

12/5/17

## **Dear Member Organizations,**

This is my second letter to you. It follows our recent Executive meeting in London, and I hope you will find it useful. It complements our monthly newsletter and weekly e-updates, which are also intended to keep members informed about activities and opportunities: but this is intended to establish a more direct President – Member Organization (MO) communication route. My aim is to keep you regularly informed of strategic developments in WONCA: I would be delighted if you can send views and information on any items back to me.

One of my 'President's priorities' is to try to improve member engagement. Once individuals become active through WONCA, they often access our communications, engage, and use our resources to enhance their careers: but we find there are many members who do not know about WONCA even though they are part of one of our MOs. At Rio, the WONCA Council made some suggestions about how to improve this knowledge and awareness, and I would like to ask you to check whether your MO is doing the following –

- Do you have your own MO website? If so, please check it has information about WONCA clearly visible to your members, and that it includes an active link to our website <a href="https://www.globalfamilydoctor.com">www.globalfamilydoctor.com</a>.
- 2. Do you circulate WONCA e-newsletter and e-updates onwards to your members? Please do!
- 3. Do you have a part of your MO that focuses on doctors in training or early in their careers? If so, please make sure they know they can join the activities of our Young Doctor Movements <a href="http://www.globalfamilydoctor.com/groups/YoungDoctorsMovements.aspx">http://www.globalfamilydoctor.com/groups/YoungDoctorsMovements.aspx</a>. If not, please consider this! Our young doctor representative on WONCA Executive, Dr Ana Nunes Barata, is happy to advise about how you can 'grow' this sector of your community, who are crucial to the future of our discipline contact her on anunesbarata@gmail.com.
- 4. Many members have special interests in their careers they may not know that WONCA has thriving Working Parties and Special Interest Groups on a number of key topics, and joining these can add new contacts and international perspectives to their areas of enthusiasm see <a href="http://www.globalfamilydoctor.com/groups.aspx">http://www.globalfamilydoctor.com/groups.aspx</a>.
- 5. Advertising WONCA conferences again, an exciting opportunity for new information. These are just a few of the ideas to ensure that all your members can use the added opportunities which WONCA provides to support and enhance their careers. Your own regional Presidents

and the rest of the WONCA Executive kindly request you to help us get the message out, while we work to improve family medicine worldwide on your behalf.

The second part of this newsletter adds to the CEO's column in the May 2017 newsletter about WONCA Executive current activities. We held the second formal Executive of the new team in April, which took place at the headquarters of my own MO (the Royal College of GPs) in London. We shared news, covered some internal issues about finance and governance, celebrated new members (including Indonesia), and particularly noted the expanding work of the Young Doctors' Movements and our improved engagement with the World Health Organization. We reviewed the activities of our Working Parties and SIGs, and discussed membership issues

Our strategic discussions were on the important need to be able to define and describe what family medicine is, in order to be able to give others a clear understanding of what we do. We are a diverse community, and policymakers and other stakeholders are often confused about the key characteristics of family doctors and how we should fit into a strong health care system. While we have different forms of practice and health services worldwide, we need to give a clear message on the core characteristics of family medicine: and also what the speciality needs in terms of training and ongoing resources to deliver accessible, affordable and high quality care in a person-centred and population-centred way. Leaders in our MOs can read more at <a href="http://www.globalfamilydoctor.com/InternationalIssues/WONCAGuidebook.aspx">http://www.globalfamilydoctor.com/InternationalIssues/WONCAGuidebook.aspx</a>.

We also discussed workforce models, and the complexity of advocating for the 'best' model for a community. Imagine that your country had no primary health care system - what would you advise your ministry to put in place? We would recommend they start postgraduate training of plenty of family doctors to offer comprehensive care over time in all stages of health and illness. Executive also recognised the role of primary care nurses who have generalist skills and patient centred values, and the roles of community health workers / health care assistants in a team that together will serve a local population efficiently and effectively. Midwives, pharmacists, dentists, and hospital specialists will be other important colleagues, but we need to emphasise that without community medical generalists the system will be costly and less effective: and that staff with a more basic training cannot do the diagnostics, interventions, and management that a team with a family doctor can provide. Having responsibility for a registered population over time, and how patients pay for care, are also key to the outcomes of the team. Views and examples welcome!

Our next 'live' Executive will be in October in Thailand, preceding the Asia Pacific regional meeting. Beofre that we shall continue to meet by phone on a monthly basis, and keep up the good work on your behalves. Thank you for all your efforts for patients everywhere, and keep well.

Professor Amanda Howe, President WONCA