across disease areas and health programmes, and redouble global efforts to meet the challenge of achieving the Millennium Development Goals.

WHO maintains a link with key resources related to primary health care at: <http://www.who.int/healthsystems>

On the link, one may download for free The WHO 2008 World Health Report, "Primary Health Care: Now More Than Ever", and obtain additional information related to the WHA Resolution on Strengthening Health Systems Based upon Primary Health Care.

The historic WHA Resolution 62.12 adopted in Geneva on May 22, 2009 is published below.

SIXTY-SECOND WORLD HEALTH ASSEMBLY WHA62.12 Agenda item 12.4 22 May 2009

Primary health care, including health system strengthening

The Sixty-second World Health Assembly, welcoming the efforts of the Director-General, and recognizing the pivotal role that WHO plays in promoting primary health care globally.

Having considered the report on primary health care, including health system strengthening; Reaffirming the Declaration of Alma-Ata (1978) and the United Nations Millennium Declaration (2000); Recalling the Ottawa Charter for Health Promotion (1986) and subsequent relevant resolutions of WHO regional committees and Health Assemblies; Recalling also the discussions at the series of summits and global, regional and national conferences that have reaffirmed the commitment of Member States to primary health care and strengthening health systems.

Noting the growing consensus in the global health community that vertical approaches, such as disease-specific programmes, and integrated health systems approaches are mutually reinforcing and contribute to achieving the health-related Millennium Development Goals; Recognizing the need to draw on the experiences, both positive and negative, of primary health care in the years since the Declaration of Alma-Ata and the Millennium Declaration;

Welcoming *The world health report 2008*, published on the thirtieth anniversary of the international conference of Alma-Ata, that identifies four broad policy directions for reducing health inequalities and improving health for all: tackling

health inequalities through universal coverage, putting people at the centre of care, integrating health into broader public policy, and providing inclusive leadership for health; and also welcoming the final report of the Commission on Social Determinants of Health; Reaffirming the need to build sustainable national health systems, strengthen national capacities, and honour fully financing commitments made by national governments and their development partners, as appropriate, in order to better fill the resource gaps in the health sector.

Reaffirming also the need to take concrete, effective and timely action, in implementing all agreed commitments on aid effectiveness and to increase the predictability of aid, while respecting recipient countries' control and ownership of their health system strengthening, more so given the potential effects on health and health systems of the current international financial and food crises and of climate change.

Strongly reaffirming the values and principles of primary health care, including equity, social justice, universal access to services, multisectoral action, decentralization and community participation as the basis for strengthening health systems;

1. URGES Member States:

- (1) to ensure political commitment at all levels to the values and principles of the Declaration of Alma-Ata, keep the issue of strengthening health systems based on the primary health care approach high on the international political agenda, and take advantage, as appropriate, of health-related partnerships and initiatives relating to this issue, particularly to support achievement of the health-related Millennium Development Goals;

- (2) to accelerate action towards universal access to primary health care by developing comprehensive health services and by developing national equitable, efficient and sustainable financing mechanisms, mindful of the need to ensure social protection and protect health budgets in the context of the current international financial crisis;
 - (3) to put people at the centre of health care by adopting, as appropriate, delivery models focused on the local and district levels that provide comprehensive primary health care services, including health promotion, disease prevention, curative care and palliative care, that are integrated and coordinated according to needs, while ensuring effective referral system;
 - (4) to promote active participation by all people, and re-emphasize the empowering of communities, especially women, in the processes of developing and implementing policy and improving health and health care, in order to support the renewal of primary health care;
 - (5) to train and retain adequate numbers of health workers, with appropriate skill mix, including primary health care nurses, midwives, allied health professionals and family physicians, able to work in a multidisciplinary context, in cooperation with non-professional community health workers in order to respond effectively to people's health needs;
 - (6) to encourage that vertical programmes, including disease-specific programmes, are developed, integrated and implemented in the context of integrated primary health care;
 - (7) to improve access to appropriate medicines, health products and technologies, all of which are required to support primary health care;
 - (8) to develop and strengthen health information and surveillance systems, relating to primary health care in order to facilitate evidence-based policies and programmes and their evaluation;
 - (9) to strengthen health ministries, enabling them to provide inclusive, transparent and accountable leadership of the health sector and to facilitate multi-sectoral action as part of primary health care;
2. REQUESTS the Director-General:
 - (1) to ensure that WHO reflects the values and principles of the Declaration of Alma-Ata in its work and that the overall organizational efforts across all levels contribute to the renewal and strengthening of primary health care, in accordance with the findings of the Commission on Social Determinants of Health;
 - (2) to strengthen the Secretariat's capacities, including capacities of regional and country offices, to support Member States in their efforts to deliver on the four broad policy directions for renewal and strengthening of primary health care identified in The world health report 2008;
 - (3) to collate and analyse past and current experiences of Member States in implementing primary health care and facilitate the exchange of experience, evidence and information on good practice in achieving universal coverage, access and strengthening health systems;
 - (4) to foster alignment and coordination of global interventions for health system strengthening, basing them on the primary health care approach, in collaboration with Member States, relevant international organizations, international health initiatives, and other stakeholders in order to increase synergies between international and national priorities;
 - (5) to ensure adequate funding for health system strengthening and revitalizing primary health care in the Programme budget 2010–2011;
 - (6) to prepare implementation plans for the four broad policy directions: (1) dealing with inequalities by moving towards universal coverage; (2) putting people at the centre of service delivery; (3) multisectoral action and health in all policies; (4) inclusive leadership and effective governors for health; to ensure that these plans span the work of the entire Organization, and to report on these plans through the Executive Board to the Sixty-third World Health Assembly and subsequently on progress every two years thereafter.

Eighth plenary meeting, 22 May 2009

GLOBAL MEETINGS FOR THE FAMILY DOCTOR

WONCA WORLD AND REGIONAL CONFERENCE CALENDAR

Wonca Europe Regional Conference, Basel, Switzerland 2009

Host : Swiss Society of General Medicine SSMG/SGAM
 Theme : The Fascination of Complexity - Dealing with Individuals in a Field of Uncertainty
 Date : 16 - 19 September 2009
 Venue : Congress Center Basel, Switzerland
 Contact : Dr Bruno Kissling
 Chair Host Organizing Committee
 Swiss Society of General Medicine SSMG/SGAM
 Elfenuweg 6,
 CH-3006 Bern
 Switzerland
 Tel : 0041 352 48 50
 Fax : 0041 352 28 84
 Email : bruno.kissling@hin.ch
 Web : www.woncaeurope2009.org

2nd Africa Regional Conference, Rustenburg, South Africa 2009

Host : South Africa Academy of Family Practice/Primary Care Flemish Interuniversity Council
 Theme : A Celebration of Diversity
 Date : 25-28 October 2009
 Venue : Rustenburg Civic Centre, South Africa
 Contact : Professor Gboyega A Ogunbanjo
 Chairperson - Local Organizing Committee
 Box 222
 Medunsa 0204
 South Africa
 Tel : 27 82 417 7755
 Fax : 27 86 610 2440
 Email : gao@intekom.co.za
 Web : www.woncafrica2009.org

19th Wonca World Conference, Cancun 2010

Host : Mexican College of Family Medicine
 Theme : Millennium Development Goals: The Contribution of Family Medicine
 Date : 19-23 May, 2010
 Venue : Cancun Conventions and Exhibition Center, Cancun Mexico
 Contact : Mexican College of Family Medicine
 Anahuac #60
 Colonia Roma Sur
 06760 Mexico, D.F.
 Tel : 52-55 5574
 Fax : 52-55 5387
 Email : jdo14@hotmail.com

Wonca Europe Regional Conference, Malaga, Spain 2010

Host : The Spanish Society of Family and Community Medicine (SEMFYC)
 Theme : Family Medicine into the Future: Blending Health and Cultures.
 Date : 6-9 October 2010
 Venue : Málaga Conference Hall (Palacio de Ferias y Congresos de Málaga)
 Contact : Dr. Luis Gálvez-Alcaraz
 Chair Host Organizing Committee
 Spanish Society Family and Community Medicine
 Address: Portaferrissa, 8, pral. 08002 BARCELONA (España)
 Tel : 93 317 03 33
 Fax : 93 317 77 72
 Email : luisgalvez@semfyc.es

WONCA Europe 2012

Date : July 4-7, 2012
 Venue : Austria Center Vienna (ACV)
 Theme : The Art and Science of General Practice

Contact : Congress-Office:
 Vienna Medical Academy
 Alser Strasse 4, Unicampus
 AAKH
 1090 Vienna

President:
 Dr. Erwin Rebhandl
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MEMBER ORGANIZATION AND RELATED MEETINGS

The 2009 Family Medicine Global Health Workshop , Colorado 2009

Host : American Academy of Family Physicians
 Date : September 10-12, 2009
 Venue : Omni Interlocken Resort, Broomfield, Colorado
 Contact : Rebecca Janssen
 Address : AAFP
 1400 Tomahawk Creek Parkway
 Leawood, KS 66211
 Tel : 1-800-274-2237 ext. 4512
 Fax : 1- 913- 906-6088
 Email : rjanssen@aafp.org
 Web : www.aafp.org/intl/workshop

The 18th European Academy of Teachers of General Practice (EURACT) Workshop, Bled Slovenia 2009

Host : Slovene family medicine society under the patronage of European academy of teachers in GP/FP (EURACT)
 Theme : Learning and teaching about the impact of medicalisation in general practice/family medicine
 Date : September 29 – October 3, 2009
 Location: Bled, Slovenia
 Venue : Hotel Jelovica
 Planning: Manfred Maier (Austria), Jaime Correia de Sousa (Portugal) Yonah Yaphe (Israel), Justine Allen (Great Britain), Janko Kersnik (Slovenia), Marija Petek-Ster (Slovenia), Nena Kopeavar-Gucck (Slovenia)
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 Tel : +386-4-58-84-603
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 Email : janko.kersnik@gmail.com
 Web : <http://www.drmed.org/novica.php?id=16146>

American Academy of Family Physicians (AAFP)

Annual Congress of Delegates and Scientific Assembly, Boston 2009

Date : October 12-18, 2009
 Venue : Westin Waterfront Hotel and Convention Center
 Boston, Massachusetts
 Contact : AAFP
 11400 Tomahawk Creek Parkway
 Leawood, Kansas 66211-2672, USA
 Tel : 1 913 906 6000
 Fax : 1 913 906 6075
 Email : international@aafp.org
 Web : <http://www.aafp.org>

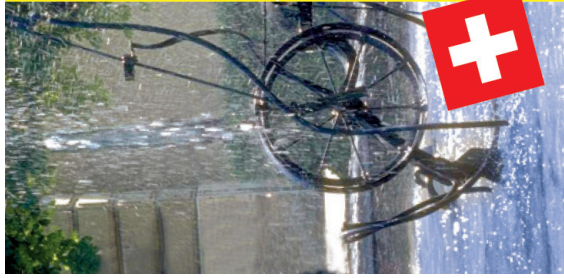
College of Family Physicians of Canada (CFPC)

Annual Family Medicine Forum, Calgary 2009

Date : October 29-31, 2009
 Venue : Telus Convention Centre
 Calgary, Alberta
 Web : www.cfpc.ca/FMF

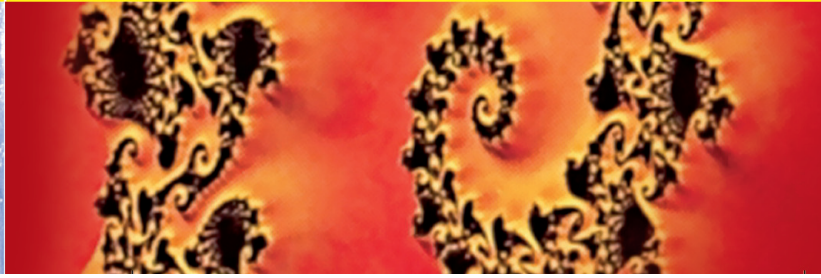
4th Triennial PAN-Caribbean Family Medicine Conference, Barbados 2009

Host : The Caribbean College of Family Physicians
 Theme : New Directions in Primary Care
 Date : November 20-22, 2009
 Location: Bridgetown, Barbados
 Contact : The Caribbean College of Family Physicians
 19a Windsor Avenue,
 Kingston 5
 Jamaica, West Indies
 Tel/Fax : 876 946 0954
 Email : ccfp@cwjamaica.com
 Web : <http://www.caribgp.org>



Wonca EUROPE 2009 conference

16–19 September 2009
Basel, Switzerland



The Fascination of Complexity –
Dealing with Individuals in a Field of
Uncertainty

From 1 June to 30 August

Fees: 550€ delegates

350€ young doctors

120€ students



SSMG
SGAM

www.woncaeurope2009.org