

WONCANews

An International Forum for Family Doctors



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FROM THE WONCA PRESIDENT :

VIEW FROM A MOUNTAIN

On Wednesday, I climbed a mountain. I did not start the day expecting to climb. If I had known, I would have worn something more appropriate than a suit. Yet, Wednesday was the best day of a wondrous week.

The week began early Tuesday morning at the Dushanbe international airport (DYU). Arriving from St Petersburg at 2:30 am, passport control at DYU was like a rugby scrum. Several hundred of us were packed so tight that we could have lifted our feet and remained suspended for the 90 minute wait to clear immigration. Most of our crowd appeared to be Tajikistani men, likely returning home from their jobs in Russia. Despite the claustrophobic conditions, everyone waited patiently and maintained good humor. When an arriving woman or young child approached the throng, the multitude parted magically, letting them pass to the head of the line. Welcome to Tajikistan – a nation that ranks in the lowest quartile among the world’s economies, but among the top countries I’ve visited when measuring generosity.

My week in Tajikistan was as a member of a delegation of Physicians With Heart (PWH), a program sponsored by the American Academy of Family Physicians Foundation, Heart to Heart International, and the U.S. State Department. Once each year, PWH delivers donated medications and medical equipment worth millions of U.S. dollars to one of the former Soviet states in central Asia. The program also includes medical education symposia with U.S. family doctors who pay their own way to provide educational sessions on family medicine and other topics requested by the local doctors. A third component is a Children’s Project that involves other volunteers who paint and renovate orphanages, bring clothing and other necessities for the children, and distribute goodie bags with sweets, balloons, and similar items.

Later the morning of my arrival, our group had a briefing at the U.S. Embassy. We learned of the glories of the ancient Samanid Empire and its

prized cities of Samarkand and Bukhara. We heard how the Soviet Union in 1929 sculpted Tajikistan into its current bizarre borders, in order to reduce Tajik influence in the region. The Tajiks, historically a proud and urban people, were left with few cities and a landlocked country, 90% of which is mountainous. The eventual collapse of the Soviet system sparked a terrible civil war from 1992–1997, reducing Tajikistan to a mere shadow of its former self. Average income today is 85% of what it was 10 years ago. More than one third of the economy reflects remittances from Tajikistani workers in other countries, mostly Russia. Many Tajik villages consist of women with young children and the elderly.



View from a mountain in Tajikistan

The mountains of Tajikistan are quite beautiful, with several peaks in the Pamir range in excess of 7000 meters. The mountains provide fresh water and generate more hydroelectric power than Tajikistan can use. Yet, even these benefits are denied to the rural Tajikistanis. To get fresh water from the mountains to the people involves pumps, which require electricity. Much of the hydroelectric power is diverted to a large aluminum plant in the west of the country or sold to Afghanistan and Russia. Which brings me back to Wednesday.

Early Wednesday morning found me sharing a car with the driver and three other family doctors: an American woman from Montana, a Swiss man who helps in the family physician re-training program in Tajikistan, and a Tajikistani woman who also works with the re-training program and served as translator. Tajikistan’s one medical school has a six year curriculum. Traditionally, students would spend their sixth year concentrating on pediatrics or obstetrics-gynecology and then go out to the villages to practice. Over the past decade, Tajikistan has committed to the more comprehensive model of family medicine and has re-trained many of these village doctors to become family doctors. They have a parallel program to re-train nurses to work as family health center nurses.

We headed west past the huge aluminum plant and toward Uzbekistan, and the mountains. After leaving paved road, we bounced over rutted dirt roads and crossed bridges that seemed to have more gaps than bridge. The further we drove, the more I came to understand the meaning of “off road”. Even the goats began to look at us as if to ask, “Are you sure you want to go there?”

At the end of the rutted road was our destination: a small health center in a remote village within sight of the Uzbek border. Doctor Abdujabor Kurbonov has been the only doctor in this rural region for more than 20 years. In addition to the health center, he also serves two rural “health houses,” six and nine kilometers away, which he visits once a week. Outside the health center waited a long line of women with young children and babies. Several old men sat beneath a nearby tree. We spent the morning watching Dr Kurbonov greet and then minister gently and efficiently to each successive patient that entered his office. Shifting fluently between Tajik, Uzbek, and Russian, his comforting tone, thorough examination, and efforts to make sure that each person understood and was understood were most impressive.



Dr Kurbonov on the street

Dr Kurbonov talked about his life. While usual health center hours are Monday through Saturday, he has no time off. His home is 40 meters from the health center, on the other side of the rutted road. Patients or their relatives feel free to knock on his door anytime. Earning between 35 to 50 U.S. dollars per month, he is expected to buy his own equipment and even the medications that he gives to patients without the

means to pay. He has nine children, including a son and daughter who are in medical school. He hopes his daughter will join him in his practice. He has encouraged her to take more courses in laboratory medicine as he would like to develop a small lab in the practice.



Dr Kurbonov performing an antenatal check

Each year, Tajikistani husbands get one month off their jobs in Russia and return to their villages to visit their families. Nine months later, their wives give birth to another baby. While contraceptives are readily available, husbands apparently prefer that their wives use pregnancy as their primary form of contraception. The health center averages 3–5 births each month, shared between the midwife and Dr Kurbonov. Testimony to his standing in the community is the fact that his Muslim neighbors trust him with the care of their wives during their 11 month absence. Each day includes several home visits, usually uphill – both ways. Which brings me back to the mountain.

At the end of the morning, we set out for a home visit. He pointed to a house near the peak, about two kilometers up an 8% grade. I said, “You’re kidding”. He grinned and started walking. As we ambled along, schoolchildren ran up to give him a hug or a ‘high five’. Old men waved and invited conversation. He knew which dogs, donkeys, and bulls to give a wide berth as we trudged through pastures on our ascent. Each homeowner we passed

invited us in for tea and Tajik bread. Their hospitality was a consistent experience in Tajikistan – those with virtually nothing were generous in sharing nearly everything they had.

The home visit involved a woman who underwent cesarean birth two months earlier, and developed a wound seroma. She was staying in her mother’s mud home, while her husband was working in Russia. The home was swept clean inside, floors covered by the ever present red Tajik rugs. Dr Kurbonov also examined her infant son, whom he had been following for a respiratory infection, now nearly resolved. After tea, bread, and two improving patients, we started back down to the village.

During the rest of the week, I observed young family doctors in training, lectured at the medical symposium, met Health Ministry officials, visited an orphanage for the deaf, and enjoyed the culture and hospitality of the Tajikistanis. In short, it was an extraordinary and meaningful experience. My mind kept going back however, to a moment in the rural health center.



Baby with polio brought to Dr Kurbonov’s office

A young mother had walked nine kilometers to have her 14 month old baby seen by Dr Kurbonov. The baby was one of the more than 150 Tajikistanis to have recently contracted polio. He had been immunized, but the oral vaccine was likely ineffective because it required refrigeration

– which required electricity. She reported that his left arm and bilateral leg weakness seemed a bit improved of late. She had taken him to Dushanbe to see a pediatric neurologist, as any despairing young mother would do. The specialist had written three prescriptions that were likely to be of no benefit, but reflected the standard cocktail given to every child with neurologic problems. Dr Kurbonov explained firmly and compassionately that she could not afford the medications; that they were not going to cure the baby; and that her massaging, exercising, and feeding the baby as she was doing were the best possible treatments. She was the best medicine for the baby. I felt like I was watching an artist at work to see this skilled family doctor pull together everything he knew about her, her family, and her community into practical and relevant advice, while giving hope to a woman in desperate need of some.

And that moment took me back to the mountain. As we left the home visit, Dr Kurbonov strode out ahead of the group, leading the way back to the village. Briefly pausing to soak up the warm sun and enjoy the vista below, I watched him side step down the steep incline. I was reminded of something that G K Chesterton wrote, “One sees great things from the valley, only small things from the peak.” I thought to myself, “Chesterton got it wrong.” Looking down, I could see something from the peak that was great – a family doctor who had dedicated himself to the people of his community. In that moment, I felt humbled and honored to have spent a day with greatness.

We later asked Dr Kurbonov if there was anything he wanted or needed. He said two things came to mind. It would be nice if his patients could have chairs to sit on while waiting to see him. They also need clean water to wash. The other American and I are working on that. It seemed the least we could do after having our spirits lifted and our life's work reaffirmed by a climb up the mountain.

All photos courtesy of Lisa Fleischer, MD.

Professor Richard Roberts
President
World Organization of Family Doctors

FROM THE CEO'S DESK:

WONCA CORE EXECUTIVE MEETING IN MALAGA, SPAIN.

The Wonca Core Executive (comprising the President, President-Elect, Immediate Past President, Honorary Treasurer and CEO, with the Admin Manager providing support) met for two days in early October 2010 in Malaga, Spain just prior to the Wonca Europe Regional Conference.

Whilst there was still a rather long list of agenda items to cover for the meeting, these had been significantly reduced by the practice introduced in July 2010, by the current Wonca President, of holding a monthly teleconference meeting of the Core Executive. These monthly teleconference discussions facilitated the resolution of a large number of items that would have otherwise made the Malaga Core Executive meeting agenda even longer.

Besides the key issues discussed at the meeting, the Core Executive meeting also covered the usual items of business including:

1. Review of the Wonca management budget and financial status, as at end September 2010, and discussion of the steps to take to ensure as healthy a financial state as possible at the end of the financial year 2010.
2. Review of the seven Wonca Regions and their activities as well as those of member organizations in these regions.
3. Review and updates of Wonca's relationship and collaboration with other medical organizations like the World Health Organization (WHO); the World Medical Organization (WMA); the International Federation of Medical Students' Association (IFMSA); and young doctors' organizations like the Vasco da Gama Movement (Europe), the Rajakumar Movement (Asia-Pacific), the Waynakay Movement (Latin America) and the NaFF-DoNA (North America).
4. Review and selection of the dates and venue of future Wonca core executive and full executive meetings for the rest of the current triennium (2011 – 2013). Some of the key issues discussed at the Core Executive meeting in Malaga included the following items.

The Wonca GROW initiatives

Core Executive felt that whilst work on the GROW Recommendations as approved by the World Council in Cancun in May 2010 was on-going, there was a need to track the progress being made on the individual recommendations:

Recommendation #2: to establish a World Conference Committee

This World Conference Committee was established and appointed by the World Council in Cancun in May 2010. Core Executive was informed that the Chair of this Committee had already communicated with its members with a broad outline of its agenda and how the work of this committee needed to coincide with certain timelines in order to effect proposed bylaws changes where necessary. Core Executive expressed confidence in the Chair and Committee and looks forward to its recommendations

Recommendation #3: to develop a plan for Wonca to advance the global accreditation of family medicine training to create a consulting service

Core Executive acknowledged that this is work in progress through the work of the Wonca President and the Wonca Working Party on Education which is working to develop global standards and guidelines for Family Medicine Education.

The President informed the Core Executive that he would be meeting with the Chair of the Working Party on Education in Toronto in the third week of October 2010 to discuss this work further.

Recommendation #4: to develop a plan to better brand and use the Wonca website.

At the Malaga Meeting, Core Executive had earlier met with a potential service provider (HWR Media & Communications) to discuss and examine the potential monetization for the www.GlobalFamilyDoctor.com website. The presentation by HWR Media & Communications was well received by Core Executive. The CEO was requested to have further discussions with HWR and to also include the Wonca Webmaster and the Chair of the Wonca Communications and Publications Committee in the discussion. The CEO was also requested to inquire with other companies on similar services offered by HWR and also obtain comparative quotations for such services

Recommendation #5: to develop a strategy to increase membership and the involvement of young family doctors.

Core Executive suggested that GROW Recommendation #5 should perhaps be split into two

parts: to increase the involvement of young doctors; and to increase Wonca membership.

Regarding the increase in the involvement of young doctors, Core Executive felt that this was 'work in progress' through the efforts of the Vasco da Gama Movement in Europe, the Rajakumar Movement in Asia Pacific, the Waynakay in Iberoamericana-CIMF and NaFFDoNA in North America.

It was suggested by Core Executive that all Wonca Working Parties should involve young doctors in its activities. Another suggestion from Core Executive was to aim working towards having a young doctor representative in the Wonca Executive Committee in the near future.

Suggestions from Core Executive relating to increasing Wonca membership included:

- As part of re-designing of the Wonca Website, efforts should be directed towards making it easier for doctors to become Direct Members by having appropriate online applications procedures and payment systems on the Wonca website.
- Having better and more frequent communications with Direct Members from the leadership of Wonca, especially from the President.
- Asking Wonca Direct Members for their opinions and for their voices to be heard.
- Inserting Direct Member application forms in conference bags at Wonca conferences, in addition to having a Wonca promotional booth.

Recommendation #7: to study the feasibility of a change in the frequency and structure of meetings of the Wonca leadership.

Core Executive discussed this at length and recommended that the Wonca Full Executive Committee be asked to consider GROW Recommendation #7 at its meeting in Cebu in February 2011.

Recommendation #8: to develop a plan to increase the capacity of member organizations.

Core Executive also felt that this issue with its wide ranging impact should be addressed by the Full Executive Committee at its meeting in Cebu in February 2011.

International Primary Care Consortium (ICPC-3)

The CEO presented to Core Executive the encouraging responses received by the Wonca Secretariat, from Wonca Member Organizations, to a circular sent earlier to them inviting expressions of interest to join a proposed consortium to further develop ICPC-3.

Core Executive also received and considered the CEO's discussion paper on the proposed ICPC-3 Consortium with specific financial estimates. The proposal was written from a business perspective, with the proposed ICPC-3 Consortium being an independent not-for-profit registered entity, with an agreed number of Foundation Members on its Management Board. The proposal was also based on selling the existing ICPC-2 intellectual property rights and the rights of the ICPC-3 at whatever stage of development it would be, to the Consortium at the time of the consortium's establishment.

Core Executive also considered the Draft Plan for an ICPC-3 Consortium, submitted by the Chair of WICC just prior to the meeting, together with a budget request for each year for the period 2011–13.

A significant part of the Core Executive Meeting was devoted to discussing this issue of ICPC-3 development. Various options were considered including inviting outside organizations involved in classification to join in the development of ICPC-3. This agenda item will again be discussed at length at the Full Executive Meeting in Cebu, Philippines in February 2011.

Creating value for Globalfamilydoctor.com

The Core Executive met with Mr Tom Raggatt, Managing Director of HWR Media & Communications (HWR), Australia, to discuss creating more value through Wonca's website www.globalfamilydoctor.com (GFD).

Mr Raggatt made a presentation on HWR, its services and how it could collaborate with Wonca to improve and monetize GFD. Mr Raggatt also presented his proposal on how the Wonca website could be improved in areas such as design, navigation, formalized review processes of content on every page of GFD, user friendliness, and ways to create more value and potential income to Wonca. He saw huge potential in the Wonca Website as a global communication vehicle to help doctors help their patients. He was confident that HWR would be able to assist and work successfully with Wonca.

The Core Executive had a positive view of Mr Raggatt and his company and what could potentially be achieved for the Wonca website in collaboration with HWR. There was also a desire by Core Executive to go forward and improve the Wonca Website.

Core Executive was of the opinion that any potential collaborator with Wonca would need to undergo due diligence and comparative quotations would need to be invited from other companies providing similar services. The Core Executive would present a proposal to the Full Executive for discussion and consideration at its next meeting in Cebu, Philippines, in February 2011.

Dr Alfred Loh

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FROM THE EDITOR:

CELEBRATIONS, CONFERENCES AND CHANGE

Our health systems are changing.

We have all been noticing that health systems are changing in our individual countries, but those who look outward have noticed that their country is not alone. My country is an island, but certainly not in the matter of the urgent push for health system change.

Costs are rapidly rising as technology advances and the demand for more and more fancy investigations and medical procedures drives health systems. Specialist medical practitioners have become overly important and GPs / family physicians need to reassert their importance. Prevention of chronic diseases and treatment in the community, not the hospital, is recognised as a cost efficient way to go. Existing models of health care are under the microscope. The focus is again on primary health care.

President of Wonca Europe, Tony Mathie, and President of the Spanish Society (semFYC), Josep Basora, have done something about the health system change. On behalf of Wonca Europe and semFYC they signed the Malaga Statement.

The statement was developed by our Wonca colleagues who attended the recent conference of Wonca Europe. The statement features in English and Spanish in this edition of *Wonca News*.

Conference season

It has been a busy couple of

months for general practice and family medicine conferences around the world. This is reflected in this edition of *Wonca News* and there will be more stories in our next edition. The highlight, of course, was the Wonca Europe 2010 conference that was held in Malaga, during October. Four thousand of our colleagues gathered in this beautiful and interesting Spanish city. The many reports and photos prove much work was achieved.

As well as Malaga, several member organisations held their annual conference, in October, and that has been accompanied, in a number of cases, by a change in the office-bearers: the presidents or chairpersons of the organisation. Reports from Canada, the United States, the United Kingdom and Australia provide members with some insight into proceedings in each country. More from North America will be in the February 2011 edition.

Continuing the theme of health system change many of the speeches at our member organisation conferences seem to have spoken of their own system changes. Excerpts from some of these speeches are included in the conference reports.

When the Australian and Singapore Colleges met in October, they signed a historic agreement of mutual recognition. The article in the regional news section also mentions a role for past Wonca CEO, Professor Wes Fabb, in this agreement.

Arabic - a *Wonca News* first

This edition of *Wonca News* includes a small step to greater inclusiveness with news from the Canadian college in English and French.

A larger step is the inclusion of some Arabic translations for the articles relating to the Eastern Mediterranean region (EMR). With the assistance and co-operation of Professor Nabil Al Kurashi, president of the Wonca EMR, a small amount of the material in this edition of *Wonca News* has been translated. The Arabic is included starting from the rear of this edition, or perhaps the front depending on which way you choose to read!

Thus, this is a quadrilingual edition – English, Arabic, Spanish and French. My apology is that it is not the majority of articles that are translated.

Wonca Awards continued

This edition, we celebrate Sonia Roache-Barker of Trinidad and Tobago, and Ruth Wilson of Canada. These remarkable women won the Wonca Five Star Doctor

awards this year in Cancun. Their stories are featured in this issue and next issue will feature the Wonca Foundation award to David Whittet of New Zealand.

The reporting of these awards was delayed one issue to make way for the news of the terrible situation in Pakistan and reports from our colleagues there as published in the October *Wonca News*. Many colleagues have asked for more information so there is a small update from Dr Tank, in Pakistan on the ongoing situation.

The Wonca President, Rich Roberts tells of his recent trip to Tajikistan in his column and together with a few photos, it makes captivating reading.

Festivals and holidays

Finally, as the 2010 year draws to a close, many of us will take holidays or take part in various religious festivals in the next couple of months. New Year festivals are celebrated in all cultures, but often at different times, depending on the calendar in use. The Gregorian calendar, sees the New Year of 2011 arrive in a few weeks time, and with it will come international festivities and holidays. In Australia, our school children have a wonderful, six-week summer holiday at this time of year. I know, however, that many others around the world are plunged into the cold and darkness of winter while we enjoy the summer season.

My best wishes for your happiness and safety wherever you are, and in whatever season or celebration you find yourself, between now and the next edition of *Wonca News*.

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SPECIAL FEATURE:

WONCA EUROPE MEETS IN MALAGA

The 2010 Wonca Europe conference was held in Málaga, Spain, from the 6–9 October. This special feature includes photos and reports on the overall conference, the Wonca Europe Council meeting, and EQuIP activities. A brief report of the Wonca Working Party on Informatics activities is to be found in the *Wonca Working Group* section of this edition of *Wonca News*.

Sincere appreciation to Dr José Miguel Bueno Ortiz, international officer of the Spanish Society of Family and Community Medicine (semFYC) for much of the material provided in this section.

Sincero agradecimiento al Dr. José Miguel Bueno Ortiz, responsable de la sección de internacional, Sociedad Española de Medicina Familiar y Comunitaria (semFYC) para proporcionar gran parte del material en esta sección de *Wonca News*.

MALAGA CONFERENCE REPORT

The 16th Wonca Europe conference, took place in the Spanish city of Málaga from the 6–9 October, 2010. It was organised by the Spanish Society of Family and Community Medicine (semFYC) and was run in conjunction with the Andalucian Society of Family and Community Medicine annual conference.

Under the theme, *Family Medicine into the Future - Blending Health and Cultures*, a number of topics relating to practice, teaching and research in family medicine were presented.

More than 4000 doctors from Europe and the rest of the world

were in attendance and had the opportunity to share their experiences, concerns and aspirations for the future.

Networking the networks.

The aim of the conference was to enhance networking: meaning working together, creating bonds and interacting.

Interaction between: ourselves as GPs; ourselves and our healthcare team, our hospital colleagues, clinicians and managers, different groups of patients from different backgrounds, and with Academic authorities. Interaction throughout all training periods (undergraduate, postgraduate and continuous professional development) for family doctors.

Interaction emphasising the necessary relationship between family medicine and the academic world, among all the Wonca Europe networks and Wonca Europe Special Interest Groups, and among all Wonca world regions in our globalised world.

To achieve this goal, for the first time, the role of each of the six Wonca Europe networks was recognised and they were each entrusted with the choice of keynote speakers.

The six Wonca Europe networks:

European Working Party for Quality on Family Medicine (EQuIP),
European Academy of Teachers in General Practice (EURACT),
European General Practice Research Network (EGPRN),
Vasco da Gama (young doctors' movement),
European Rural and Isolated Practitioners Association (EURIPA),
European Network for Prevention and Health Promotion (EUROPREV)

Each network was provided with a time and a venue to discuss their own business, as well as consider avenues for interaction in the future. They each ran two symposia and several workshops; as well as chaired the oral presentation session related to their subject.

Also having a place at this conference were the Wonca Europe Special Interest Groups (SIGs) namely:

International Primary Care Respiratory Group (IPCRG),
European Society for Primary Care Gastroenterology (ESPCG),
European Primary Care Cardiovascular Society (EPCC),
General Practice Respiratory Infections Network (GRIN) and
Primary Care Diabetes Group (PCDG)

As well as the European SIGs, many other groups had their place in this conference: the Wonca World SIG on Elderly Care; the Wonca World Working Parties on Ethical Issues, Informatics, Women in Family Medicine, Research, Mental Health, and Classification Committee; as well as other active groups such as the European Association of Communication and Health Care (EACH) and the European Forum of Primary Care (EFPC).

Extensive Conference programme

Four preconference meetings were held, namely, the European Society for Primary Care Gastroenterology, Intimate Partner Violence, Vasco da Gama Movement, and EQuIP.

A total of 1124 abstracts were presented as 305 oral papers, 56 workshops and 742 posters that were displayed on plasma screens. Sessions included six keynote lectures; ten Wonca Europe SIGs; three Main Sessions; sixteen research projects; six networks' sessions; seventeen semFYC sessions; and two Portuguese Association of Family Medicine sessions.

The Málaga Conference did not merely function as a venue for sharing knowledge and research findings, but also as an invitation to collaborate on areas of common interest - interest which crystallised into projects before, during and after the conference. All the latest technological platforms, such as *Twitter* and *Facebook* were provided.

As well as the comprehensive scientific programme, there was a wonderful and interesting cultural programme, which included a classical music concert, and a fusion of traditional, heartfelt flamenco and jazz performances. Malaga proved the ideal location for blending science, art, culture, sports and pleasure.

Final ceremony

Before the closing ceremony, Dr Tony Mathie, Wonca Europe President, delivered the Wonca Fellowship award to Professor Igor Švab, the immediate-past president of Wonca Europe.

The conference closed with a plenary session, *Networking the Networks*, in which networking ideas were discussed at length, there having been prior e-mail brainstorming. In the closing ceremony, the *Malaga Statement* was released and read by the Wonca Europe President and this had previously been endorsed by the Wonca Europe council. This statement is also reproduced in this edition of *Wonca News*.



Wonca Europe President, Tony Mathie, reads the Malaga Statement at the conference closing ceremony.

Afterwards, the Spanish Minister of Health and Social Affairs, Mrs Trinidad Jiménez, addressed the delegates reminding them of the role primary health care and semFYC have played to improve the Spanish national health scheme.

She announced that a Spanish National Committee for Primary Health Care will be convened, next January. It will be composed of scientific societies and patient organisations. She expected semFYC to play the most important role and that the themes and the conclusions of the Wonca Malaga Conference, would be taken into account.

President of semFYC, Dr Josep Basora, thanked the Wonca Europe council for endorsing the *Malaga Statement* as well as the committees for their work. He reminded the delegates that since the eruption of the economic crisis, sustainability has become paramount and so has family medicine and primary health care.

Wonca World President, Professor Richard Roberts, asserted that family doctors are the best investment politicians could make and that they should not feel alone as, worldwide, there are 300 000 members of Wonca.

Finally, the Wonca Europe 2011 conference Host Organising Committee Chairman took the baton and invited the audience to attend, in Warsaw. The website for next year's conference is: <http://www.woncaeurope2011.org>

José Miguel Bueno Ortiz

WONCA EUROPE COUNCIL MEETING

Preceding the official opening of the Wonca Europe Conference in Malaga, the Wonca Europe Council held its meeting on 6 October. Several interesting topics were discussed, some of which may be of interest to readers around the globe.

New Wonca Europe executive board

The council took the final vote on the Wonca Europe Executive Board. For the period 2010-2013 the composition is:

Tony Mathie, president

Anna Stavdal, vice-president

Job FM Metsemakers, honorary secretary

Carl Steylaerts, honorary treasurer

Janko Kersnik, EURACT representative

Mehmed Ugan, EGPRN representative

Tina Eriksson, EQuIP representative

Barbara Toplek, Wonca Europe secretariat

The council thanked the outgoing members of the executive board and especially Igor Švab, the past president who has served Europe in many functions over past decades.



Wonca Europe executive (from l to r) Janko Kersnik, Tony Mathie, Anna Stavdal, Carl Steylaerts, Mehmed Ugan, Barbara Toplek, Job FM Metsemakers. (Tina Eriksson not present).

European journal

The *European Journal of General Practice* (EJGP) chief editor, Dr Jelle Stoffers, reported on the developments in the journal in the last year. The journal is on its way up again, after a difficult period two years ago. The number of submissions is now three to four per week. The review process is kept under close watch to ensure that authors get a final decision within three months.

The chief editor would like to collaborate with non-English European journals on double publication, while of course maintaining the peer review process of the EJGP. The process of getting an 'impact factor' has been started. Although a European Journal, the EJGP welcomes articles from non-European countries, if they are of interest to the European situation.

Bursaries for Cancun attendance

Attending a world conference is extremely difficult for members of developing countries, and yet the goal of a Wonca world conference, of course, is to gather members from around the world. In 2009, Wonca Europe initiated a bursary program to aid those in need to attend the Wonca world conference in Cancun.

Some 30 bursaries were available and around 100 applications were received. The selection committee excluded all European applications and distributed the bursaries to applicants around the world. Most of them turned up in Cancun, and had a very interesting meeting. Afterwards several recipients wrote letters of thanks to Wonca Europe.

The response to the bursaries has been very positive not only from the bursary recipients but also from the conference organisers, Wonca World and other colleges. Wonca Europe has decided that for the Wonca World conference, in Prague, in 2013, we will again have a bursary project.

The Malaga Statement

During the Malaga conference *The Malaga Statement: Primary care as a sustainable way to improve the efficiency of national health systems* was signed by Dr Tony Mathie, President of Wonca Europe, and Dr Josep Basora, President of semFYC, the Spanish Society of Family Medicine. The statement builds on the resolution of the World Health Assembly (WHA 62.12) called Primary health care, including health system strengthening. Although all governments have accepted this resolution in which primary care (and especially family doctors), is described as the most suitable direction of health care development,

the conference was viewed as a good opportunity to bring it to the attention of the Spanish government.

The Malaga Statement can be found on the Wonca Europe website, and in Spanish and English elsewhere in this edition of *Wonca News*.

Policy statement on prevention and health promotion in primary care

The European Network for Prevention and Health Promotion in General Practice/Family Medicine (EUOPREV) has prepared a document, Policy statement on prevention and health promotion in primary care, as a reaction to a number of observations.

They observed that recommendations on preventive care may come from multiple sources, sometimes contradicting each other; that although the evidence on effectiveness and efficiency of some preventive interventions is not always well assessed, they still are promoted; and that the agenda of diseases, that doctors are encouraged to prevent, may be influenced by commercial interests, resulting in low priority given to prevention of certain areas of ill-health such as psychosocial problems.

Based on the observations made, the statement sets out a policy which recognises that prevention and health promotion form an important part of daily practice, but also describes the boundaries of a proper approach to prevention and health promotion. The policy statement was accepted by Wonca Europe and has been forwarded to Wonca World for consideration as a world policy statement.

The *Policy statement on prevention and health promotion in primary care* can be found on the Wonca Europe website.

Revision of the European Definition of General Practice/Family Medicine

The latest version of the European definition of general practice / family medicine was accepted, in 2005. Since then, several developments have taken place and based on a proposal by Giorgio Visentin and Ernesto Mola (both from Italy), Wonca Europe council considered the proposal to include “patient empowerment and self management education” into the definition. Also, the concept of “continuous quality improvement” was regarded as important. A working party has been set up under the leadership of Ernesto Mola to progress this issue.

Wonca Europe conferences

2011, September 8–11 in Warsaw, Poland

2012, July 4–7 in Vienna, Austria

2013, September 8–11, Wonca World Prague, Czech Republic

2014, July 2–5 in Lisbon, Portugal

Wonca Europe website

For further information see:

www.woncaeurope.org

Professor Job FM Metsemakers, MD, PhD
Wonca Europe Honorary Secretary



EQuiP group photo including World Wonca Executive member Dr Wesley Schmidt from Paraguay (back row, far right), and Dr Daniel Thuraiappah (Malaysia), Chair of the Wonca Working Party on Quality and Safety (back row, 2nd from right)

EQUIP MEETS IN MÁLAGA.

www.equip.ch

Abbreviations used in this article: European Association for Quality in General Practice/Family Medicine (EQUIP); Wonca Working Party on Quality and Safety (WWPQS); Spanish Society of Family and Community Medicine (semFYC); European Union of General Practitioners (UEMO)

From October 4-6, 2010, in Málaga (Spain), the EQUIP held its 38th Assembly meeting prior to the Wonca Europe Malaga conference.

After the EQUIP Chairman's welcome, some national delegates from Switzerland, Croatia, Belgium and Turkey gave updates of their country's quality work. All country reports are posted in full detail on the EQUIP website.

Guest speakers were welcomed. Dr Daniel Thuraiappah (Malaysia), Chair of the Wonca Working Party on Quality and Safety (WWPQS), presented an outline of the working party's work. The host country members, Dr Pilar Astier, WWPQS member and semFYC Working Group on Safety member and Dr José M. Bueno, Spanish EQUIP delegate offered general information on the Spanish primary care sector and semFYC Working Group on Safety activities.

Dr Tomasz Tomasiak, Polish EQUIP delegate, presented the Leonardo da Vinci project: *Innovative lifelong learning of European general physicians in quality Improvement supported by information technology*. Some EQUIP delegates agreed to be partners, with the Polish College of General Practitioners, in this project.

Discussion was held about two position papers: UEMO *Paper on quality* and EQUIP position paper on *Principles of measuring quality in health care*. EQUIP adopted its position paper as an official EQUIP statement.

The remainder of the assembly meeting was devoted to EQUIP core business, executive board elections and planning future conferences.

Three separate sessions were devoted to ongoing work of the EQUIP working groups: Quality Indicators; Tools and Methods; Teaching Quality Improvement; Research and Quality Improvement; and Professional Health (Quality of Doctors Healthcare).

The final discussion took place on preparations for the EQUIP contributions to the Wonca Malaga Conference as follows:

One keynote lecture: *Quality assurance as a western culture-bound syndrome in a multi-cultural Europe*, by Professor Michael Weingarten.

Two symposia: *Patient safety and medication errors in primary care -where are we now?*, delivered by Dr Andreas Sönnichsen, Dr Stéphanie Taché, Dr Aneez Esmail and Dr Brendan Delaney; and, *Four examples of implementation projects in Europe*, run in conjunction with Wonca Europe Special Interest Groups, by Dr Theo Verheij, Dr Johan Wens, Dr Patricia Taylor, Dr Richard Hobbs and Dr Alike van der Velden.

Five workshops: *Teaching Quality Improvement in Family Medicine*, by Dr Piet van den Bussche, Dr Marija Petek-Ster, Dr Janko Kersnik, Dr Chantal Emaus; *Managing GP Stress – a practical Skills Workshop*, by Dr Andree Rochfort; *International benchmarking – can it uncover quality strengths and shortage*, by Dr Klas Winell; *Computer and data management - a workshop on how to improve quality in Family Medicine*, run in conjunction with Wonca Informatics Special Interest Group, by Dr Peter Schattner, Dr Carl Steylaerts, Dr Ilkko Kunnamo, Dr Heinz Bhend, Dr Henrik Schroll; and, *Do quality indicators truly measure quality in primary care?* by Dr Gordon Littman, Dr Kees in't Velt.

Elections were held for honorary treasurer and member-at-large executive posts. The new executive is composed of:

President: Dr Tina Eriksson (Denmark)

Honorary secretary: Dr Andrée Rochfort (Ireland)

Honorary treasurer: Dr Zekeriya Akturk (Turkey)

Members at large: Dr Kees in' t Veld (the Netherlands), Dr Klas Winell (Finland)

Dr José M Bueno (Spain).

Delegate in Wonca Europa executive:

Dr Tina Eriksson (Denmark)

It was announced that along with next (39th) EQUIP Assembly meeting, the 6th EQUIP Invitational Conference will be held in Copenhagen in April 7-9th, 2011. It will be supported by the Danish regions, the Danish College (DSAM) and the Danish Union of GPs (PLO). Its theme will be: *Value for money in general practice - management and public trust*. Abstract submissions to the conference, on primary care quality projects, are very welcome and are advertised on the EQUIP website.

The Danish quality unit of general practice and Danish regions are hosting a preconference on ICT development and ICPC coding in Danish general practice.

EQUIP delegates are responsible for inviting a very restricted number of participants from each of the member countries of Wonca Europe. If you would like to participate as an invited guest, you should contact your national EQUIP delegate.

Dr José Miguel Bueno Ortiz

EUROPREV ASSEMBLY MEETING.

www.europrev.org

EUROPREV (the European Network for Prevention and Health Promotion in Family Medicine and General Practice) was launched in November, 1995. Two EUROPREV meetings are organised every year (one of them at the same time as the WONCA Conference). Within the Wonca conference, two workshops and open symposia are usually organised, where topics of prevention and health promotion in primary care are discussed.

During the Wonca Europe conference in Málaga, EUROPREV held its assembly meeting on 7 October 2010.

Time was devoted to discussion of the various presentations of EUROPREV at the congress: Dr Carlos Brotons' key-note lecture about *Disease prevention and health promotion: new competences of the general practitioner*; Dr Mario R Sammut and Dr Carlos Brotons chaired a plenary session titled *Doctor, you sound like my mother - European patients' views of prevention in family practice revealed!*; and Dr Donatella Sghedoni chaired a workshop about the topic of *Prevention of unnecessary prevention*.

Another important issue discussed at the meeting was the publication of the EUROPREV *Policy Document on Preventive Health Care*, that was approved and endorsed by the Wonca Europe Council and has now been forwarded to Wonca World Council for approval. It was considered very important to translate this document into different languages and disseminate it through national colleges of general practice and primary care journals. (web reference given below)

Dr Carlos Brotons felt that, as he had been chairman of EUROPREV for 14 years, it was time for someone else to take over, although the secretariat may remain in Barcelona. Dr Mateja Bulc, from Slovenia, was elected as the new chairman of EUROPREV.

Dr Carlos Brotons

EUROPREV Chairman (outgoing)

EUROPREV *Policy Document on Preventive Health Care* available at <http://www.europrev.org/documents/FINAL%20POLICY%20STATEMENT.pdf>

IPCRG MEETS IN MALAGA

www.theipcr.org



The International Primary Care Respiratory Group (IPCRG) is a charity registered in Scotland working internationally (SC No: 035056) and a company limited by guarantee (Company number 256268)

The International Primary Care Respiratory Group (IPCRG), one of the Wonca Europe's Special Interest Groups, met at the 16th Wonca Europe meeting recently celebrated in Malaga.

The IPCRG developed a workshop about the important role of the primary care doctor in COPD early diagnosis and treatment. More than 120 people attended the workshop that was designed to be interactive, and to generate an extended debate and participation.

Professor Jim Reid from the University of Otago in New Zealand, Dr Svein Hoeghsen from Oslo, Norway and IPCRG members briefly exposed the huge importance of a correct, early diagnosis; and the best way to increase this diagnosis by undertaking spirometry or other pulmonary function tests in the same primary care practices.

Dr Miguel Román IPCRG president and semFYC member chaired the session and led a lively debate by participants on the current barriers for early COPD diagnosis in the different situations and countries represented in the auditorium, and the possibility to make a correct diagnosis depending on the spirometry availability.



Dr Miguel Román speaks at the Málaga meeting

In the second part of the workshop, Dr Vidal Barchilon and Dr Ana Moran showed how to effectively approach tobacco cessation in primary care, independent of the lack of time and resources available in consultations. During the workshop, some materials that have been developed by the IPCRG were given out. These opinion sheets about early COPD diagnosis and tobacco cessation are also available at the IPCRG website. (web reference given below)

On the final day of the conference, Dr Tony Mathie, Wonca Europe president, chaired the plenary session *Networking the Networks* where each Wonca network and special interest group was represented. Professor Jim Reid from New Zealand presented all the IPCRG 2010 activities and the plans for the future. The groups looked for potential co-operation and joints.

Dr Miguel Román Rodríguez
 IPCRG President
 miguelroman@ibsalut.caib.es
http://www.theipcr.org/resources/ipcr_copd_opinion_5.pdf, <http://www.theipcr.org/resources/IPCRG%20SMOKE%20CES%20TO%20PRINT%20V2%20FINAL%20Oct%202007.pdf>

MÁLAGA IN PHOTOS

A selection of photos from the Wonca Europe Malaga conference 2010 are included in the following pages. More photos can be viewed online at:
http://www.woncaeurope2010.org/modules.php?name=webstructure&i_dwebstructure=536



Wonca World Special Interest Group on Ethics Workshop: (from l to r) Drs Manfred Maier, Steinar Westin, Rogelio Altisent, Martin Van Fragstein, Bruno Kissling, Janko Kersnik



EUROPREV and VIPs group (from l to r): Dr Luis Galvez HOC Chair; Dr. Francisco Camarelles semFYC Tobacco Committee Chair; Dr. Pilar Kloppe Spanish EUROPREV delegate; Dr Carlos Brotons EUROPREV Chairman; Dr José Miguel Bueno, International Advisory Board Chair and Dr Manuel Galvez Scientific Committee Chair.



“Networking the networks: future projects” plenary session: professors and doctors from Wonca Europe Networks and Special Interest Groups get together : (from l to r) Maciek Godycki-Cwirko, EUROPREV delegate; Eva Hummers-Pradier, EGPRN Chairman; John Wynn-Jones, EURIPA Chairman; Tina Eriksson, EQUIP Chairman; Tony Mathie, Wonca Europe President; Lars Agreus, head of Department Family Medicine, Karolinska Institute, Sweden; Sara del Olmo, Vasco da Gama movement; Mehmet Ungan, EGPRN.



Presentations of the Dr Isabel Fernandez research awards: (from l to r) Dr Domingo Orozco, semFYC Vice-President; Dr Josep Basora, semFYC President; Dr Montserrat Fonseca on behalf of Dr Gaspar Tamborero; Prof Richard Roberts, WONCA President; Dr Joan Josep Cabre, on behalf of Dr Yolanda Ortega; Dr Anna Pannasielo, on behalf of Dr Josep Clua.



EURIPA plenary session group: (from l to r) Drs John Wynn-Jones, EURIPA Chair; Steve Rade, plenary speaker (South Africa); José M Bueno, Wonca Malaga International Advisory Board Chair (Spain); Jaumen Banque, EURIPA Spanish delegate.



EURACT plenary session of Prof Linn Getz, of Norway and Iceland, titled 'Less, more, why and how: an argument for humane and sustainable general practice'



EURACT plenary session of Prof Linn Getz



Vasco da Gama group: (from l to r) Sara del Olmo, Spain; Erik Teunissen, (plenary speaker); Yvonne van Leeuwen, (plenary speaker); Raquel Gomez Bravo, Spain.

FEATURE STORIES

THE MALAGA STATEMENT

A joint policy statement by the Spanish Society of Family and Community Medicine (semFYC) and European Region of The World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians (Wonca)

Primary care as a sustainable way to improve the efficiency of national health systems

Thirty years ago, developing primary health care was presented as a need for health systems that sought to promote a series of values, principles and approaches aimed at improving public health standards. This new care model, which has been gradually introduced in all countries and has helped to improve equality, accessibility and efficiency, is based on a holistic vision of health which goes far beyond the limited medical model. As a result, several goals are achieved: improved health, decreased morbidity, increased equality and a substantial rise in the efficacy and efficiency of health systems.

The problem lies in the fact that health systems and health promotion programmes have become a mosaic of disparate components. This is true, particularly, in the rich countries, where there is excessive specialisation and where, often, primary care is not the axis around which the health system revolves. Resources are largely reserved for hospital services, and health promotion and prevention activities are neglected. In short, such health systems are less efficient and effective than they could be.

Growing challenges, such as population ageing and the enormous impact of chronic illnesses, new emerging diseases and the recent pandemics that the world has suffered show clearly that health models need to undergo a substantial change in direction if their sustainability is not to be compromised.

Primary care provides a way of ordering and organising health care as a whole through a community-based vision in which health prevention and promotion and a holistic approach to illness are paramount. This is in line with the *World Health Assembly resolution WHA 62.12* called "Primary Health care, including health system strengthening". As a result, primary care forms a sustainable, evident and efficient way of resolving health and health care problems. In this way disease specific

programs, when relevant for population health, would automatically become integrated in a wider health care frame (Wonca/TUFH action 15 by 2015).

The above description shows clearly that primary health care is the ideal field in which future family doctors should learn their profession. Consequently, the education and university systems should be structured appropriately in order to provide a response to this need.

On the grounds of these reasons, Wonca Europe calls on European state governments that are currently making budget adjustments to make primary care a priority gateway to their national health systems, and to adjust their health care expenditure in line with this goal.

Tony Mathie
President, Wonca Europe
Josep Basora
President, semFYC



Wonca Europe President, Tony Mathie, and semFYC President, Josep Basora, sign the Malaga Statement

El presidente de WONCA Europa, Tony Mathie, y el presidente de semFYC, Josep Basora, firman la declaración Málaga

DECLARACIÓN MÁLAGA

Declaración conjunta de la Sociedad Española de Medicina Familiar y Comunitaria (semFYC) y la Región Europea de The World Organization of National Colleges, Academies and Academic Associations of General Practitioners/ Family Physicians (Wonca).

La Atención Primaria es la forma más adecuada para mejorar la eficiencia de los Sistemas Nacionales de Salud

Hace 30 años, la atención primaria de salud se presentó como un conjunto de valores, principios y enfoques destinados a mejorar el grado de salud de las poblaciones. En todos los países, ofrecía una manera de mejorar la equidad en el acceso a la atención de salud y la eficiencia en el manejo de los recursos. La atención primaria adoptó una visión holística de la salud que iba mucho más allá del limitado modelo médico. De ese modo cumpliría varios objetivos: mejorar la salud, disminuir la morbilidad, aumentar la equidad y mejorar enormemente la eficacia de los sistemas de salud.

El problema radica en que los sistemas de salud y los programas de desarrollo de la salud se han convertido en un mosaico de componentes dispares. Ello se evidencia en la excesiva especialización de los países ricos, donde la Atención Primaria muchas veces no es el eje del sistema de Salud. Una gran proporción de los recursos se destina a los servicios hospitalarios, pasando por alto las actividades de prevención y promoción de la salud. En resumen, los sistemas de salud son ineficientes y menos eficaces de lo que podrían ser. Además, sin una reorientación sustancial es probable que los actuales sistemas de salud se vean desbordados por los crecientes desafíos del envejecimiento de la población, las enfermedades crónicas, las nuevas enfermedades emergentes, así como las últimas pandemias sufridas.

Ante todo, la Atención Primaria ofrece una manera de ordenar y organizar el conjunto de la Atención Sanitaria desde una visión próxima a la comunidad, donde la prevención, la promoción de la salud y el abordaje integral de la enfermedad son sus prioridades. Esto concuerda con la resolución de la Asamblea de la Organización Mundial de la Salud (WHA 62.12) 22 mayo 2009 denominada "Atención Primaria, incluyendo el fortalecimiento del sistema sanitario". La atención primaria ofrece una forma sostenible, evidente y eficiente de resolver los problemas de salud y la atención sanitaria. De esta manera, los programas centrados en las enfermedades, cuando sean relevantes, se integrarían de modo automático en un marco más amplio. Acción Wonca/TUFH15 by 2015.

Lo anteriormente descrito muestra claramente que la atención primaria de salud es el campo ideal en el cual los futuros médicos de familia deben aprender su profesión. Consecuentemente, la educación y el sistema universitario deben ser estructurados apropiadamente para proporcionar una respuesta a esta necesidad.

Por todas estas razones, Wonca Europa realiza un llamamiento a los gobiernos de los estados europeos que están realizando ajustes presupuestarios debidos a la crisis económica mundial para que prioricen la puerta de entrada desde la Atención Primaria para su Sistema Nacional de Salud y reorienten su gasto sanitario hacia tal meta.

Tony Mathie
El presidente de Wonca Europa
Josep Basora
El presidente de semFYC

WONCA FIVE STAR ***** DOCTOR AWARDS

At Cancun 2010, Professor Chris Van Weel announced the winners of the Five Star Doctor Award for this triennium, as being Dr Sonia Roache - Barker of Trinidad and Tobago and Professor Ruth Wilson of Canada.



Prof Chris Van Weel presents the Wonca Five Star Doctor Award to Sonia Roache - Barker in Cancun

Wonca's award of Excellence in Health Care called the Five Star Doctor Award is judged on the following five criteria:

- * 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.

The achievements of these two worthy recipients in meeting these criteria are detailed below.

PROFESSOR RUTH WILSON - CANADA

Professor Wilson was nominated for this award by Dr Calvin Gutkin of the College of Family Physicians of Canada. His nomination outlined how Professor Wilson satisfies the requirements to be considered for this award.



Prof Ruth Wilson

* **A care provider**

She has worked for twenty years working as a family physician in Kingston Ontario providing care to 700 registered patients and delivering the babies of her own patients and other referred patients. She is now starting to deliver a second generation of babies. Dr Wilson enjoys trusted relationships with her patients, and has many multi-generational families in her teaching practice. She uses an electronic medical record to track preventative care for her patients and manage chronic diseases.

Prior to establishing the family practice in Kingston, she worked for 11 years in rural and remote areas of Canada, providing a full range of services including anaesthesia, emergency room care, obstetrics, and inpatient care. Periodically since then has provided locum services in remote Canadian communities, most recently in Iqaluit, Nunavut.

* **A decision maker**

Currently a Professor of Family Medicine, and for ten years head of the Department of Family Medicine at Queen's University, her role included Chief of Family Medicine duties at two teaching hospitals.

Her research interests are in the areas of women's health and indigenous peoples' health, and the lessons learned in these two communities which might be applied to the understanding of the broad determinants of health. She showed a prevalence of end stage renal disease twice the national average in a Cree population; showed that women are less likely than men to receive renal transplants in Canada, and has explored in her publications the potential reasons for these apparent inequities in health system resource allocation. She has also served on a number of provincial bodies responsible for allocating funds in these areas, for example, the Ontario Women's Health Council, and the Chronic Renal Insufficiency Task Force.

* **A communicator.**

She has spoken widely on the subjects of primary care reform, women's health, and aboriginal health. Dr Wilson travelled to over sixty communities in the province of Ontario, speaking to groups of family physicians and others about new models of primary care. She is the co-editor of the Women's Health chapters of the Oxford Textbook of Primary Care. She is the editor of a book entitled "Implementing Primary Care Reform: Barriers and Facilitators".

* **A community leader.**

Dr Wilson has chaired a provincial agency called the Ontario Family Health Network, which was charged with implementing primary care reform in Ontario, a province of 12 million people. The challenge was to encourage family physicians to form group practices, working with other health professionals, providing 24 hour a day access to comprehensive care, and adopt electronic medical records. After initial considerable resistance, over two thirds of the population of the province are now registered with a group family practice, and the vast majority of family physicians in the province are working in the new models of care.

Dr Wilson made the initial contacts and worked with colleagues such as Dr Geoff Hodgetts to establish family medicine in the former Yugoslavia, beginning immediately after the end of the war in 1995. Specifically, she provided departmental support to this work; has made numerous

trips to Serbia and Bosnia for the purposes of supporting policy development, as well as providing direct clinical teaching in newly established family medicine residency programs.

* A team member

In her clinical practice works in an inter-professional team which includes other family physicians, a nurse, a practical nurse, a nurse practitioner, a dietician, a social worker, a pharmacist, and office assistants.

Dr Wilson is a past president of the College of Family Physicians of Canada. Acknowledged as a facilitative leader, she has recently assumed the Chair of the Canadian Medical Forum, a leadership roundtable of Canada's major medical organizations.

Congratulations to Professor Wilson on receiving the Wonca Five Star Doctor Award.

DR SONIA ROACHE-BARKER – TRINIDAD AND TOBAGO

Dr Sonia Roache-Barker was nominated for this award by Dr Pauline Williams- Green of the Caribbean College of Family Physicians. Her nomination outlined how Dr Roache –Barker satisfies the requirements to be considered for this award.



Dr Sonia Roache - Barker

* A care provider

Dr Roache-Barker is in active practice as a GP / Family Doctor; having set up practice in the suburbs of Port of Spain, the capital of Trinidad, West Indies, first as locum to her aunt-in-law, Dame Dr Hilda Bynoe, made Governor of Grenada and then, continuing in single handed practice from 1970 until 2005. She is now sharing a practice with Dr Violet Forsythe-Duke at a Clinic in the city of Port of Spain. She also runs a Clinic at the Eric Williams Medical Centre, Mt. Hope that caters for patients living in other parts of Trinidad, Tobago and also neighbouring countries such as Grenada and Guyana.

She has developed a reputation for clinical acumen in diagnosis and management of problems associated with women, children and the psychologically disturbed. She individualizes her approach to suit the patient, the moment and the circumstances. Her aim is to try to guide each patient through his/her life's journey with the help of multidisciplinary and allied health teams in the context of family and the community.

The practice is now multi-generational, many patients treating her as a friend. Communication by emails with those who have computer and internet access has enhanced the care given to patients outside of normal working hours.

She also performs as a "Doctor in Industry", being the first female to be employed as the Medical Superintendent of the Port Authority of Trinidad & Tobago (T&T), providing care for injured workmen as well as advising on occupational and environmental matters. She has worked in various Clinics dealing with persons from depressed communities, in particular an area known as Sea Lots, Port of Spain with the majority of patients being female and young adults.

She has also worked with the Family Planning Association and the Population programme of Trinidad & Tobago to spearhead education in family planning and responsible parenthood and to assist patients in the proper use of contraceptives.

* A decision maker

Dr Roache-Barker has been active in the Caribbean College of Family Physicians (CCFP) from the inaugural meeting in Jamaica in 1987 until the present time. She is currently its interim Executive Director. She was instrumental in the College being accepted by CARICOM (the Caribbean Community) as a "Liaison Organization"- the sole medical body within the Region to be so acknowledged, thus ensuring that the College's representation of the interests of primary-care doctors can have a regional hearing.

She has worked with two Past Regional Presidents of CCFP to ensure CCFP's acceptance as a full organizational member of Wonca.

She successfully advocated for the inclusion of practising GPs on the staff of the Faculty of Medical Sciences at UWI-St Augustine as Associate Lecturers, thus giving GPs entry to the department as teachers, mentors, and examiners in the discipline of Family Medicine.

*** A communicator**

Dr Roache-Barker was the first doctor in T&T to be asked to be a Media medical communicator, starting first on radio, later including print (Women's Weekly Magazines) and television. She initiated the "Radio Doctor" call-in series in Trinidad & Tobago, answering live queries on matters relating to medicine and allied health. She continues to be a sought after speaker across the country on a wide range of topics.

Since becoming a member of Wonca, she tries to meet with as many colleagues from the various Regions in an effort to learn more about them but also to share with them information about the Caribbean.

*** A community leader**

Dr Roache-Barker has participated in interventions in her community both as an individual and previously as a member of the Lions/Lioness Club. She worked with Rotaract and Faith-based organizations to initiate programmes with Teens and HIV prevention, partnering with various groups and selected government Ministries to assist families, men, women and children in preserving their physical, emotional, mental and sexual health.

She was co-opted to serve on the Prime Minister's Vision 2020 Committee on Crime & Security, because of her past record in social initiatives and her ideas for delivery of care in deprived communities. She is a member of the Civil Society movement in T&T, encouraging more involvement of the citizenry in governance, especially where the ecological and environmental health of the country is concerned.

She has been involved in teen /adolescent/ young adults'

health education and promotion initiatives, especially where it relates to prevention of teen pregnancy, STDs, HIV-AIDS, and delinquency. She conceptualised and helped to initiate the first "Health Fairs" in Trinidad & Tobago, setting up a framework which would include basic screening for the Chronic Diseases and sharing of information with lay persons about assuming responsibility for one's individual health while teaching them how to monitor for these diseases.

Dr Roache-Barker's community service is demonstrated by having been elected Life Member of her local Diabetes Association and Honorary Member of the local Nutritionist & Dieticians Association. Her community interests are diverse: she is a social activist, a member of the local Arts Society, a 'friend' of the Botanic Gardens and the Horticultural Society and devotes most of her spare time to her Church and its commitment to the community. She has continued to work with various NGOs related to Health, notably the Diabetes Association and the Rape Crisis Centre serving as mentor, advisor, counsellor or in whatever capacity needed.

*** A team member**

Dr Roache-Barker is a member of various local/regional medical groups, including the Trinidad & Tobago Medical Association serving as a Chairperson for its Northern Branch, the General Practitioners Association of Trinidad & Tobago, the Caribbean College of Family Physicians (CCFP) as a founding member, a Past Regional President, and presently Executive Director.

She mentors 4th and 5th year undergraduate medical students in Family Medicine and is an Associate Lecturer on Faculty. She has been involved in teaching, health

education and advocacy for persons with HIV from the earliest days of the disease, serving on the first National Advisory Council for HIV-AIDS formed in Trinidad & Tobago.

She tends to be an ideas-generator and motivator, preferring to stay in the background whilst furthering the cause with which she happens to be involved.

Editor's note: Dr Roache-Barker emigrated to Trinidad in 1964 from her birthplace, Jamaica, after marriage to a University colleague from Grenada. Sonia has two living children, a daughter who is a Schoolteacher/Artist and a son who is a Computer Engineer. Congratulations to Dr Roache-Barker who was in Cancun to receive her Wonca Five Star Doctor Award.

COLLEGES OF AUSTRALIA AND SINGAPORE SIGN AGREEMENT



Dr Chris Mitchell, president of the Australian College, and Prof Goh Lee Gan, president of the Singaporean College, signing the 'ad eundum gradum' agreement in Cairns.

The recent conference of the Royal Australian College of General Practitioners (RACGP) held, in Cairns, in the far north of the country, saw the signing of a historic agreement between the RACGP and the College

of Family Medicine Singapore (CFPS). This signing ceremony, on 6 October 2010, recognises the Fellowship of College of Family Medicine Singapore (FCFPS) as equivalent to Fellowship of the Royal Australian College of General Practitioners (FRACGP) and marks an important milestone between the two Colleges, who both have a long established history in promoting and developing General Practice, in our region and around the globe.

The signing ceremony celebrates the decision of reciprocal recognition of the Fellowships of the two colleges, and leads to the award of the FRACGP by Fellowship *ad eundum gradum* to those with FCFPS who wish to apply and are working in Australia.

In submitting this article, Professor Goh Lee Gan and Dr Chris Mitchell said that they had reached a historic outcome for their two Colleges, and it was wonderful to celebrate this achievement in Cairns. Both Colleges look forward to the CFPS Convocation, in Singapore, in November, where this important agreement will also be acknowledged.

The signing ceremony in Cairns was witnessed by the council members of the RACGP and heads of delegations from sister Colleges attending the Annual Scientific Meeting and Academic Session of the RACGP. Professor Goh, the president of CFPS also paid tribute to the contributions of the leaders in the RACGP who were instrumental in helping the Singapore College to be formed and also in the development of academic programme in general/ family practice in Singapore. The CFPS was also represented by their Censor-in-Chief, Associate Professor Tan Boon Yeow.



Prof Wes Fabb with Dr Mitchell and Prof Goh at the celebration following signing of the historic agreement

Professor Wesley Fabb, former CEO of Wonca and his wife Marian were also present. Professor Fabb gave a brief history of the long relationship between the Australian and the Singapore Colleges.

Fellowship *ad eundum gradum* of the RACGP is available to Fellows of the Royal New Zealand College of General Practitioners by reciprocity and members of the Irish College of General Practitioners by mutual agreement. Doctors from the United Kingdom and Canada who meet required criteria demonstrating equivalence in education, training and experience are also eligible to apply for Fellowship *ad eundum gradum*. The RACGP also has a conjoint fellowship with both the Malaysian and Hong Kong colleges.

The editor thanks Dr Mitchell and Prof Goh for their contribution to this article.

PAKISTAN HUMANITARIAN SITUATION CONTINUES

In the October edition of Wonca News the Wonca president, Professor Richard Roberts, launched an appeal to assist our colleagues in Pakistan. Dr Aziz Khan Tank, Secretary General of the College of Family Medicine Pakistan, provided an on-the-ground report of the devastation in his country. In early November, he sent this update to Wonca News.

The present situation regarding the flood affected people has improved in the provinces of Khabar, Pukhtoon, Khowa and Punjab but unfortunately, Interior Displaced People (IDP) in the provinces of Sindh and Balochistan are still living in camps in view of the disruption to their homes and cattle farming, as well as lacking life-saving items.

The Government as well as the private sector and NGOs like Pakistan Medical Association (PMA) and College of Family Medicine Pakistan (CFMP) are trying to help them. Due to the winter season having already started, we are trying to supply them with beds, blankets and warm clothes. This is as well as rations of rice, wheat flour, and pulses; major and minor water plants for clean water; other daily necessities like milk and milk products for infants; and medicines needed for the displaced people.

Unfortunately, Dengue fever has spread amongst IDPs as well as the general population and the problem of lack of supply of platelets to all these patients has become acute.

Pakistan is expecting a very severe winter, this year, which will create more problems for the displaced flood victim populations, so it is requested that whoever wants to help this noble humanitarian task are most welcome to sent their whatever contribution they can in the form of substances, materials or money.

So far, we have received help for flood victims affected from Pakistani Doctors in USA, Canada, UK, and UAE as well as a number of messages from various medical colleges and individuals from all over the world. We are very thankful to you, and to the Wonca secretariat and Wonca President, Richard G Roberts, for highlighting the cause of the flood affected people of Pakistan in Wonca News October 2010.

For further information or donations please contact:

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WONCA REGIONAL NEWS

EASTERN MEDITERRANEAN REGION FEATURE

Arabic translation included at rear of this edition of Wonca News

WONCA EMR THANKS THEIR SUPPORTERS

With heartfelt gratitude, Wonca Eastern Mediterranean Region (EMR) acknowledges the support and tireless efforts of the following friends of Wonca EMR:

All the Wonca executives who have given Wonca EMR strength, through their ideas and wisdom, gained from their Wonca International experience.

All the presidents and officers of Family Medicine Societies in Wonca EMR countries for their tireless efforts in aiding to put the organisational plans together;

Mrs Lina Alaa Al Deen Nazmi for her contributions in organising conferences, scientific and organisational meetings;

Dr Pilar Centina-Licupa for contributing her research and writing skills to Wonca EMR's research, scientific work and other publications;

Eng. Feras Abdullah for his creative contributions in designing the Wonca EMR website;

Miss Janice Liwanag for English secretarial work which has helped in communications between members of Wonca EMR; and Mr Rabeah Abdo for Arabic secretarial work which facilitated Arabic correspondences.

Prof Nabil Y Kurashi
President, Wonca EMR

WONCA EMR MOVES AHEAD

The announcement of the Wonca Eastern Mediterranean Region (EMR) as full Wonca Region during the Cancun Conference was happily awaited. It was the culmination of several years of preparation on the part of its interim executive. The idea to establish a Wonca group solely for the Middle East was introduced by Michael Boland, Bruce Sparks and many others. Wonca EMR came into existence in July 2007, during the Wonca Executive Meeting in Singapore and Professor Nabil Al Kurashi was selected to head the committee to develop the region.

Current Wonca EMR members and the year of joining Wonca are: Saudi Arabia, 1994; Lebanon, 2003; Bahrain, 2004; Jordan, 2004; Iraq, 2005; UAE, 2006; Oman, 2007; Egypt, 2007; and Syria, 2010. These eight members represent more than 6,000 doctors in the East Mediterranean region. Other countries such as Qatar, Kuwait, Yemen, Sudan, Tunisia, and Morocco are expected to join in the next three years.

Wonca EMR Mission:

Improve the quality of life of the peoples of the East Mediterranean through fostering and maintaining high standards of care in general practice/family medicine by providing a forum for exchange of knowledge and information; encouraging and supporting the development of academic organizations of general practitioners/family physicians; and representing the educational, research and service provision activities of general practitioners/family physicians before other world organizations and forums concerned with health and medical care.

To this end, Wonca EMR will organise an annual conference and other inter-country meetings

and will support special projects which will stimulate development and research in General Practice in the Eastern Mediterranean Region.



Wonca EMR office bearers with other region VIPs (from l to r) Dr Jassim Kelaib , UAE; Dr Oraib Al Smadi, Jordan; Prof Nabil Al Kurashi, President, Wonca EMR; Dr Faisal Al Hamar, Minister of Health, Kingdom of Bahrain; Prof Faisal Al Nasser, Bahrain; Dr Mohammad Tarawneh, Jordan

Office bearers

Prof Nabil Al Kurashi, Saudi Arabia – President
 Dr Mustafa Hashimi, UAE - Honorary Treasurer
 Dr Oraib Al Smadi, Jordan – Honorary Secretary
 Prof Taghreed Farahat, Egypt
 Dr Omar Al Jabri, UAE
 Dr Mohammed Tarawneh, Jordan
 Dr Badriyah Al-Rashedi, Oman
 Prof Bassem Saab, Lebanon
 Dr Sundus Shawqui Khalil, Iraq

Wonca EMR region meetings to date

The first Wonca EMR Region meeting for regional board executives was held on November 13–14, 2007 in the Jeddah, Kingdom of Saudi Arabia.

The second region meeting was held in Oman on January 20, 2009 along with the First International Conference of Family Medicine which was held at Sultan Qaboos University (SQU). The conference was organized by the SQU College of Medicine & Health Sciences in collaboration with WHO, Wonca, Wonca EMR, Oman Ministry of Health, the Oman Family Medicine Society (FAMCO), and the GCC Health Ministers Council. Prominent Wonca leaders, Professors Chris Van Weel, Richard Roberts, Michael Kidd, and Igor Švab; and Doctors Alain Montegut and Gabriel Ivbijaro; also participated in the conference.

Wonca EMR's third regional meeting was held in Amman, Jordan on 7th October, 2009. This was in

conjunction with the First Conference of the Pan-Arab Association of Family Medicine and the Eighth International Conference of Jordan Society of Family Medicine (JSFM), under the leadership of Dr Mohammed Tarawneh and Dr Oraib Smadi, board members of JSFM and Wonca EMR members.

The fourth EMR Region Meeting Bahrain on March 30 to 31, 2010. Important issues were discussed including: an update on the aspects of family medicine and primary care in each country, regional by-laws, Wonca EMR Region Conference in November 2010, the creation of a scientific library for Wonca EMR, and establishment of a Wonca EMR office. A common agreement was reached for all members to find ways to support the organization in a variety of ways.

The fifth, and very recent, Wonca EMR region meeting was held Dubai in November 2010.

Progress so far

Wonca EMR has achieved some gains in three years since its establishment which include: formation of the society with increased involvement of Wonca EMR in country health policies in the region and increased awareness of Wonca in the region; increased participation in the regional scientific activities from Wonca; acceptance and of Wonca resources such as ICPC-2. There have also been more opportunities in the region to meet and share; strengthening of the societies in the region by using Wonca as a global scientific support and by utilizing the expertise of Wonca executives as consultants as needed; and better cultural networking with other regions in primary care. Wonca EMR has been invited as an observer for every WHO inter-country activity in the region.

Although there have been quite substantial gains, there are some challenges and among them are: inadequate financial resources, marketing of ICPC-2, lukewarm acceptance of Wonca in some countries. More efforts towards proving Wonca EMR are needed in order to increase Wonca country and individual membership.

The future for Wonca EMR

Immediate plans for Wonca EMR include: establishing a permanent center that will house the executive office, training center, research center, and consultant offices; strengthening marketing and media relation activities; increase scientific involvement in family medicine in the region; and increase Wonca EMR membership by signing up countries like Qatar, Kuwait, Yemen, Sudan,

Tunisia, and Morocco. Wonca EMR has developed a list of goals, roles and responsibilities of members for 2010 and ahead.

INSTITUTIONAL RELATIONS

- Develop and maintain relations with other regional organizations.
- Liaison with government entities and health authorities.
- Conduct stake-holder presentations and meetings.
- Capture and update Wonca EMR data base with information on regional activities related to general practice/ family medicine.
- Manage Media relations opportunities on behalf of Wonca EMR.
- Manage awareness campaigns and fund raising initiatives.
- Organize EMR meetings, produce agenda's and track action points.

MEMBER DEVELOPMENT

- Manage Wonca EMR Branch website.
- Develop and maintain potential member data base.
- Conduct member recruitment drives.
- Manage communication with member organizations.
- Liaison with Wonca membership Committee.
- Produce and manage Wonca EMR Journal.

CONTINUOUS MEDICAL EDUCATION

- Provide structured support to organizations and individuals at all levels of learning: undergraduate specific training, CME and higher professional education in general practice.
- Conduct training needs analysis on behalf of members.
- Organize periodical training programs for GPs across various levels.
- Organize and manage member networking events.
- Liaison with academics, encourage participation from universities.
- Manage Wonca EMR participation in related meetings and events.
- Plan for and organize Wonca EMR regional conference.

SCIENTIFIC DEVELOPMENT

- Promoting research in general practice/family practice within EMR.
- Set research targets, support and foster research capacity of the discipline.
- Promote international co-operation through participation of academic departments of general practice/ family medicine in other regions.
- Plan and manage scientific content for EMR regional conference.

- Promote collaborative research in general practice in EMR region
- Facilitate and organize research methods training courses.
- Identify methods already used to improve quality of care in general practice
- Stimulate education and debate relevant for the development of general practice/ family medicine in by the publication a variety of background papers, covering clinical matters, educational topics, or policy issues.

PROFILE: PROFESSOR NABIL AL KURASHI INAUGURAL PRESIDENT WONCA EMR

Professor Dr Nabil Yasin Al Kurashi, a Saudi national, is the first president of the Wonca Eastern Mediterranean Region (EMR).

He took his MB BS, and Fellowship in Family and Community Medicine, in the College of Medicine of King Faisal University (now University of Dammam), Kingdom of Saudi Arabia (1984 and 1988, respectively). He was made a Fellow of Public Health of the Royal College of Physicians (UK), 2007.



Prof Nabil Al Kurashi

At the University of Dammam, he has been Professor of Family Medicine since 2007; a consultant of Family Medicine since 1996; and was chairman of the Department of Family and Community from 1996 to 2000.

Prof Al Kurashi has made demonstrable and valuable contributions to the Saudi and Arab medical field, notably in Family and Community Medicine. His work experiences in the Kingdom of Saudi Arabia are impressive and include:

- Vice-chairman and consultant of: the Arab Development Institute/ Health Development International in Al-Khobar (1995 to current); Health Development International, (1993–1995); and Zamil Medical Services in Al-Khobar (1992–1995)
- General Supervisor of Al-Amal Hospital, Dammam (1992–1993)

- Executive Hospital Director (1990-1992) and Director of the Medical Education and Research Center (1991-1992), King Fahd Specialist Hospital in Buraidah, Al-Qassim
- Regional Director of Medical Education and Research Centre of Al-Qassim (1991-1992)
- Coordinator of Emergency Medicine Unit, King Fahd Hospital of the University of Al-Khobar, in 1990.
- Consultant and Clinical Director of Family Medicine in Al-Khobar Government Hospital Family and Community Medicine Clinic, Al-Khobar (1989-1990).

Since 2007, he has also been president and owner of Bahrain Wellness Resort: a wellness and rehabilitation center licensed by the Ministry of Health to provide alternative medicine and research.

Prof Al Kurashi's teaching responsibilities include teaching of the undergraduate medical and nursing students; teaching and training of Family Medicine postgraduates; and supervision of masters and fellowship researchers in various Universities in Arab and Gulf Co-operation Council (GCC) Countries. He is a sought-after speaker in symposiums and conferences both locally, nationally and internationally; for his research studies and innovative insights in drug dependence, mental health, geriatric medicine, home health care, family medicine, primary health care, and health education.

Prof Al Kurashi is one of the founding pillars of the Saudi Society of Family and Community Medicine (SSFCM): serving as its Vice-President (1995-2005), then President (2005-2008). He is a co-founder of Arab Cancer Society.

He has published several scientific papers and is an Editorial Board Member of the Journal of

Family and Community Medicine (the official journal of SSFCM), *the Journal of Medical Case Reports*, *the Arab Board Medical Journal*, *the Middle East Journal of Family Medicine* and *World CME*. He was also the founder and Editor-in-Chief of the Al-Faisal Medical Journal, a bilingual Journal that issued 13 colorful issues, with 30,000 copies printed and distributed in all Arab counties, with free subscription to all medical libraries of the Arab countries (1980-1987).

Prof. Kurashi is also a member of the Scientific Committee, and chairman of the Examination Committee for the Arab Medical Board in Family and Community Medicine. He is also a member of the Scientific and Examination Committee of the Egyptian Board in Family Medicine. In 2007, he was a consultant to the World Health Organization, in Tunisia, on Family and Community Medicine in the Middle East and Africa.

His current initiatives include involvement in establishing the Arab Development University, Bahrain, and the Arab Development University, Oman; a partnership company called Gulf Health Net and Saudi Health Net, which is establishing a chain of family medicine clinics in collaboration with national health insurance company, and supported by the Ministry of Health and National Council for Cooperative Health Insurance, in Saudi Arabia.

He is a strong advocate of "Family Doctor in Each Family".

**SAUDI ARABIA JOURNAL OF
FAMILY AND COMMUNITY
MEDICINE ON-LINE**
www.jfcmonline.com

The Saudi Society of Family and Community Medicine is pleased to announce the launch of the website of its official journal, the *Journal of*

Family and Community Medicine. The website is a valuable on-line resource where articles can be viewed and submitted electronically.

The *Journal of Family and Community Medicine* is the official journal of the Saudi Society of Family and Community Medicine and was first printed in 1994. It is an international peer-reviewed journal and is indexed by Index Medicus for the Eastern Mediterranean Region (IMEMR). The purpose of the journal is to promote excellence in the practice of family and community medicine and closely related fields.

The journal aims to promote the knowledge, attitude and practice of all aspects of comprehensive health care (preventive, curative and rehabilitative). The journal also aims at facilitating the development of community-based research, education, and health services. Original papers, short communications, and letters to the editor are all welcomed. Case reports with substantial significance are also considered for publication. Manuscripts either in Arabic or English language are published.

**FUTURE REGION CONFERENCES
WONCA CEBU: FEBRUARY, 2011**

www.wonca2011.org

The preparations for 18th Wonca Asia Pacific Regional joint conference the 10th Wonca Rural Health World Conference are in the final stages. The four-in-one affair, also includes the 50th Annual Convention and golden anniversary of the host, the Philippine Academy of Family Physicians (PAFP), and the 25th Annual Meeting and silver anniversary of the Foundation for Family Medicine Educators.

The host organizing committee has graciously extended the deadline for abstract submission to November 15, 2010. Visit www.wonca2011.org for abstract submission and online registration. You will also learn more about the conference from our website.

Plenary speakers

The Wes Fabb orator is Professor John Murtagh from Australia who has authored *General Practice*, a bible in clinical medicine translated into 13 languages, at the latest count.

The plenary sessions will be stimulating and intellectually enriching with the following subthemes and plenary speakers.



Prof John Murtagh is the Wes Fabb orator in Cebu

For the first day, the focus is on climate change, environment and health. Professor Sir Andrew Haines, director of London School of Tropical Medicine and Dr Wesley Schmidt, Wonca World Executive 'at large' member from Paraguay are the speakers.

Second day will be on making primary care reforms work through family medicine research with Dr Somjit Prueksaritanond, vice-president of the General Practitioners/Family Physicians Association, Thailand, Professor Christos Leonis of University of Crete and Convener of International Federation of Primary Care Research and Professor Lin Yi Ming of University of Tzu Chi University of Taiwan.



Dr Wesley Schmidt, Wonca executive member from Paraguay is a speaker, in Cebu

Family medicine education: think global, act local is the subtheme for the third day and our speakers are Dr Iona Health, president of the Royal College of General Practitioners (UK) and member of Wonca World Executive committee, Ms Concepcion Pijano who is executive director of the Philippine Accrediting Association of Schools, Colleges and Universities and Professor Lucy Walters of Flinders University.

The last day will have Professor Richard Roberts, president of Wonca and Professor Sarah Larkins of James Cook School of Medicine (Australia). They will tackle the subtheme: *Family Health Care: Patient Safety, Quality and Social Accountability*.

Social events

The social program will be enjoyable and culturally enriching. Cebu City is the oldest City in the Philippines. It is the second biggest metropolitan area in the country, with the amenities of any urban center. It is also located in Cebu province which is known as peace loving, resort area, famous for its white beaches, heritage houses, and great singers, all of which are part of the program. The Welcome reception will feature the Filipino family physicians presenting songs and dances typical of our various ethnic groups, complete with a variety of costumes. Thus, everyone is encouraged to wear their national attires. There will be an 'Amazing Race' to be participated in by delegates and their guests who would like to energize. The Conference dinner will be night for dances and awards. The PAFP shall hold conferment ceremonies on February 20, 2011.

Venue

The conference will be held at Waterfront Hotel, Cebu City from February 21-24, 2011.

Post conference meeting of rural doctors

The rural doctors will have a post conference meeting in the neighboring island of Leyte from February 25-27, 2011. They will also visit the University of the Philippines Manila School of Health Sciences, a pioneer in ladderized curriculum and East Visayas Region medical center. More

information on this post-conference meeting is included elsewhere in this edition of *Wonca News*

Zorayda E. Leopando, MD, MPH
Overall Chair, Host Organizing Committee

WONCA AFRICA 2012 ANNOUNCED

The College of Primary Care Physicians of Zimbabwe is pleased to announce the 3rd Wonca Africa Region Conference. The theme of the conference will be: Roles and Responsibilities of African Family Physicians. The conference will be held at the Elephant Hills Hotel, Victoria Falls, Zimbabwe from 16–19 October, 2012.

There is excellent accommodation available at the conference venue, the Elephant Hills Hotel (4 star); and the Victoria Falls Hotel (5 star); and The Kingdom Hotel (3 star). These Victoria Falls hotels are about 27 kilometres from the airport and delegates travelling via Johannesburg will link with a direct flight to the Victoria Falls. Shuttle buses will be available. Visa requirements for Zimbabwe must be researched from one's own country, though the organisers will assist if difficulties are experienced. A letter of invitation will be issued if needed.

The conference will be held over four days and the hotels are offering lower rates to conference delegates for a ten day period, from the 14–24 October, 2012, to enable them to enjoy the facilities and activities available at the Victoria Falls. Such activities include: a visit to the rainforest at Victoria Falls by walking and helicopter; exploring the mighty Zambezi River by boat, or canoe, or sunset cruise; white water rafting on the Zambezi; bungee jumping over the Zambezi gorge in full view of the Victoria Falls; game drives to view the 'big five' at nearby Victoria Falls game park and at the famous Hwange Game Park. Lower rates will also be available at Hwange Safari Lodge during the conference period.

For further advance details contact the convener, Dr. Muriel Selma Fallala, by email. galen@gatorzw.co.uk or cpcpz@mweb.co.zw

WONCA WORKING GROUP NEWS

WONCA RURAL HEALTH WORLD CONFERENCE

www.wonfacebu2011.org

The 10th Wonca Rural Health World Conference is being held jointly with the 18th Wonca Asia- Pacific Region Conference at the Waterfront Hotel, Cebu City, Philippines from February 21 – 24, 2011.

It has been a tradition that after a Wonca Rural Health World Conference, a post conference meeting is organised. This time from February 25-27, 2011, rural doctors will go to the neighbouring island Leyte, in Central Philippines.

The academic highlight of the meeting will be a visit to the University of the Philippines Manila School of Health Science, which pioneered the ladderized curriculum for educating health professionals. Students are nominated/selected by the community, which they shall serve after training. They can study to become midwives, then pursue education to become nurses. The last step of the ladder is that of becoming a doctor.

In addition, the delegates will be oriented about the practice- based training for family physicians at the Eastern Visayas Region Medical Center. There will be interactions with municipal health officers of the Philippines and community-based family physicians.

Cultural enrichment shall entail visits to historical landmarks and island-hopping to witness how the natives live and see how their handicrafts are done.

The post conference meeting and tour will be organized by Dr Aileen R Espina and Dean Jusie Lydia Siega Sur from the Philippines in conjunction with Dr Bruce Chater of Australia.



Prof Ian Couper from South Africa –
Chair of the Wonca Working Party on Rural Practice

INFORMATICS IN MALAGA

There were two workshops on informatics at the Wonca Europe conference held in Malaga. The first was a joint presentation between the Wonca Informatics Working Party and the Wonca International Classification Committee. Jean Karl Soler and Peter Schattner discussed the role of classification systems in general practice and, in particular, highlighted some of the key features of Wonca's International Classification in Primary Care (ICPC).

A second workshop was run by the Informatics Working Party and the European Society for Quality in Family Practice (EQuiP). The speakers were Peter Schattner, Carl Steylaerts, Ilkka Kunnamo, Heinz Bhend and Henrik Schroll. The topic was on the use of clinical data to improve the quality of care in general practice. Most of the systems described used some sort of data capture or data extraction process whereby clinical actions performed by GPs could be analysed and compared with pooled data or electronic guidelines.



Peter Schattner, Chair,
Wonca Working Party on Informatics

For further information about the subject matter presented in these workshops, please contact Associate Professor Peter Schattner Chair, Wonca Working Party on Informatics
peter.schattner@monash.edu

HEALTH AND HEALTH SYSTEM NEWS

CHANGES COMING IN THE UK

Professor Steve Field is Chairman of Council of the Royal College of General Practitioners (RCGP), until 20th November, when Dr Clare Gerada takes over the mantle. At the recent RCGP conference in Harrogate, in October 2010, Professor Field spoke at length about issues relating to future changes to the health system of the UK including the latest White Paper 'Equity and Excellence: Liberating the NHS' which sets out the UK Government's long-term vision for the future of the NHS.

These are excerpts from his key-note speech which can be found, in full at: http://www.rcgp.org.uk/docs/News_Professor_Steve_Field_-_Keynote_-_071010.doc



Prof Steve Field at Harrogate.

*Photo courtesy of SIRASudio
www.sirastudio.com*

Federations of GPs

I believe that GPs working together in a Federation is the way forward.

Gone are the days where single-handed GPs should be allowed to work alone in splendid isolation. All practices should think seriously about working together in a Federation, while preserving their individual identities if they so wish. Working together allows us to learn together, to provide a bigger range of services and to provide better quality of care – the benefits of which can be seen in the award-winning

Croydon federation and in many other federations across the country. The RCGP Federation toolkit produced with the support of the Kings Fund and the Nuffield Trust will be launched shortly.

Federations allow us to share information – between practices and between doctors – and we must have as much information as possible so that we can compare our performance with others – both individuals and practices. GPs are professionals; we are all competitive and we want to do better for our patients, a quality that helps us produce better quality care, increase productivity and drive down costs.

Inclusion health

While I have seen some really exciting developments in primary care, it has become increasingly obvious to me that there are many vulnerable people who don't even get access to poor care!

I am thinking about the homeless, asylum seekers, travellers and sex-workers.

Inclusion health seeks to drive improvements, mainly through system reform and clinical leadership, to ensure everyone gets the care they need, regardless of their needs or circumstances.

The research confirms that a small but significant group of the nation's most vulnerable people continue to suffer from poor health outcomes across a range of indicators including self-reported health, life expectancy and morbidity.

For example: Hepatitis B and C infection rates among female prisoners are 40 and 28 times higher than in the general population; two thirds of refugees/asylum seekers have experienced anxiety or depression; up to 95% of women in prostitution are problematic drug users; 22% and 34% of Gypsies and Travellers reported having asthma or chest pain compared to 5% and 22% of the general population; 60% of Irish travellers die before they are 60 – and the life expectancy of the homeless in their low 40s; and 68% of women in prostitution meet the criteria for Post Traumatic Stress Disorder, in the same range as victims of torture and combat veterans undergoing treatment.

Inclusion Health highlights that health inequalities persist, and that vulnerable groups experience a range of health needs, which can be exacerbated by social factors. Furthermore, those with multiple, complex needs often make chaotic and disproportionate use of health care services, and experience a range of barriers and issues relating to their access and quality of primary care. So often poor health drives wider social problems.

The costs of failure are great, not only to the individual life chances of vulnerable clients, but

also to the taxpayer, services and the communities who pick up the pieces.

I call on you all to think about how you might improve the care for you local vulnerable people – think Inclusion Health – see how you can reach out and provide better services. Reach out and make sure that you commission services to address their needs.

The White Paper

While the *White Paper* applies to England only, we felt it was important to seek the views of our entire 42,000 Membership in the UK and internationally. We received a terrific response and I'd like to thank all of you who took the time to give us your views.

We, the RCGP, have welcomed the direction of travel - it proposes what we have been calling for years - greater leadership and influence for GPs.

It also calls for much more patient and public involvement: 'No decision about me without me'. This is a concept that has been welcomed by our members, and one that places patients at the centre of primary care. This is something we have espoused since we were formed in the 1950s; it's in the DNA of the College and we demonstrate it in our curriculum, in our MRCGP and in our iMAP assessments.

Where we have reservations, we have offered our solutions and suggestions. While there many GPs who are really enthusiastic about the opportunities offered in the *White Paper* – and you find more enthusiasts at meetings than those who write in to us – there are some who think this is the worst thing ever to happen to the NHS

and worry about the take-over of the NHS by big, for-profit American multinationals.

There is a feeling that if GPs had been allowed to be more involved in leading PCTs, and in making commissioning decisions then we wouldn't have needed the radical reform that is being proposed by the new Coalition Government.

I conclude that while this is a massive reform of the NHS, and it is not without its risks, there are major opportunities for GPs to lead the NHS in England, to design care better tailored for our patients rather than being told what to do from on high or at least from London!

Our many younger members – many of whom make up the 43% of salaried GPs across the country – have said that they see opportunities in the White Paper to influence and to get involved, but are concerned that just like the GP contract that rewards partners and locks out some salaried doctors, that they may be left behind.

Implementation is of course the key: We still have major concerns about the pace of change and we need to make sure that care and indeed access to care doesn't deteriorate during the transition to this new system, which is a major risk at a time of such massive change.

There is a key role for the College in helping GPs acquire the skills that they will need, and I know that Clare Gerada is working on ideas with the NHS Institute and others, and that she will be sharing them with you during this conference. We need to work with the NHS Confederation, with the Kings Fund, with the NAPC, the NHS Alliance and others. We all have something to offer – but this is

a great opportunity for the College to lead – to support GPs across the country and to deliver a GP led, patient centred service.

White Paper, Equity and Excellence: Liberating the NHS can be located at
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/DH_4122399

The RCGP response to the White Paper is available on: http://www.rcgp.org.uk/pdf/RCGP_response_to_Equity_and_Excellence_Liberating_the_NHS.pdf

MEMBER AND ORGANIZATIONAL NEWS

A number of Wonca's member organisations have recently held their annual conferences and also recently changed their office-bearers. New Presidents have taken office in Canada, the United States and Australia. Details and excerpts from important speeches follow.

NEWS FROM CANADA

The College of Family Physicians of Canada (CFPC) held another successful Family Medicine Forum from October 14-16, in Vancouver. The meeting saw a change of president and new Executive Committee for the CFPC. Check out the videos of the opening keynote speakers on the website:

Canadian astronaut and family physician Dr Robert Thirsk. http://fmf.cfpc.ca/English/Vancouver10/Thursday_keynote_10/Thursday_keynote_10.html

Canadian family physician Dr. Jack Taunton, chief medical officer of the Vancouver 2010 Olympic and Paralympic games! http://fmf.cfpc.ca/English/Vancouver10/Friday_keynote_10/Friday_keynote_10.html

A further report on the forum and pictures will be contained in the February issue of *Wonca News*. Next year, the Family Medicine Forum will be held in Montréal, from November 3-5.

Valedictory Message: Dr Cathy MacLean, CFPC President 2009-2010

My theme for this year was “the family of family medicine.”

To be strong, we must be inclusive and remain as a unified voice for all family physicians. As I finish my year as CFPC president, I would like to emphasise the

need for us to work together. We can have a strong voice and we can accomplish great things for the health care of Canadians. We all need to work together - rural, urban, academic, those with special interest and focused practices - valuing the contributions we make to primary care in Canada.

To be strong we also need good leadership. My thanks to Cal Gutkin, the College's senior staff, executive and board for the dedication and excellent work I have seen this past year. Please join me in welcoming Rob Boulay as the incoming President of the College. Rob will be an excellent leader. He will add further strength to the family of family medicine.

New President: Dr Rob Boulay

On October 15, 2010, the College of Family Physicians of Canada (CFPC) proudly welcomed Dr Rob Boulay as its 57th President.

Inspired by the leadership and dedication that Canadian family doctors provide to their patients and communities on a daily basis, Dr Robert Boulay is a passionate advocate for family medicine.

After graduating from Dalhousie Medical School in 1989, Dr Boulay completed a rotating internship at Dalhousie and immediately began working at the Hotel Dieu Hospital in Chatham, New Brunswick. In July 1990, he opened his own family practice in Miramichi, where his scope of care has included obstetrics, inpatient care and ER coverage.

Throughout his career, Dr Boulay has had a strong commitment to medical education. He has enjoyed teaching medical students and family medicine residents since 1995. In 2004, Dr Boulay was the recipient of the Dalhousie University Undergraduate Preceptor of the Year Award. He has served as the Medical Education Director for the Miramichi Regional Health Authority and continues to be involved with the development of the Dalhousie Medical Education Program for New Brunswick.

Dr Boulay became a member of the CFPC in 1995. From 2004–2006 he served a two-year term as President of the New Brunswick College of Family Physicians and was a member of the CFPC National Board from 2002–2006. Since 2007, he has been a member of the National Executive Committee and has served on numerous committees including the Primary Health Care Steering Committee and a joint CFPC–CMA committee to explore the concept of primary care wait time benchmarks. In 2000, Dr Boulay served as Vice President of Medical

Affairs for the Miramichi Regional Health Authority, where he worked with various stakeholders to address and improve the health care services in the region.

In 2006, Dr Boulay was acknowledged as Family Physician of the Year for the Province of New Brunswick as the recipient of the Reg L Perkin Award.

Looking ahead to his year as CFPC president, Dr. Boulay is well aware of the current challenges facing family medicine and hopes to motivate family physicians to provide strong leadership in health care. He feels strongly that the leadership provided by family physicians not only to their patients but their communities, hospitals, and health organizations is a resource that has been underutilized in the past.

“I believe family doctors are the cornerstone for our patients’ health,” says Dr. Boulay. “The sustainability issues facing the Canadian health care system can only be addressed through a reinvestment in primary care, with family physicians playing a strong leadership role in the process.”

Dr Boulay enjoys playing and coaching soccer and has recently renewed his relationship with golf - if only to serve as a reminder that he has a lot more left to learn in life! He lives in Miramichi, New Brunswick with his wife of 22 years, Bernadette McCarthy DDS, and his three children, Daniel, Emma, and Samuel.

2010-2011 Executive Committee Members:

- President: Dr Rob Boulay, Miramichi, NB
- Past President: Dr Cathy MacLean, Calgary, AB
- President-Elect & Chair of the Board: Dr Sandy Buchman, Toronto, ON
- Honorary Secretary & Treasurer: Dr Marie-Dominique Beaulieu, Montreal, QC
- Member-at-Large: Dr Kathy Lawrence, Regina, SK
- Member-at-Large: Dr Nirvair Levitt, Vancouver, BC
- Executive Director & CEO: Dr Calvin Gutkin, Mississauga, ON
- Executive Manager: Ms Sarah Scott, Mississauga, ON

CFPC Celebrates the ‘Best of the Best’ in Family Medicine:

2010 Family Physician of the Year Awards

The CFPC is proud to announce the names of the outstanding family physicians whose professional accomplishments have earned them recognition as Canada’s 2010 Family Physicians of the Year. Each year, the College awards the Reg L Perkin Award to one family

physician from each province in recognition of their exceptional care for patients, meaningful contributions to the health and well-being of communities, and dedication to research and teaching. Award recipients are nominated by their peers, patients, colleagues, and community leaders.

- Canada’s Family Physicians of the Year for 2010 are:
- Dr Catherine Penney, St. Anthony, Newfoundland and Labrador
 - Dr Charles Dewar, O’Leary, Prince Edward Island
 - Dr David MacNeil, Bedford, Nova Scotia
 - Dr Jennifer Hall, Saint John, New Brunswick
 - Dr Ruth Vander Stelt, Gatineau, Québec
 - Dr Catherine Faulds, London, Ontario
 - Dr Anne Durcan, Winnipeg, Manitoba
 - Dr Carla Eisenhauer, Saskatoon, Saskatchewan
 - Dr Karen Lundgard, Peace River, Alberta
 - Dr Ronald Wilson, Vancouver, British Columbia

The editor thanks the CFPC for providing this news and translation.



Dr Rob Boulay, new president of the CFPC

Le nouveau président du CMFC: le Dr Rob Boulay

NOUVELLES DU CANADA

Encore une fois, le Forum en médecine familiale du Collège des médecins de famille du Canada (CMFC), qui s’est déroulé à Vancouver du 14 au 16 octobre, a connu un franc succès. Lors de la réunion, un nouveau président et un nouveau Comité de direction du Collège ont été nommés. Visualisez les vidéos des conférences d’ouverture (en anglais)

- Dr Robert Thirsk, astronaute et médecin de famille.
http://fmf.cfpc.ca/English/Vancouver10/Thursday_keynote_10/Thursday_keynote_10.html
- Dr Jack Taunton, médecin de famille, médecin-chef aux jeux Olympiques et Paralympiques de Vancouver en 2010.
http://fmf.cfpc.ca/English/Vancouver10/Friday_keynote_10/Friday_keynote_10.html

Un rapport détaillé du Forum avec photos, sera publié dans la livraison de février de *Wonca News*. L'an prochain, le Forum en médecine familiale aura lieu à Montréal, du 3 au 5 novembre.

Message d'adieu de la présidente : Dre Cathy MacLean, présidente du CMFC en 2009-2010

Mon thème pour l'année était « la famille de la médecine familiale ».

Pour être solide, la médecine familiale doit être inclusive et parler d'une seule voix au nom de tous les médecins de famille. Au terme de mon mandat à la barre du CMFC, je voudrais souligner l'importance d'unir nos efforts. Nous pouvons parler d'une voix forte et accomplir beaucoup pour les soins de santé de la population canadienne. Nous devons simplement travailler ensemble – que ce soit en milieu rural, urbain, universitaire, y compris les médecins avec intérêts particuliers et pratiques ciblées – pour valoriser les contributions que nous faisons aux soins de première ligne au Canada.

Notre force repose également sur un leadership solide. J'aimerais remercier Cal Gutkin, le personnel cadre, le Comité de direction et le Conseil d'administration du Collège pour leur dévouement et l'excellent travail dont ils ont fait preuve durant la dernière année. Je vous invite à vous joindre à moi pour accueillir Rob Boulay comme président du Collège. Rob sera un excellent leader. Il donnera encore plus de force à la famille de la médecine familiale.

Le nouveau président : le Dr Rob Boulay

Le 15 octobre 2010, le Collège des médecins de famille du Canada (CMFC) accueillait fièrement son 57e président, le Dr Robert Boulay.

Inspiré par le leadership et le dévouement quotidiens dont les médecins de famille canadiens font preuve envers leurs patients et leur communauté, le Dr Robert Boulay est activement engagé à promouvoir la médecine familiale.

Le Dr Boulay a obtenu son diplôme de l'École de médecine de l'Université Dalhousie en 1989. Au terme d'un internat rotatoire à Dalhousie, il a immédiatement commencé à exercer la médecine à l'Hôtel-Dieu de Chatham, au Nouveau-Brunswick. En juillet 1990, il a ouvert sa propre pratique familiale à Miramichi et ses intérêts professionnels incluent l'obstétrique, les soins hospitaliers et les soins d'urgence.

Le Dr Boulay a éprouvé un vif intérêt pour l'éducation médicale tout au long de sa carrière. Il enseigne aux étudiants en médecine et aux résidents en médecine familiale depuis 1995. En 2004, l'Université Dalhousie a récompensé le travail du Dr Boulay en lui décernant le prix de précepteur pré-doctoral de l'année. Il a œuvré à titre de directeur du perfectionnement médical à la Régie régionale de la santé de Miramichi et il continue de participer à l'élaboration du programme d'éducation médicale de l'Université Dalhousie pour le Nouveau-Brunswick.

Le Dr Boulay est devenu membre du Collège des médecins de famille du Canada en 1995. Il a été président de la Section du Nouveau-Brunswick du Collège de 2004 à 2006 et a siégé au Conseil national du CMFC de 2002 à 2006. Depuis 2007, il est membre du Comité de direction national et a participé à divers comités, y compris le Comité directeur sur les soins de santé primaires et un comité conjoint du CMFC et de l'AMC chargé d'examiner le concept des points de repère pour les temps d'attente en soins de première ligne. En 2000, le Dr Boulay a agi à titre de vice-président des affaires médicales de la Régie régionale de la santé de Miramichi, où il collaborait avec divers intervenants en vue d'examiner et d'améliorer les services de soins de santé de la région.

En 2006, le Dr Boulay a été nommé Médecin de famille de l'année au Nouveau-Brunswick et il a reçu le prix Reg L Perkin.

En réfléchissant sur l'année à venir, Rob est bien conscient des défis actuels en médecine familiale. Il croit fermement que le leadership des médecins de famille, non seulement auprès de leurs patients mais aussi au sein de leurs collectivités, hôpitaux et organismes de santé, est une ressource qui a été sous-utilisée par le passé.

« Je crois que les médecins de famille constituent la pierre angulaire de la santé de nos patients », dit le Dr Boulay. « Les problèmes de viabilité auxquels est confronté le système de santé ne peuvent être résolus que par un réinvestissement dans les soins de première ligne, axé sur un rôle de leadership marqué pour les médecins de famille durant le processus. »

Joueur et entraîneur de soccer, le Dr Boulay a aussi renoué avec le golf ces derniers temps – ce qui lui rappelle constamment que la vie est une suite infinie d'apprentissages! Il vit à Miramichi, au Nouveau-Brunswick, avec son épouse Bernadette McCarthy, diplômée en chirurgie dentaire, qui est sa conjointe depuis 22 ans, et leurs trois enfants Daniel, Emma et Samuel.

Membres du Comité de direction pour 2010-2011

Président: Dr Rob Boulay, Miramichi, N.-B.
 Présidente sortante: Dre Cathy MacLean, Calgary, Alta
 Président désigné et président du Conseil: Dr Sandy Buchman, Toronto, Ont.
 Secrétaire trésorière honoraire: Dre Marie-Dominique Beaulieu, Montréal, Que
 Représentante des membres: Dre Kathy Lawrence, Regina, Sask.
 Représentante des membres: Dre Nirvair Levitt, Vancouver, C.-B.
 Directeur général et chef de la direction: Dr Calvin Gutkin, Mississauga, Ont.
 Directrice générale: Mme Sarah Scott, Mississauga, Ont.

Le CMFC honore la crème de la crème de la médecine familiale en décernant les Prix du médecin de famille de l'année 2010

Le Collège des médecins de famille du Canada (CMFC) est fier d'annoncer le nom des médecins de famille exceptionnels dont les réalisations professionnelles leur ont mérité le titre de Médecin de famille de l'année 2010. Chaque année, le Collège décerne les Prix Reg L Perkin à un médecin de famille dans chaque province en reconnaissance de l'excellence des soins qu'ils prodiguent à leurs patients, de leur importante contribution à la santé et au bien-être de leur communauté et de leur dévouement à la recherche et à l'enseignement. Les récipiendaires des prix sont proposés par leurs pairs, leurs patients, leurs collègues et les leaders de leur communauté.

Les Médecins de famille de l'année 2010 au Canada sont les suivants :

Dre Catherine Penney, St. Anthony, Terre-Neuve-et-Labrador
 Dr Charles Dewar, O'Leary, Île-du-Prince-Édouard
 Dr David MacNeil, Bedford, Nouvelle-Écosse
 Dre Jennifer Hall, Saint John, Nouveau-Brunswick
 Dre Ruth Vander Stelt, Gatineau, Québec
 Dre Catherine Faulds, London, Ontario
 Dre Anne Durcan, Winnipeg, Manitoba
 Dre Carla Eisenhauer, Saskatoon, Saskatchewan
 Dre Karen Lundgard, Peace River, Alberta
 Dr Ronald Wilson, Vancouver, Colombie-Britannique

L'éditeur remercie le CMFC pour les nouvelles et la traduction

NEWS FROM THE USA: "IT IS OUR TIME"

Adapted from AAFP News Now press release by Sheri Porter



AAFP president Roland Goertz MD wearing the presidential medal, with outgoing president Lori Heim MD.

Photo courtesy of AAFP News Now

The new president of the American Academy of Family Physicians (AAFP) is Roland Goertz, MD, of Waco, Texas.

He reached out to all AAFP members during his address at the AAFP Scientific Assembly saying "we are an incredibly diverse group of people, in terms of our political affiliations, our demographics and our opinions on the Academy's policies and actions during the past year".

"Change of the magnitude we are trying to accomplish always meets resistance," said Goertz, adding that AAFP members are "bound together because we believe in family medicine, and we are family physicians."

He reminded all those attending the AAFP Scientific Assembly opening ceremony that family physicians are making a difference in the future of America's health care. That statement is not based on "a wish or whim," but on fundamentally understanding that family physicians hold a core belief in what they do; understand that these are unique times and that the specialty is well-positioned to shape the future of health care in the United States; and have of a history of transforming themselves when needed by the health care system around them.

Family physicians have a long history of stepping forward when necessary, even when it is challenging.

The Future of Family Medicine project came together in the current decade, as a bold step, that ultimately affirmed the American public wants the type of care family physicians provide, as well as the model of care that family medicine was beginning to create. The challenge facing the AAFP was how to make family medicine more patient-centered and how to promote those changes, and the specialty as a whole, to the outside world.

"And slowly, oh so slowly, almost like an aircraft carrier beginning to change course, the landscape began to change, and family medicine moved to the forefront," said Goertz. "The new health care reality is partly the realization that modern medicine will not always fix us," he said. "The new political reality is that improving health care is being pitted against the need to constrain governmental costs and to reduce the federal deficit. These forces give family medicine enormous opportunities to show our value and to change the system."

He acknowledged the anxiety felt by many AAFP members and the uncertainty with upcoming elections. "I do not know how much time it will take to accomplish all that we need. We have made a great start, and we will be there working for you. We must stand together and be willing to go toe-to-toe with anyone else for the sake of our patients, for our profession, for our families and for our communities. We need to understand that it is our time, we need to believe that it is our time, and we need to act like it is our time."

New AAFP leaders

President: Roland Goertz, MD, of Waco, Texas.

President-Elect: Glen Stream, MD, MBI, of Spokane, Wash.

Speaker of the Congress: Leah Raye Mabry, MD, of San Antonio, Texas

Vice Speaker: John Meigs Jr, MD, of Centreville, Ala.

Directors:

Barbara Doty, MD, of Wasilla, Alaska;

Richard Madden Jr, MD, of Belen, N.M.

Robert Wergin, MD, of Milford, Neb.

New physician Board member:

Russell Kohl, MD, of Vinita, Okla.

Resident Board member:

Heidi Meyer, MD, of Tucson, Ariz.

Student Board member:

Kevin Bernstein, of Quakertown, Pa.

NEWS FROM AUSTRALIA

The Royal Australian College of General Practitioners (RACGP) held their annual conference GP10, in Cairns, from 6-9 October, 2010. The conference was the largest to date with over 1000 registrants who included both GPs and practice managers.

New President: Prof Claire Jackson



Prof Claire Jackson,
new president of the RACGP

Professor Claire Jackson delivered her inaugural speech as President of the RACGP on October 6, 2010. She follows Dr Chris Mitchell and is the third female President of the College.

Professor Jackson is a GP and GP Supervisor in Inala, Brisbane and is Professor in General Practice and Primary Health Care at the University of Queensland. She has previously been Chair of the RACGP Council and the RACGP Queensland Faculty and has had significant involvement in health reform in many areas, serving on the National Primary Care Strategy Expert Advisory Group and providing a commissioned paper for the National Health and Hospital Reform Commission.

Excerpt from Prof Jackson's inaugural speech

We swim currently within a strong current of health care reform and have an historic opportunity to mould it around the pivotal contribution of quality general practice. The College, as the body representing quality, standards and training for Australia's 20,000 GPs, will play a critical role.

We must continue the great work to date to build the infrastructure within our practices to take best advantage of future opportunities. E health is a critical enabler and its growth and successful enhancement in Australian general practices will be a key Presidential priority.

We must also lay a sturdy framework to train the long-awaited army of new graduates. The future growth of Australian general practice into broad-based prevention and chronic disease management depends upon it. We will face many challenges in achieving this – stretching our time and energy around an exponential increase in vocational and pre-vocational trainees. However, accomplish this we must – comprehensively and well. Without workforce there is no growth, no increased access or capacity for our communities. An adequate,

high quality and appropriately-trained general practice workforce will be a Presidential priority, as will the link between our profession and key consumer and patient advocacy groups – ensuring they understand our unique challenges and aspirations and join with us in addressing them.

All of us face a great personal challenge – that of enjoying and growing our wonderful profession and in so doing, balancing our love and commitment to family.

Our next year? A clear vision, respect for the input and concerns of others, a championing of our skills, reach and community connection, and a College that continues to be bold and seizes the general practice day.

The 53rd RACGP Council

At the Annual General Meeting of the RACGP on October 6, the members of the Council for 2011-2012 were announced.

Professor Claire Jackson – President

Professor Nigel Stocks – Chair of Council, SA&NT Faculty

Dr Elizabeth Marles – Vice President, NSW & ACT Faculty

Dr Jennie Kendrick – Censor in Chief

Dr Eleanor Chew – Queensland Faculty

Associate Professor Morton Rawlin – Victoria Faculty

Associate Professor Frank Jones – WA Faculty

Dr David Knowles – Tasmania Faculty

Dr Kathryn Kirkpatrick – National Rural Faculty

Dr Brad Murphy – National Faculty of Aboriginal and Torres Strait Islander Health

Dr Georga Cooke – Registrar Representative

Mr Neil Greenaway – Co-opted Councillor

Dr Chris Mitchell – Co-opted Councillor

Editor's note: at this conference an historic agreement was signed between the RACGP and the Singapore College. This is featured in the regional news section of this issue on Wonca News.

NEWS FROM AAFP INTERNATIONAL ACTIVITIES:

AAFP members discuss global family medicine development

Building Capacity to Improve Health for All was the theme of the 7th annual American Academy of Family Physicians (AAFP) Family Medicine Global Health Workshop. The workshop was made possible thanks to the financial support from the AAFP Foundation.

The workshop was held September 9-11, 2010, at Coral Gables, Florida. The first workshop, in 2003,

focused primarily on training international primary care consultants. Since then, the thematic message and educational goals of subsequent workshops have been gradually broadened to meet the needs and interests of a growing population of family doctors, family medicine educators, other clinicians, residents, medical students, public health and research workers, who are interested in and passionate about global health and quality primary care development worldwide.

The AAFP Center for International Health Initiatives (CIHI), created in 2000, in response to an increased interest in global development of family medicine, led the process of the workshop's CME framework development and served as core faculty.

Donna E Shalala PhD, President of University of Miami and former secretary of the Department of Health and Human Services in President Clinton's administration, delivered a key-note speech focusing on the global importance of health and health care and the impact of women's health on overall health care issues.



Professor Therese Zink MD from Minnesota (left) at the global health workshop, with Wonca North America Region President Dan Ostergaard MD and his wife Ruth.

Fitzhugh Mullan MD, Murdock Head Professor of Medicine and Health Policy, George Washington University School of Public Health and Health Services was another key-note speaker who raised important issues of "brain drain", workforce retention efforts and capacity building in sub-Saharan Africa in his presentation Doctors of the world: from where and for whom.

The key-note ideas were further reflected upon in breakout sessions, peer and poster presentations and special networking events. An impromptu group headed by Bruce Dahlman, MD, met to discuss ideas concerning the formation of a collaborative fellowship training track for family physicians who are interested in assisting the specialty's formation, in the majority of the world's

countries. This training would focus on the need for faculty development to support the graduates of newly forming and expanding residency training programs in Africa. Dahlman, who has 13 years' experience working in Kenya says "family medicine is emerging and growing in east and central Africa. All of us who work in this endeavor feel privileged to be part of something new and important".



Former President of Wonca Americas region Warren Heffron MD speaking at the meeting

In all, 25 posters were presented featuring a broad variety of ideas, topics and experiences of AAFP members in Honduras, Nicaragua, Guatemala, Russia, China, Haiti, Rwanda, Uganda, Sierra Leone, Tanzania and other countries around the world.



(l to r) Mari Egan MD, Mark Potter MD, and Sarah-Anne Schumann MD presented on "developing a community based family medicine clerkship at Wuhan University medical school in China"

Longer than usual breaks between the sessions allowed for significant networking, sharing experiences, learning from others and hearing new ideas. Another special event – meet the consultant students/resident reception - was geared toward medical students and family medicine residents who were able to meet CIHI consultants in an informal setting, and asked questions about their career paths in global health, and strategies to enrich their lives through global family medicine.

Wrapping up the conference, Dan Ostergaard MD, AAFP vice-president and president of Wonca North America region, said: "It is awe inspiring to see the work family physicians are doing all over the world. We each have a responsibility to make a contribution beyond our own zone of comfort and our colleagues are doing so!"

The 2011 Family Medicine Global Health Workshop will be held in San Diego, California from October 13-15. For information go to www.aafp.org/intl/workshop or contact Rebecca Janssen, Senior Program Coordinator, at rjanssen@afp.org.



Ashley Neils MSPH discusses her poster "Traditional strategies for preventing maternal mortality among the Masai"

PRESIDENT’S INVITATION FOR ACADEMIC MEMBERSHIP

Wonca launched a new category of membership called “Wonca Academic Membership” during the Wonca Asia Pacific Regional Conference, in Melbourne, in October 2008. As of October 2010, Wonca now has 45 Academic Members from various countries, with some countries having multiple Academic Members. The most recent application was from the Aga Khan University in Karachi, Pakistan.

Wonca President’s Message

Dear Colleague,

On behalf of the World Organization of Family Doctors, I cordially invite your department to join Wonca in the new membership category of ‘Academic Membership’. This membership is for mutual advantage: it will help your staff members to engage in international primary care collaboration through participation in Wonca conferences, Working Parties, Special Interest Groups and other activities. It will enable Wonca to build upon your important work in research, teaching and training.

Together, it will be possible to better advocate the important message of primary care leadership in health care systems around the world.

Wonca’s mission is to care for people: ‘every family a family doctor’. But this will only have an impact when there is an academic outreach to every family doctor – to study health problems, create new practice, teach and educate. This requires the ability to attract the best future doctors to primary care. To achieve this, every medical student should be exposed to primary care as early as possible in their studies, and for as long as possible.

The work of your university department of family medicine, primary care, community care, your residency training program therefore matters very much to Wonca and this membership offers a splendid opportunity to strengthen our ties.

I am thrilled about your joining Wonca as an Academic Member, and I look forward very much to welcoming you and your staff members to Wonca activities.

Professor Richard Roberts
President of Wonca

Benefits of Academic Membership

1. Six complementary copies of the bi-monthly electronic *Wonca News* letter to help you keep in touch with the world of Family Medicine.
2. Special discounts on all Wonca publications and products for sale.
3. Free Journal Alerts service twice a week.
4. Provide opportunities for networking with other Academic Members globally – this will be especially useful for new emerging departments in developing countries who may “twin” with other Academic Members from more developed countries as part of this Wonca initiative.
5. Academic Members can use the Wonca international network to market their activities and educational programs.
6. Wonca will provide Academic Members with an international and regional forum for faculty development and faculty exchange as they network with the other Academic Members within Wonca.

Eligibility Criteria

Academic Departments / Training Programs of general practice/family medicine which are actively involved in teaching and research, support the Mission of Wonca and desire affiliation with Wonca. For further information contact the Wonca World Secretariat admin@wonca.com.sg

WONCA CONFERENCES 2010 – 2013 AT A GLANCE

Information correct as of December 2010.

**Wonca Direct Members enjoy lower conference registration fees

See Wonca Website www.GlobalFamilyDoctor.com for updates & membership information

2011			
21 – 24 February	Asia Pacific Regional Conference	Cebu PHILIPPINES	Paradigms of Family Medicine: Bridging Old Traditions with New Concepts
8 – 11 September	Europe Regional Conference	Warsaw POLAND	Family Medicine - Practice, Science and Art
2012			
24 – 27 May	Wonca Asia Pacific Regional Conference	Jeju SOUTH KOREA	Theme to be confirmed
4 – 7 July	Europe Regional Conference	Vienna AUSTRIA	The Art and Science of General Practice
16 – 19 October	3rd Wonca Africa Conference	Victoria Falls Zimbabwe	Roles and Responsibilities of Africa Family Physicians
2013			
June	20 th Wonca World Conference	Prague CZECH REPUBLIC	Family Medicine: Care for Generations

GLOBAL MEETINGS FOR THE FAMILY DOCTOR

MEMBER ORGANIZATION AND RELATED MEETINGS

Qatar Health 2010

Date : December 10-15, 2010.
 Venue : Doha International Exhibition Center, Doha, Qatar
 Web : www.qatarhealth.info
 E-mail : qatarhealth@hmc.org.qa
 Tel : +974 439 7398
 Fax : +974 439 7763

39th EQUIP Assembly meeting

Date : April 7-9, 2011
 Venue : Copenhagen
 Web : www.equip.ch

EGPRN Spring meeting

Host : European General Practice Research Network (EGPRN)
 Date : May 19-22, 2011
 Venue : Nice, France
 Web : www.egprn.org

2nd IPCRG Scientific Meeting

Host : International Primary Care Respiratory Group
 Date : May 26-27, 2011
 Venue : Amsterdam, The Netherlands
 Web : www.theipcr.org
 Email : BusinessManager@theipcr.org

5e Congrès de la Médecine Générale France 2011

Thème : La Médecine Générale: dynamiques, réalisations et réalités
 Date : June 23-25, 2011
 Venue : Nice, France
 Web : <http://www.congresmg.fr>
 Email : congresmg@overcome.fr

FCGP conference 2011

Host : Fiji College of GPs
 Theme : People's Health in our hands
 Date : June 11-13, 2011
 Venue : Intercontinental Fiji Golf resort and Spa, Sigatoka, Fiji
 Web : <http://www.fijigp.com/index.aspx>
 Email : dr_arti@yahoo.com

IAHCP 22nd Annual Scientific Meeting

Host : International Association of Health Care Professionals (IAHCP)
 Theme : Maintaining the Challenges in Medical Practice, Family Medicine and Education
 Date : August 20-23, 2011
 Venue : London, United Kingdom
 Web : www.ahcpuk.org
 Contact : Mary Kelly/Maria Ivanova
 Email : ahcpconference@ymail.com
 Tel : +44 1375 387209

2011 RNZCGP conference for general practice

Host : The Royal New Zealand College of General Practitioners
 Theme : Playing the Advantage - Tackling the Wicked Issues
 Date : September 1-4, 2011
 Venue : The Langham Auckland, New Zealand
 Web : www.rnzcgp.org.nz

AAFP Annual Scientific Assembly, United States 2011

Host : The American Academy of Family Physicians
 Date : September 14 – 17, 2011
 Venue : Orlando, Florida, USA
 Web : www.aafp.org

RACGP GP '11 Conference

Host : The Royal Australian College of General Practitioners
 Date : October 6-9, 2011
 Venue : Hotel Grand Chancellor, Hobart, Australia
 Web : www.racgp.org.au or <http://www.gp11.com.au/>

EGPRN autumn meeting

Host : European general practice research network (EGPRN)
 Date : October 13-16, 2011
 Venue : Krakow, Poland
 Web : www.egprn.org

RCGP Annual National Primary Care Conference, United Kingdom 2011

Host : Royal College of General Practitioners
 Theme : Diversity in practice
 Date : October 20-22, 2011
 Venue : Liverpool ACC, United Kingdom
 Web : www.rcgp.org.uk

IAHCP 46th Joint Medical Congress

Host : International Association of Health Care Professionals (IAHCP)
 Theme : Progress in Medical Practice, Primary Care and Education in the 21st Century
 Date : October 24-27, 2011
 Venue : London, United Kingdom
 Web : www.ahcpuk.org
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Family Medicine Forum / Forum en médecine familiale 2011

Host : The College of Family Physicians of Canada.
 Le Collège de médecins de famille du Canada
 Date : November 3-5, 2011
 Venue : Montreal, Quebec, Canada
 Web : <http://fmf.cfpc.ca>

لتحرير مجلة الفيصل الطبية وهي مجلة كانت تصدر باللغتين العربية والإنجليزية وقد أصدرت 13 عدداً وتم طباعة وتوزيع حوالي 30,000 نسخة في الدول العربية وذلك خلال الفترة 1980م - 1987م .

الأستاذ الدكتور نبيل عضو في اللجنة العلمية ورئيس لجنة الإمتحانات لتخصص طب الاسرة والمجتمع في المجلس العربي للتخصصات الطبية. كما هو عضو في اللجنة العلمية ولجنة الإمتحانات بالمجلس المصري في طب الأسرة.

كما عمل في عام 2007م مستشاراً لمنظمة الصحة العالمية في تونس في مجال طب الأسرة والمجتمع في الشرق الأوسط وأفريقيا. وحالياً يقوم بعدد من المبادرات فيها انشاء جامعة التنمية العربية في مملكة البحرين وجامعة التنمية العربية في سلطنة عمان وشركة مساهمة تسمى الشبكة الصحية الخليجية والشبكة الصحية السعودية عبارة عن سلسلة من عيادات طب الاسرة بالتعاون مع شركة التأمين الصحية وتجد الدعم من قبل وزارة الصحة والمجلس الوطني للتأمين الصحي التعاوني في المملكة العربية السعودية. ويعتبر الأستاذ نبيل القرشي من المدافعين بشدة عن مشروع "طبيب أسرة لكل أسرة".

مجلة طب الاسرة والمجتمع على الشبكة الالكترونية

- يسر الجمعية السعودية لطب الاسرة والمجتمع ان تعلن عن افتتاح موقع مجلة طب الاسرة والمجتمع التي تصدرها الجمعية.
- يعتبر هذا الموقع مصدراً عالمياً قيماً حيث يضم العديد من المقالات والمواضيع العلمية التي تناقش أحدث التطورات في المجال الطبي خاصة في مجال طب الاسرة والمجتمع مما يتيح للقارئ الاطلاع على ذلك من خلال النسخة الالكترونية من المجلة.
- وجددير بالذكر ان مجلة طب الاسرة والمجتمع قد صدرت في عام 1994 للمرة الاولى، واستطاعت خلال فترة وجيزة ان تتبوأ موقعاً مرموقاً لدى القراء والدوائر العلمية في منطقة شرق حوض البحر الابيض المتوسط. وكان لهذه المجلة مساهمة كبيرة ملموسة في تعزيز الرعاية الصحية والبحث العلمي والتعليم والتدريب.

شكر وتقدير

يتقدم المكتب الاقليمي لمنظمة اطباء الاسرة العالمية لمنطقة شرق حوض البحر المتوسط بكل الشكر والتقدير للاشخاص المذكورين ادناه لما بذلوه من جهد وقدموه من خدمة وهم :

- السيدة لينا عملاء الدين نظمي لمساهمتها في تنظيم المؤتمرات والاجتماعات واللقاءات العلمية.
- الدكتورة بيلار سنتينا ليكوبا لمساهمتها في مجالات البحث والمهارات الكتابية في البحوث والمنشورات العلمية.
- المهندس فراس حسين عبدالله لمساهمة المميزة في تصميم موقع منظمة اطباء الاسرة لمنطقة شرق حوض البحر المتوسط.
- السيدة جانيس ليوانانج لقيامها باعمال السكرتارية الانجليزية والمساعدة في الاتصالات بين اعضاء المكتب التنفيذي لمنظمة اطباء الاسرة العالمية لمنطقة شرق حوض البحر المتوسط.
- الاستاذ هاشم السنجك لقيامه باعمال الترجمة من اللغة الانجليزية الى العربية والعكس.
- الاستاذ صالح علي التوم لقيامه باعمال المراجعة والصياغة التحريرية.
- الاستاذ ربيع عبده لقيامه باعمال السكرتارية العربية والاتصالات العربية.

أ. د. نبيل ياسين القرشي



قدم الأستاذ الدكتور نبيل مساهمات فاعلة وقيمة في المجال الطبي في المملكة العربية السعودية والعالم العربي وخصوصاً في مجال الأسرة . ويمكن تلخيص خبرته والوظائف التي تولاها في المملكة العربية السعودية فيما يلي :-

- نائب رئيس مجلس الادارة ومستشار معهد التنمية العربي مؤسسة التنمية الصحية الدولية بالخبر (منذ عام 1995م حتى الآن).
- مديرشركة الزامل للخدمات الطبية (1992م – 1995م) .
- المشرف العام لمستشفى الأمل بالدمام (1992م – 1995م) .
- المدير التنفيذي لمستشفى الملك فهد التخصصي ببريدة- القصيم (1990م – 1992م) .
- المدير الأقليمي لمركز التعليم الطبي والبحوث لمنطقة القصيم (1991م – 1992م) .
- منسق وحدة طب الطوارئ, مستشفى الملك فهد الجامعي بالخبر في عام 1990م .
- استشاري والمدير السريري لطب الأسرة في عيادة طب الأسرة والمجتمع بالخبر (1989م – 1990م) .

منذ العام 2007م أصبح رئيس ومالك منتجع البحرين الصحي وهو مركز تأهيلي مخصص له من قبل وزارة الصحة البحرينية لتقديم خدمة الطب البديل والبحث.

يقوم الاستاذ الدكتور نبيل القرشي بتدريب طلاب الطب وطالبات كلية التمريض وتدريب طلاب الدراسات العليا المتحقيين ببرنامج التخصص في طب الأسرة كما يشرف على البحوث الخاصة بدرجة الماجستير والزاملة في عدة جامعات في البلدان العربية ودول مجلس التعاون الخليجي. كما يشارك بفعالية كمتحدث ورئيساً لبعض اجاث في مؤتمرات وندوات مختلفة وتعليمية وعالمية. وقد قام باجراء عدد من البحوث القيمة في مجالات الاعتماد على المخدرات والصحة النفسية وطب الشيخوخة والرعاية الصحية الأولية وطب الأسرة والرعاية الصحية الأولية والتثقيف الصحي.

يعتبر الاستاذ الدكتور نبيل ياسين القرشي أحد مؤسسي الجمعية السعودية لطب الأسرة و المجتمع وقد عمل نائباً لرئيس لهذه الجمعية من 1995م – 2005م ثم رئيساً لها خلال الفترة 2005م – 2008م . كما يعتبر الدكتور القرشي من المساهمين في انشاء الجمعية العربية للسرطان.

وقام أ. د. نبيل بنشر العديد من الأوراق العلمية في عدد من المجالات العلمية المعروفة والمتخصصة وهو عضو هيئة التحرير في عدد منهم مثل مجلة طب الأسرة ومجلة تقارير الحالات الطبية ومجلة المجلس العربي للتخصصات الطبية ومجلة الشرق الأوسط لطب الأسرة . كما يعتبر أول رئيس

برنامج التعليم المستمر:

- تقديم الدعم المؤسس للمنظمات والافراد في جميع مستويات التعليم : تقديم برامج تدريبية للطلاب، تنفيذ أنشطة تعليم طبي مستمر لطلاب الدراسات العليا في الممارسة العامة.
- تحليل احتياجات التدريب للممارسين العاميين في مختلف المستويات.
- تنظيم وإدارة المناسبات والانشطة الخاصة بالاعضاء.
- اقامة العلاقات والاتصالات مع الجهات الاكاديمية والجامعات وتشجيعهم على المشاركة.
- تنظيم مشاركة المكتب الاقليمي للونكا في الاجتماعات والمناسبات ذات الصلة.
- اقامة وتنظيم المؤتمرات الاقليمية للمكتب الاقليمي لمنظمة الونكا لمنطقة شرق حوض البحر الابيض المتوسط.

التطوير العلمي :

- تعزيز البحث العلمي في مجال الممارسة العامة / ممارسة طب الاسرة داخل بلدان منطقة شرق حوض البحر الابيض المتوسط.
- تحديد أهداف البحوث ودعم وتعزيز البحث في مجال طب الاسرة/ الممارسة العامة.
- تعزيز التعاون الدولي من خلال مشاركة الاقسام الاكاديمية لطب الاسرة / الممارسة العامة في المناطق الاخرى.
- وضع وتنظيم المحتوى العلمي للمؤتمرات الاقليمية لمكتب الونكا لمنطقة شرق حوض البحر الابيض المتوسط
- تعزيز البحث التعاوني في الممارسة العامة / طب الاسرة في منطقة شرق حوض البحر الابيض المتوسط.
- تسهيل وتنظيم دورات تدريبية في مناهج البحث.
- تحديد الطرق والوسائل المستخدمة في تحسين جودة الرعاية في الممارسة العامة.
- حفز العملية التعليمية والمناقشات العلمية لتطوير الممارسة العامة/ طب الاسرة من خلال عمليات التأليف والنشر لاوراق ومواضيع علمية وسريية وتعليمية وغيرها.
- ولا يزال الطريق طويل إلا أننا نحرص من خلال مجلس الونكا شرق حوض البحر المتوسط أن نضع اسس علمية إدارية ثابتة لضمان استمرارية ونجاح المنظمة في المنطقة العربية ومنطقة الشرق الاوسط.

سيرة ذاتية - أ. د. نبيل ياسين القرشي

أول رئيس للمنظمة العالمية لأطباء الأسرة لمنطقة شرق البحر الأبيض المتوسط.

الأستاذ الدكتور نبيل ياسين القرشي، سعودي الجنسية وهو أول رئيس للمنظمة العالمية لأطباء الأسرة لمنطقة شرق البحر الأبيض المتوسط (EMRO). وهو حاصل على درجة البكالوريوس في الطب و الجراحة عام 1984م زمالة جامعة الملك فيصل في تخصص طب الأسرة والمجتمع عام 1988م وذلك من كلية الطب بجامعة الملك فيصل (حاليا سميت جامعة الدمام) بالمملكة العربية السعودية. وهو عضو الكلية الملكية لأطباء الصحة العامة بالمملكة المتحدة منذ عام 2007م.

يعمل الأستاذ الدكتور نبيل ياسين القرشي استاذاً لطب الأسرة بكلية الطب بجامعة الدمام وتمت ترقيته إلى درجة الاستاذ في عام 2007 كما يعمل طبيب استشاري لطب الأسرة بمستشفى الملك فهد الجامعي بالخبر التابع لجامعة الدمام منذ عام 1996 م، وعمل رئيساً لقسم طب الأسرة والمجتمع بكلية الطب بالجامعة خلال الفترة من 1996 إلى 2000م.

التطور وسير العمل حتى الآن:

حقق المكتب الاقليمي لمنظمة أطباء الاسرة العالمية لمنطقة شرق حوض البحر الابيض المتوسط عدد من المكتسبات خلال السنوات الثلاثة من انشائه والتي تشمل قيام هذا المكتب بمشاركة متزايدة في السياسات الصحية في بلدان المنطقة وزيادة الوعي والمعرفة بمنظمة الونكا في المنطقة وزيادة المشاركة في الانشطة العلمية بالمنطقة من قبل الونكا وقبول موارد الونكا مثل (ICPC-2) كما كان هنالك ايضا مزيد من الفرص في المنطقة للاجتماعات واللقاءات والمساهمات، ودعم الجمعيات في المنطقة، والاستفادة من خبرة المدراء التنفيذيين لمنظمة الونكا كاستشاريين عند الحاجة وانشاء شبكات ثقافية أفضل مع الاقاليم الاخرى في مجال الرعاية الصحية الاولى، كما تمت دعوة المكتب الاقليمي للونكا للعمل كمراقب بكل نشاط تنظمه منظمة الصحة العالمية في اي بلد من بلدان المنطقة.

على الرغم من هذه المكتسبات المنحزة هنالك بعض التحديات التي من بينها : عدم كفاية الموارد المالية وتسويق (ICPC-2) وعدم انضمام بعض الجمعيات إلى منظمة الونكا في بعض البلدان. وعليه هنالك حاجة لبذل مزيد من الجهود لاختيار المكتب الاقليمي للونكا من اجل زيادة عضوية البلدان وايضاً العضوية الفردية في منظمة الونكا، بالاضافة إلى فتح باب جديد للعضويات الاكاديمية والتي تتيح الفرص لجميع أقسام وبرايمج طب الاسرة والمجتمع للانتساب للونكا كعضو أكاديمي.

مستقبل المكتب الاقليمي لمنظمة الونكا لمنطقة شرق حوض البحر الابيض المتوسط.

وضع خطط فورية للمكتب الاقليمي وهي تشمل : إنشاء مركز دائم يستوعب المكتب التنفيذي ومركز التدريب ومركز البحوث ومكاتب الاستشاريين وتعزيز أنشطة التسويق والاعلام والعلاقات العامة وزيارة المشاركة العلمية في مجال طب الاسرة في المنطقة وزيارة عضوية المكتب الاقليمي للونكا في منطقة شرق البحر الابيض المتوسط من خلال انضمام بلدان مثل قطر والكويت واليمن والسودان وتونس والمغرب.

وضعت منظمة الونكا قائمة الأهداف والأدوار والمسؤوليات للأعضاء للعام 2010م والاعوام القادمة:

العلاقات مع المؤسسات الاخرى:

- تاسيس علاقات وثيقة مع المنظمات الاقليمية الاخرى.
- إنشاء علاقات وثيقة مع الاجهزة الحكومية والسلطات الصحية.
- عقد اجتماعات دورية للاعضاء.
- العثور على وتحديث قائمة منظمة الونكا لمنطقة شرق البحر الابيض عن الأنشطة في المنطقة ذات الصلة بالممارسة العامة - طب الاسرة .
- إقامة اتصالات وأنشطة اعلامية باسم المكتب الاقليمي لمنظمة الونكا لمنطقة شرق حوض البحر الابيض المتوسط.
- إقامة حملات توعية ومبادرات لدعم الموارد المالية.
- عقد اجتماعات للمكتب الاقليمي لمنظمة شرق حوض البحر الابيض المتوسط واعداد الاجندة ومتابعة نقاط التنفيذ والعمل.

تطوير العضوية :

- إدارة موقع المكتب الاقليمي لمنطقة شرق حوض البحر الابيض المتوسط بالشبكة العنكبوتية.
- إنشاء قاعدة بيانات للاعضاء المتوقع انضمامهم لعضوية المكتب.
- إقامة علاقات مع المنظمات الاخرى.
- الاتصال بلجنة عضوية منظمة الونكا.
- اعداد ونشر مجلة خاصة بالمكتب الاقليمي للونكا لمنطقة شرق حوض البحر الابيض المتوسط.
- وقد تم التوصل الى اتفاق عام من قبل جميع الاعضاء لإيجاد طرق لدعم المنظمة في مجالات مختلفة.
- عقد الاجتماع الخامس لمكتب منظمة الونكا شرق حوض البحر الابيض المتوسط في دبي في نوفمبر 2010م



أعضاء مكتب **Wonca** في شرق حوض البحر الأبيض المتوسط مع بعض كبار الشخصيات (من اليمين إلى اليسار): د. محمد طراونه- الأردن، أ. فيصل الناصر- البحرين، د. فيصل الحمير- وزير الصحة في مملكة البحرين، أ. د. نبيل ياسين القرشي- المملكة العربية السعودية، د. عريب الصمدي - الأردن، د. جاسم كليب- دولة الإمارات العربية المتحدة.

اجتماعات مكتب منظمة أطباء الاسرة العالمية لمنطقة

عقد الاجتماع الاول للمجلس التنفيذي لمكتب منظمة أطباء الاسرة العالمية لمنطقة شرق حوض البحر الابيض المتوسط في الفترة 13 - 2007/11/14م في مدينة جدة بالمملكة العربية السعودية، وعقد الاجتماع الثاني في سلطنة عمان في 2009/1/20م بجانب المؤتمر العالمي الأول لطب الاسرة الذي عقد بجامعة السلطان قابوس بالسلطنة والذي قامت بتنظيمه كلية الطب والعلوم الصحية بالجامعة بالتعاون مع منظمة الصحة العالمية والمنظمة العالمية لاطباء الاسرة (الونكا) والمكتب الاقليمي لمنظمة أطباء الاسرة العالمية لمنطقة شرق حوض البحر الابيض المتوسط والجمعية

العمانية لطب الاسرة ومجلس وزراء دول الخليج. وقد شارك فيه عدد من قيادات الونكا المعروفين والاستاذ الدكتور كريس فان ويل، وأ.د. ريتشارد روبرت و أ.د. مايكل كيد و أ.د. لوقور اسواب و د. ألين مونتيجوت و د. جبريل افجارو.

عقد الاجتماع الاقليمي الثالث لمكتب الونكا لمنطقة شرق حوض البحر الابيض المتوسط في مدينة عمان بالاردن في 2009/10/7م وذلك بالتزامن مع المؤتمر الاول للجمعية العربية لطب الاسرة والمؤتمر العالمي الثامن للجمعية الاردنية لطب الاسرة تحت قيادة الدكتور محمد طراونه والدكتورة عريب الصمادي وأعضاء مجلس إدارة الجمعية الاردنية لطب الاسرة وأعضاء مكتب الونكا الاقليمي لمنطقة شرق حوض البحر الابيض المتوسط.

عقد الاجتماع الاقليمي الرابع لمكتب الونكا لمنطقة شرق حوض البحر الابيض المتوسط في البحرين في الفترة 30 - 2010/3/31م حيث تم مناقشة عدد من المواضيع الهامة شملت آخر المستجدات في مجال طب الاسرة والرعاية الاولية في كل من قطر والانظمة الاقليمية والمؤتمر الاقليمي لمكتب منظمة الونكا لمنطقة شرق حوض البحر الابيض المتوسط المنعقد في نوفمبر 2010م واستحداث مكتبة علمية لمكتب الونكا الاقليمي

منظمة أطباء الاسرة العالمية لمنطقة شرق حوض البحر الابيض المتوسط (Wonca EMR) تتقدم إلى الأمام

يعتبر إعلان منظمة أطباء الاسرة العالمية لمنطقة شرق حوض البحر الابيض المتوسط بانشاء مكتب إقليمي كامل للونكا أثناء مؤتمر كانكون حدثاً سعيداً كنا في انتظاره، وقد أخذ ذلك عدة سنوات من الاعداد في الفترة الانتقالية. إن فكرة انشاء مكتب إقليمي لمنطقة الشرق الاوسط ولدت منذ أكثر من عشر سنوات وطرحت الفكره للنقاش والحوار في 2004 ببيروت - لبنان - ثم في عام 2006 في ابوظبي - الامارات العربية المتحدة - حيث تم اختيار الدكتور نبيل القرشي لاستكمال اجراءات الاعتراف بالمنظمة من قبل د. مايكل بولاند وبيروس اسباركز والدكتور الفريد لو وآخرين. وظهر مكتب منظمة أطباء الاسرة العالمية لمنطقة شرق حوض البحر الابيض المتوسط والشرق الاوسط في يوليو 2007م أثناء انعقاد اجتماع المكتب التنفيذي للونكا في سغافوره حيث انتخب الاستاذ الدكتور نبيل ياسين القرشي رئيساً للمرحلة التأسيسية للمنطقة. حالياً تشمل عضوية مكتب المنظمة العالمية لأطباء الاسرة لمنطقة شرق حوض البحر الابيض المتوسط والشرق الاوسط كل من: المملكة العربية السعودية (عام 1994)، لبنان (عام 2003)، مملكة البحرين (عام 2004)، الاردن (عام 2004)، العراق (عام 2005)، دولة الامارات العربية المتحدة (2006) سلطنة عمان (2007)، مصر (2007)، سوريا (2010). وتمثل هذه الدول الثمانية أكثر من 6000 طبيب في منطقة شرق حوض البحر الابيض المتوسط، ويتوقع ان تنضم البلدان الاخرى مثل قطر والكويت واليمن والسودان وتونس والمغرب في السنوات الثلاثة القادمة بمشيئة الله.

رسالة مكتب المنظمة العالمية لأطباء الاسرة لمنطقة شرق حوض البحر الابيض المتوسط والشرق الاوسط.

تحسين نوعية حياة الناس في منطقة شرق حوض البحر الابيض المتوسط من خلال تعزيز وصيانة المعايير العليا للرعاية الصحية في الممارسة العامة - طب الاسرة - من خلال اقامة (منتدى) لتبادل المعرفة والمعلومات وتشجيع ودعم عملية تطوير المنظمات الاكاديمية للممارسين العاميين - أطباء الاسرة - وعرض الانشطة التعليمية والبحثية والخدمية للممارسين العاميين - اطباء الاسرة - على المنظمات والمنتديات العالمية الاخرى ذات العلاقة بالرعاية الصحية والطبية.

وسوف يقوم مكتب المنظمة العالمية لأطباء الاسرة لمنطقة شرق حوض البحر الابيض المتوسط بتنظيم مؤتمر سنوي بالتعاون مع احد الجمعيات الاعضاء ويتنقل من دولة لاخرى كما ينظم اجتماعات داخلية اخرى ويدعم مشاريع خاصة تحفز التطوير والبحث في الرعاية الصحية الأولية وطب الاسرة في منطقة شرق حوض البحر الابيض المتوسط.

أعضاء المكتب من عام 2007 - 2010م (المرحلة التأسيسية)

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من المحرّر

أهلاً وسهلاً

بأسرة أطباء منطقة شرق حوض البحر الأبيض المتوسط.

أودّ أن أرحّب بكم جميعاً وللمرة الأولى وباللغة العربية في هذا العدد الخاص من مجلة

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كما يُسعدني ويشرفني أن تنشر بعض المقالات باللغة العربية مع الاعتذار عن عدم إمكانية

ترجمة كلّ المقالات الأجنبية ولكن... إن شاء الله في المستقبل القريب.

وختاماً أودّ أن أعرب عن شكري الخاص للأستاذ الدكتور نبيل ياسين القرشي لمساهمته الكريمة

في إنجاز هذا العدد الخاص من مجلة Wonca-News،

كما أودّ أن أرسل أصدق التمنيات بالنجاح والتوفيق لعائلة أطباء Wonca في منطقة شرق

حوض البحر الأبيض المتوسط.

Dr Karen FLEGG MBBS FRACGP FACRRM MIPH