

WONCA News

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World family doctors. Caring for people.

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From the President: September 2020



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As the latest waves of the COVID-19 pandemic continue to develop across our world many professionals are engaged in research on sources, spread, treatments, longer-term impacts on health and a range of other related issues. Journals are reporting massive increases in submitted articles and research projects. All of these will make a contribution to our collective knowledge and enable us to better prepare for future pandemics – we hope. But did we learn from previous threats such as ZIKA virus or SARS? In those previously affected countries lessons were certainly learned, less so in countries which were less or unaffected. In the case of COVID-19 every country in the world has been affected, at least to the extent of trying to prevent transmission, as well as dealing with the terrible effects when the virus takes hold.

During our regular WONCA Webinars it was clear that getting access to reputable information was an issue for many. A key problem was trying to differentiate the reliable information from the fake information or panic-inducing rumour. What we all agreed was the importance of sharing our knowledge and the importance of working closely with our professional colleagues, right across the globe.

This virus, though most unwelcome, has generated a desire – maybe even a need – for us to work collaboratively across nations, across specialities, across cultures, to help address issues of global importance. What is important and challenging in one country can quickly become important and challenging in many others.

Much of the data already available and being produced from across the world is being challenged in terms of accuracy (of numbers affected, of numbers tested and testing positive, of deaths, of particularly vulnerable groups of people). Challenging the data is not a bad thing per se: it encourages countries to ensure accuracy that they can defend. Of course, there are different methods of counting and accounting; parameters for data sets are different in different countries and even in different states in the same country. There has been enough criticism of nations to share around, with a few laudable exceptions. But it is only with collaboration and respect for each other that a lasting response to this pandemic is feasible.

As Richard Horton, editor of *The Lancet*, wrote in his recent article in the UK Guardian Online: *"At moments of geopolitical stress, it is surely better to intensify, not weaken, personal and institutional relationships. It is surely better to build better understanding between peoples. ... A pandemic is a moment for solidarity between peoples, not conflict between governments(1)"*. In his recent book *'The COVID-19 catastrophe: what's gone wrong and how to stop it happening again(2)'* he reiterates the idea that *"a pandemic is a moment for conciliation, respect and honesty between friends"*. He suggests that *"in order to enhance vigilance for new infectious threats, countries will come to view health not merely as a domestic concern but as a foreign policy issue foundational to national security. They will collaborate to ensure that all nations make progress towards the goal of universal health coverage, since individual health security is indispensable for global health security. Countries will cooperate to share data and defeat disinformation. And they will find ways, slowly, to strengthen their accountability to meet the stringent requirements of the IHR"* (WHO's International Health Regulations).

We can do more than hope that this will happen. We can, each of us, as individual family doctors working with and for our patients, actively contribute to the collection, collation and analysis of data which will inform our future preparedness and response to emerging risks. Our often-stated goal is to

achieve universal health coverage, based on access to quality, comprehensive primary care, delivered by qualified and trained health professionals. Improving primary care systems and services, coupled with clinically-driven referral mechanisms to secondary care, will provide better and more informed ammunition against the real enemy of the next unexpected, insidious, virus which threatens and will help us deal with the ongoing threat through which we are currently living.

Donald Li

References

1. The threat of coronavirus should kindle global cooperation not a new cold war, The Guardian online 23.08.20
2. The COVID-19 catastrophe: what's gone wrong and how to stop it happening again, Richard Horton, Policy Press, 2020 ISBN-13:978-1-5095-4645-9/ 4646-6 (pb)

From the CEO's desk: September 2020



Photo: memories of 'normality' in WONCA - the World conference in Rio 2016 with past Presidents Chris van Weel and Göran Sjönell in front of the crowd.

Greetings again. COVID-19 still rages in many parts of the world, and family doctors continue to work on the front line of this dreadful pandemic. You are all very much in our thoughts and prayers at this difficult time.

WONCA World in Abu Dhabi (and Sydney)

The main news this month concerns confirmation of the postponement of our World Council and conference in Abu Dhabi. I wrote last month that considerable time and effort had gone into looking at a variety of options, forced on us by the COVID-19 pandemic. Many of our preferred options were either not allowed under current WONCA Bylaws or else

ran the risk of not achieving a quorum in council, thereby rendering any decisions made invalid.

We had narrowed options down to two main ones, which were then put to Executive and circulated to our Member Organizations (MOs) for consultation. We were really pleased to receive many responses from MOs, and gratified that so many of them expressed their appreciation at being fully informed and consulted. The net outcome was that the vast majority of MOs felt that postponement was the best option, and this was endorsed by Executive at its latest teleconference. A letter has gone out to all MOs informing them of this decision and a copy can be found on the [WONCA website](#).

The postponement is for 12 clear months, with

new dates, at the time of writing, for Council being 21st to 23rd November 2021 and conference from 25th to 28th November 2021. Venue remains unchanged at Abu Dhabi National Exhibition Centre (ADNEC).

Directly linked to this, we have also agreed with the HOC for Sydney 2022 that it will also be postponed by up to 12 months, so instead of October 2022 the events will now take place in the last quarter of 2023, with dates to be confirmed.

The current WONCA Executive will (subject to regional ratifications) continue in office until November 2021. A new Executive will be voted into office at that time and serve until October/November 2023. Finally, the conference provisionally scheduled for 2024 will now move to 2025.

These have been very difficult decisions to have to make in these extraordinary times, but we are especially grateful to MOs for providing us with their views and for their support, and for the great cooperation and flexibility of the HOCs for both Abu Dhabi and Sydney - Emirates Medical Association and Royal Australian College of GPs.

[Some FAQs from HOC for Abu Dhabi](#)

WONCA Events

WONCA conferences are such a great experience, with the opportunity to meet with colleagues from around the globe. 2020 really has been a wipe-out where WONCA conferences have been concerned, though we take some small consolation that – at the time of writing in any case – WONCA Europe will go ahead in Berlin from 17th to 19th December 2020. [More information here.](#)

Sadly WONCA APR, in Auckland (New Zealand) in November, is likely to remain out of bounds for most due to New Zealand's very strict quarantine rules. At best, some

colleagues from Australia might also be able to attend.

We do, however, look forward to more WONCA events in 2021:

- WONCA Asia Pacific Region in Yangon, Myanmar, from 9th to 12th April 2021
- WONCA Europe in Amsterdam, from 7th to 10th July 2021
- World Rural Health Conference in Kampala, Uganda, from 5th to 7th August 2021

And in 2022 we can look forward to

- WONCA Europe in London from 1st to 4th June 2022
- WONCA Rural Health Conference in Ireland, dates to be confirmed.

WONCA Webinars

As a way of keeping in contact with our members, and as a partial substitute for our conferences, WONCA ran a series of webinars through April and May this year, which were very well received. We have been taking a short break, but we hope to come back with a second series of webinars in the last quarter of the year. We will be meeting with the leaders of our Working Parties and Special Interest Groups towards the end of July and hope to draw up a programme of new webinars which we will promote to you as soon as we can.

[See WONCA webinars here.](#)

That's it for this month, but stay safe and well, everyone.

Dr Garth Manning
CEO



26th WONCA Europe Conference
Amsterdam 7-10 July, 2021

World family doctors Caring for people
EUROPE

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From the Editor: 10 years and 100 issues



This edition of WONCA News is the 100th edition that I have produced as WONCA editor.

To celebrate I share some of my favourite stories, favourite people, favourite photos. This I do, in anticipation of handing over the WONCA editorship at the end of 2020.

In May, it was also my 10 year anniversary as the editor having taken over from Dr Mark Rivo, at the 2010 World Council meeting held at the time of the world conference in Cancun, Mexico. I am now the second longest serving WONCA editor, after Dr David Game, our first editor, fellow Australian (and also

a past president of WONCA), who I had the privilege to [interview back in 2012](#).

For those with the time and interest there is a newsletter archive dating back to 2003 covering all of my issues and most of those produced by Mark Rivo. (The news used to be published as a paper document so not everything is available online!)

➤ [Newsletter archive](#)

For those with less time and more interest in photos, I suggest you head to my favourite top 20 photos of individuals and top 20 photos of groups.

➤ [20 favourite photos of individuals](#)

➤ [20 favourite photos of groups](#)

CEOs

I have worked for two WONCA CEOs - the first was Alfred Loh (CEO: 2001-2012) ably supported by manager Yvonne Chung. Rich Roberts "[Sweet Sorrow](#)" article was his farewell to the Singapore secretariat.

The second and still current CEO I have worked for is Garth Manning (2012-2020). The photo shows Garth and Nongluck Suwisith, WONCA Manager, setting up the new Bangkok office.



Presidents

I have served through the terms of four presidents (and read all of their columns) Rich Roberts, Michael Kidd, Amanda Howe, and Donald Li. All have had their own style, all have been and still are passionate about WONCA.

Rich Roberts (president from 2010-2013) was a great storyteller and visited many ordinary family doctors in their practices during his term as president. One story that I still remember is "[View from Mountain](#)" written for WONCA news in December 2010, about Doctor Abdujabor Kurbonov a rural doctor in the mountains of Tajikistan, and the rather unusual practice which Rich observed during his visit.

Michael Kidd, kept a blog of many of his speeches given while president of WONCA (2013-2016). Some were at WONCA world conferences and other at WONCA member organisation events.



See if he spoke at your conference [here](#).

Amanda Howe, of course goes down in history as the first female WONCA president, and also the 1st president to serve a term of two years, with the change of WONCA conferences from triennial to biennial (2016-2018). *Photo shows Amanda having just handed over the chain of office to Donald Li in Seoul 2018.*



Donald Li (2018-current) will next month have his term of office extended by approximately one year, owing to the difficulty to hold a world Council meeting during the coronavirus pandemic this year. What Donald has brought to the president's column is Chinese translation, which is only one way that he has extended WONCA's reach to many colleagues in China.

Translations

WONCA's reach extends with the translation of articles into people's native languages and over the last 10 years we have increased translation. During the presidency of Rich Roberts, the president's column was translated into Spanish thanks to the assistance of our Spanish member organisation, semFYC. French was added during the time of Michael Kidd, and as noted Donald Li has added Chinese translation. There have been WONCA working party resources translated into Arabic and Portuguese in particular.

- [Español](#)
- [Français](#)
- [中文](#)

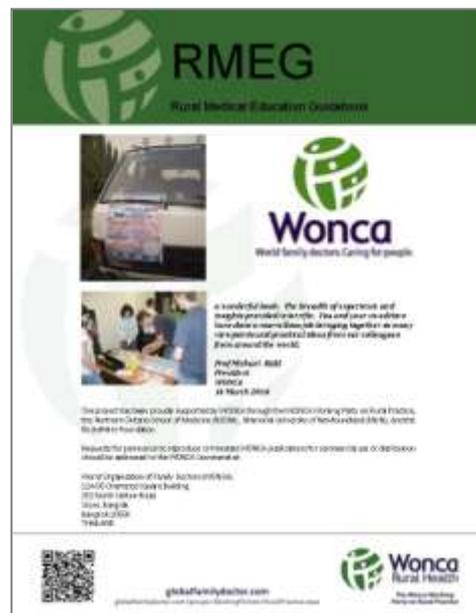
WONCA expansion

WONCA's network of Working Parties (WPs) and Special Interest Groups (SIGs) has expanded at every world conference. We now have 11 active WPs and 16 SIGs.

- [See and join all WPs and SIGs here](#)

Our groups increase the engagement of family doctors around the world in WONCA through their clinical interest areas. These WPs and SIGs have in turn, had a huge expansion in activities. Certainly the ones that were established 10 years ago such as the Working Parties on Rural Practice, Environment, Education and the WP on Research have gone from strength to strength, with mailing list for members, Google groups and more resulting in a huge expansion in their membership due to the dedication of their hard-working chairs and executive members. The WP on Rural Practice now holds their own WONCA Rural conference each year.

Some of the groups have produced significant publications with my two favourites probably being [- Family Doctors in the Field 2014](#) (WP on the Environment) to which I contributed a chapter. [- Rural Medical Education Guidebook](#) - an enormous undertaking and highly utilised resource



How can I forget to mention the [Young Doctors' Movement?](#) Now they have a Young Doctors' Movement group in each WONCA region (there were only two regions with a group in 2010) and a representative on the WONCA Executive. The first group formed in 2005, was the Vasco da Gama

Movement (VdGM) in Europe. in acknowledgement of this I include one of my favourite photos sent by the VdGM - 2013 a promotion for their Hippocrates Exchange.



WONCA has also strengthened its liaison with WHO ... The 2013 WONCA executive appointed a WONCA WHO liaison person, in Luisa Pettigrew, who in turn, handed over to Viviana Martinez-Bianchi in 2016. Much work is also done on a regional level through WONCA region presidents and their executive committees.

Photo shows Donald Li in 2011, who always seemed to have the ear of Margaret Chan when he was WONCA APR president and President Elect.



A WONCA-WHO liaison page on the WONCA website was established back in 2012 which can be accessed at this [link](#).

World Family Doctor day (FDD)

World Family Doctor Day (FDD) – 19th May - was first declared by WONCA in 2010 and was first celebrated in 2011 and it has become a day to highlight the role and contribution of family doctors in health care systems around the world. The event is a wonderful opportunity to acknowledge the central role of our specialty in the delivery of personal, comprehensive and continuing health care for all of our patients. It's also a chance to celebrate the progress being made in family medicine and the special contributions of family doctors globally. The current logo pictured at right, was developed in 2015



Each year we are overwhelmed with reports of activities from all over the world and all past reports can be seen on this page. A favourite year of mine was [the 2015 report](#) with Michael Kidd delivering a video greeting and our featured country being Nepal.

➤ [See all World Family Doctor day reports here](#)

Newsletter archive

If you are interested in history the [newsletter archive](#) can be accessed to see all newsletters in electronic format.

My first edition in August 2010 had news highlights:

- Richard Roberts takes over from Chris Van Weel as WONCA president, Michael Kidd elected president elect (pictured together).



- official recognition and ratification of the 7th WONCA region-the East Mediterranean region with inaugural president Prof Nabil Al Kurashi
- a unanimous vote of the World Council past bylaws to enhance gender equity in WONCA
- the Waynakay movement for young doctors in the IberoAmericana region was born with the name meaning “youth” in the Quechua language

My favourite photo taken in my first conference as WONCA editor (2010) is of Dr Sylvester Osinowo (Nigeria), who was then the president of WONCA Africa. Why? He just looks great against the red background!



I am still friends with colleagues who I met at the WONCA World conference in Ireland in 1998. As a great example of the fun and laughter to be had at WONCA conferences I've chosen this group photo of Val Wass (WP Education chair), Garth Manning (our CEO) and Allyn Walsh (Former WP Education chair) at the WONCA Europe conference in Istanbul in 2015.



See my 20 favourites of individuals and groups at the links below.

[My favourite 20 photos of individuals](#)
[My favourite 20 photos of groups](#)

Featured doctors

A small number of photos and a few words cannot begin to quantify the honour and privilege I have had meeting so many wonderful colleagues around the world both in person and virtually.

A small sample of these colleagues have been WONCA featured doctors. I have ‘interviewed’ and [featured well-known WONCA leaders](#) and [WONCA office bearers](#). I have also ‘interviewed’ hard-working family doctors, some of whom I have not met but who crossed my virtual path - their stories all fascinated me and represent the wonderful diversity of our colleagues in family medicine. I could not select any one or even 20 individuals to single out so I recommend you choose your own to read.

➤ [Featured Doctors](#)

The privilege of WONCA is in the people you meet. We are indeed lucky that means of electronic communication and meetings have advanced to the point where we can maintain contact with colleagues despite not being able to hold WONCA conferences at this point in time. Thank you to all my dear colleagues for the friendship and joy that you have provided me, in the form of your stories presented in the past 100 issues of WONCA News.

... And as for conferences, you'll have to wait until my next reflection for these.

Karen Flegg
WONCA editor

Editor's pick: Photos of Individuals

Editor's pick photos are part of my reflection on a decade as WONCA Editor. Most photos are my own, taken at various conferences between 2010 and 2019. They are favourites for various reasons - some I think are great photos, some are of WONCA leaders captured off guard, and some are from family doctors I've interviewed in the last decade. All tell a story of the WONCA family. The limit for this page is only 20 pictures - the selection was very difficult as I have met and photographed thousands of wonderful colleagues over the past decade. I wish I could include you all!

Karen Flegg



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Editor's pick : Photos of groups

Editor's pick photos are part of my reflection on a decade as WONCA Editor. Most photos are my own, taken at various conferences between 2010 and 2019. They are favourites for various reasons - some I think are great photos, some are of WONCA leaders captured off guard, and some are from family doctors I've interviewed in the last decade. All tell a story of the WONCA family. The limit for this page is only 20 pictures - the selection was very difficult as I have met and photographed thousands of wonderful colleagues over the past decade. I wish I could include you all!



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Feature Stories

Guest Feature by John Wynn-Jones: Courage



Dr John Wynn-Jones is well known in WONCA circles and immediate past chair of the WONCA Working Party on Rural Practice. During the COVID-19 crisis he has been writing a daily 'Rural Miscellany' email with poems and resource ideas to help and divert us in this difficult time. After the popularity of his last three guest columns, this month we feature "courage".

*"Courage is the commitment to begin without any guarantee of success".
Johann Wolfgang von Goethe*

"It takes courage to grow up and become who you really are." E.E. Cummings

"I wanted you to see what real courage is, instead of getting the idea that courage is a man with a gun in his hand. It's when you know you're licked

before you begin, but you begin anyway and see it through no matter what." (Atticus Finch) Harper Lee (To Kill a Mockingbird)

"Courage is the most important of all the virtues because without courage, you can't practice any other virtue consistently." Maya Angelou

"The most courageous act is still to think for yourself. Aloud." Coco Chanel

I felt that its time that we should explore concept of courage through poetry. During this dreadful pandemic there have been many acts of courage and fortitude shown by health care workers. Despite the personal risks, many of you have continued to practice, often without adequate PPE, knowing that you and sometimes your loved ones are at risk. This is even more relevant for those from at risk racial groups and older professionals. Let's dedicate these poems to you in particular.

Photos: Colleagues of courage



Zakiur Rahman (left), well known South Asia region leader pleased to be serving the community again in the Brahmanbaria COVID-19 hospital in Bangladesh after COVID infection

Francisco Javier Molina (right), a family doctor from Mexico, who on August 11th returned to work after COVID infection.



William Ernest Henley (1849-1903)

William Ernest Henley was an English poet and editor who was born in 1849. He was one of six children, and his father was a struggling bookseller. Henley studied at Crypt Grammar School from 1861-1867 under the direction of poet T.E. Brown, who was the headmaster.

At the age of twelve, Henley was diagnosed with tubercular arthritis. This illness caused him to miss a lot of school, but it was also speculated that the family's financial situation was a factor in his days off from school. In 1867, when Henley's father passed away, he left Crypt Grammar School to help his mother maintain the household.

Henley's beginning as a poet came from a 20-month hospital stay. In 1868 one of his feet needed to be amputated and the other needed surgery because of the disease that was eating away at his bones. It was during this time that he began writing poetry about life in a hospital. The collection, "In Hospital", was later published.

Henley wrote a lot about inner strength and perseverance. "Invictus" is his most popular and well-known poem (1875). It was recited by Nelson Mandela while he was in Robben Island Prison. It was also referenced in the 2009 movie *Invictus*. President Obama quoted it on December 10, 2013 after Nelson Mandela died.

Henley was friends with Robert Louis Stevenson, who wrote *Treasure Island*. The character of Long John Silver is actually based in part on Henley. William Ernest Henley passed away from tuberculosis on July 11, 1903 in Woking, England.

Invictus

*Out of the night that covers me,
Black as the pit from pole to pole,
I thank whatever gods may be
For my unconquerable soul.*

*In the fell clutch of circumstance
I have not winced nor cried aloud.
Under the bludgeonings of chance
My head is bloody, but unbowed.*

*Beyond this place of wrath and tears
Looms but the Horror of the shade,
And yet the menace of the years
Finds and shall find me unafraid.*

*It matters not how strait the gate,
How charged with punishments the scroll,
I am the master of my fate,
I am the captain of my soul.*



[Listen to Tom Hiddleston read Invictus](#)

Edgar Guest (1881-1959)

Edgar Guest was a prolific American poet – publishing a poem every day in the *Detroit Free Press* for 30 years. Known as the People's Poet, Edgar Guest wrote easy-to-read poems about many relatable topics. He wrote encouraging life messages about topics such as family and work. This particular poem encourages readers not to give up when they are faced with challenges. Even when things are not going well, keep pushing on. You never know how close you are to success and making it to the other side.

Keep Going

*When things go wrong, as they sometimes will,
When the road you're trudging seems all up hill,
When the funds are low and the debts are high,
And you want to smile, but you have to sigh,
When care is pressing you down a bit,
Rest if you must—but don't you quit.*

*Life is queer with its twists and turns,
As every one of us sometimes learns,
And many a failure turns about
When he might have won had he stuck it out;
Don't give up, though the pace seems slow—
You may succeed with another blow.*

*Often the goal is nearer than
It seems to a faint and faltering man,
Often the struggler has given up*

*When he might have captured the victor's cup,
And he learned too late, when the night
slipped down,
How close he was to the golden crown.*

*Success is failure turned inside out—
The silver tint of the clouds of doubt,
And you never can tell how close you are,
It may be near when it seems afar;
So stick to the fight when you're hardest hit—
It's when things seem worst that you mustn't
quit.*

[Keep Going by Edgar A Guest](#)

Heather Griffith

I can't find anything about Heather Griffith but I had to include the poem because it struck a powerful chord with me. As a GP (Family Doctor), I have met so many heroes. They were the heroes that she so eloquently describes in her poem "A Different Kind of Hero". We applaud and champion those who have achieved great feats of physical and mental strengths in their lives but some of the bravest people that I met were those who faced their deaths from terminal illnesses but handled their mortality with fortitude and amazing strength. It was so often their courage that uplifted us, their families and carers rather than the other way around.

A Different Kind of Hero

*For my mother, Marianne Griffith
A hero to me is not just a person who died for
their country
or went inside a burning building or stuff like
that.
A hero to me is a single mother who survives
every day by herself,
A teenager against all odds getting through
life,
An alcoholic walking into a rehab center,
A father being not just a father
but a friend, caregiver, supporter, a brick wall
for his kids.
A friend, who no matter what or how wrong
you are,
stands up for you and takes your side.
A hero, who no matter how hard they are
being hit or pushed or beat down,
no matter how bad they are emotionally or
physically or psychologically,
they stand up and keep going.
They push through the pain of life, love, kids,
work, school, drugs,
sports, parents, heartbreak, alcohol; that to
me is a hero.*

*A person who isn't just there, but is there
living, breathing, and surviving.*

Johann Wolfgang von Goethe (1749-1832)

Johann Wolfgang von Goethe was a German writer, pictorial artist, biologist, theoretical physicist, and polymath. He is considered the supreme genius of modern German literature. His works span the fields of poetry, drama, prose, philosophy, and science. His Faust has been called one of the greatest dramatic works of modern European literature. His other well-known literary works include his numerous poems, the Bildungsroman Wilhelm Meister's Apprenticeship, and the epistolary novel The Sorrows of Young Werther. This is however a very short poem about personal courage.

Courage

*Carelessly over the plain away,
Where by the boldest man no path
Cut before thee thou canst discern,
Make for thyself a path!
Silence, loved one, my heart!
Cracking, let it not break!
Breaking, break not with thee!*

Anne Sexton (1928 –1974)

Anne Sexton was an American poet known for her highly personal, confessional verse. She won the Pulitzer Prize for poetry in 1967 for her book Live or Die. Her poetry details her long battle with depression, suicidal tendencies, and intimate details from her private life, including relationships with her husband and children, whom it was later alleged she physically and sexually assaulted. This poem is about courage throughout our lives. Sometimes courage is what is needed for the simple things in life when on other occasions it is when we face great danger and the unknown.

Courage

*It is in the small things we see it.
The child's first step,
as awesome as an earthquake.
The first time you rode a bike,
wallowing up the sidewalk.
The first spanking when your heart
went on a journey all alone.
When they called you crybaby
or poor or fatty or crazy
and made you into an alien,
you drank their acid
and concealed it.*

Later,
if you faced the death of bombs and bullets
you did not do it with a banner,
you did it with only a hat to
cover your heart.
You did not fondle the weakness inside you
though it was there.
Your courage was a small coal
that you kept swallowing.
If your buddy saved you
and died himself in so doing,
then his courage was not courage,
it was love; love as simple as shaving soap.

Later,
if you have endured a great despair,
then you did it alone,
getting a transfusion from the fire,
picking the scabs off your heart,
then wringing it out like a sock.
Next, my kinsman, you powdered your sorrow,
you gave it a back rub
and then you covered it with a blanket
and after it had slept a while
it woke to the wings of the roses
and was transformed.

Later,
when you face old age and its natural
conclusion
your courage will still be shown in the little
ways,
each spring will be a sword you'll sharpen,
those you love will live in a fever of love,
and you'll bargain with the calendar
and at the last moment
when death opens the back door
you'll put on your carpet slippers
and stride out.

[Listen to the poem](#)

Leonard Cohen (1934-2016)

Finally, I include a short poem from one of my heroes, the great Leonard Cohen. Leonard Norman Cohen was a Canadian singer, songwriter, poet, novelist, mystic and much, much more. His work explored religion, politics, isolation, depression, sexuality, loss, death and romantic relationships. And he was a real gentleman!

*I pray for courage
I pray for courage
Now I'm old
To greet the sickness
And the cold*

*I pray for courage
In the night
To bear the burden
Make it light*

*I pray for courage
In the time
When suffering comes and
Starts to climb*

*I pray for courage
At the end
To see death coming
As a friend*

No videos of him but here is another ["Hope and Courage"](#)

WONCA-WHO Liaison

Annual report

The following is a short version of this report to be published in the 2020 WONCA Annual report. WHO liaison person, Viviana Martinez-Bianchi writes:

WONCA Statement of support for the World Health Organization

In June 2020, WONCA released the following statement (endorsed by WONCA Executive) outlining its



support for WHO in the current coronavirus pandemic:

The COVID-19 Pandemic constitutes a serious public health crisis, affecting all countries in the world. WONCA recognizes the World Health Organization's critical and leading role during the pandemic, working across six regions, delivering essential equipment, providing technical

guidance and education, and mobilizing resources while emphasizing health for all.

WONCA will continue to partner with WHO in its efforts to improve health through providing comprehensive care for people of all ages and encouraging Universal Health Coverage through strong Primary Health Care; and will continue to collaborate in technical papers, educational resources, and policy support.

COVID-19: Health Services Learning Hub

WHO has invited WONCA to be a member of the COVID-19: Health Services Learning Hub. The goal of the hub is to drive activated learning to maintain essential health services in the context of the COVID-19 pandemic - and transform health services for the future. WONCA will coordinate with member organizations how best to participate in this endeavour, and who the Member Organisation focal points will be to collaborate.

WHO World Health Assembly

WONCA participated in WHA73 on 22 May 2020 virtually, using video conference technology. The meetings had an emphasis on the COVID 19 Pandemic, a reduced agenda to fit into two days.

The following are the recommendations from WONCA's written statement to the WHA. WONCA recommends:

1. Appropriate funding for PHC, and an increase in the numbers of family doctors and other members of the healthcare team trained so that every country is prepared to manage the pandemic.
2. Ensure access to care, drugs & diagnostics availability for COVID-19 and non-COVID-19 conditions.
3. Family doctors and other PHC professionals are central to health emergency risk management, preparedness and communication locally & nationally. To ensure their protection, PPE must be provided to all.
4. Rural migrants, inner city dwellers, people living in multigenerational family units, refugees and other vulnerable populations are often the worst affected; adequate consideration should be given to their socioeconomic and health needs.
5. More widespread testing to better understand the true prevalence of disease in the community
6. Breaking silos and providing innovation in data and technology with data integration,

allowing much improved health information exchange between hospitals, PHC, labs, practices, and health departments.

7. PHC needs to be included in Humanitarian Aid and Global Health planning and budgeting. Without PHC the outcomes of this and future pandemics and disasters will be worse.

Success will come from investing in the frontline with well-resourced PHC teams working at the community level

WHO teleconferences

Several working teleconferences held.

Participants have included for WHO: Ed Kelley, Shannon Barkley, John Fogarty, WHO Division of UHC and Life Course
For WONCA: Donald Li, Anna Stavdal, Shabir Moosa, Monica Burns, Viviana Martinez-Bianchi, Garth Manning.

Much of the discussion revolved around COVID and how WONCA can help with dissemination of information, and members providing access to care. Action points included:

- identify mechanisms for dissemination of WHO guidance through WONCA networks
- identify opportunities for WONCA's support on evidence review or guideline review
- opportunities for WONCA to participate in forthcoming learning platforms for maintaining essential health services
- identify WONCA activities where WHO can support, e.g. webinars
- identify a list of WHO resource people who could join the WONCA webinars panel (this is ongoing, with WHO representation in our WONCA Webinars)

WHO material on COVID 19.

[> Great informational material](#)

WONCA received an invitation for a WHO ad-hoc consultation on managing the COVID-19 infodemic. The aim of this technical consultation was to develop an infodemic response framework to guide targeted interventions to promote dissemination of reliable information about COVID-19, and reduce misinformation, rumours and myths about COVID-19. I attended on behalf of WONCA. The presentations are included in this [link](#)

[> See full report](#)

World Patient Safety Day (WPSD) 17 September 2020



Dear colleagues,

Greetings. We are a month away from World Patient Safety Day (WPSD) 2020 which will be observed across the world on 17 September. The COVID-19 pandemic has unveiled the serious difficulties health workers are facing worldwide while responding to this unprecedented global public health challenge. WHO will be launching a global campaign for World Patient Safety Day 2020 to emphasize the importance of health worker safety as a priority for patient safety. We urge all partners and countries to develop national and local campaigns based on this global campaign, to support and observe the Day around the world to make it successful, and to commit and taking urgent and sustainable action to recognize health worker safety as a prerequisite for patient safety.

This WPSD will not only be an advocacy campaign but will also be a true platform for positive change. To this effect, a draft Health Worker Safety Charter and a set of WPSD 2020 goals are planned to be launched on the Day to call for urgent action by all stakeholders. Our goal is that over the coming year, we will have WHO Member States, NGOs, professional societies and many others “supporting” the charter as a focus for their actions on World Patient Safety Day and subsequently.

We have a number of activities lined up for marking the Day and are very excited to share with you our plans. On 17 September 2020, the following events are planned at the WHO-HQ in Geneva:

- 9:30-10:30 CEST: WPSD 2020 Press Conference to launch the draft Health Worker Safety Charter and a set of World Patient Safety Day 2020 goals
- 10:30-11:30 CEST: Live Social Media Events on several platforms
- 14:00-16:30 CEST: WPSD 2020 Global Virtual Event “One world: Global solidarity for health worker safety and patient safety”
- COVID-19 Press conference including a brief on WPSD 2020
- Evening: Lighting of Jet d’Eau in orange colour

We take great pride in our GPSN family and are certain that success would not be possible without your commitment and true ownership towards this cause. We therefore would really appreciate your input on the attached Charter that will be launched on the Day. We invite you to informally obtain feedback from your networks as well.

How can you contribute?

- If you wish to be part of our Global Virtual Event and/or YouTube Channel, please share your initiatives or testimonies in a video as per the enclosed briefing note by 30 August.
- Disseminate the key message of the campaign on social media and other channels
- Help us spread the word by re-tweeting bit.ly/3gaaurv
- Share with us your plans for the day. bit.ly/3kUY7Dy

Finally, we are pleased to announce that a number of communication products are now available on [WHO/WPSD 2020 website](https://www.who.int/wpsd2020) and additional products also in different languages will be uploaded regularly in the coming days from this week onwards.

With best wishes for a successful World Patient Safety Day 2020!

Thanks and best regards,

Dr Neelam DHINGRA
Unit Head, Patient Safety Flagship/
World Health Organization
Email: dhingran@who.int
Web: <http://www.who.int/patientsafety>

Featured Doctors

Dr Ferdinando PETRAZZUOLI

Italy – Family doctor, EURIPA Scientific Board

Ferdinando is the Chair of the [European Rural and Isolated Practitioners Association \(EURIPA\)](#) Scientific Board and has attended every WONCA Europe conference since 2001!



What work do you do now?

I am a middle-aged Italian family doctor who lives and works in a rural village in Southern Italy. My rural home village is called Ruviano and is located in the province of Caserta, Campania region. It has less than 2000 inhabitants and is about a one-hour drive from Naples. I work in a solo doctor practice and my surgery is in a wing of my own house.

Living and working in the same building has its advantages and disadvantages. You save time and money but are on call all the time. My patient list consists of nearly 1500 patients. Over 35% of my patients are over the age of 65. (Children under six years are cared for by the local health district paediatrician.) Many patients are farmers.

Other interesting things you have done?

I started attending the WONCA Europe Conferences in 2001 in Tampere Finland, and since then I have never missed one.

In 2002, I started attending the [European General Practice Research Network \(EGPRN\)](#) Conferences in Avignon, France, and in 2008, I became the Italian national representative of this organisation. I spent three terms (nine years) on the EGPRN executive board where I ended my service as vice-chair.

I joined the European Rural and Isolated Practitioners Association (EURIPA), in 2006, introduced by the beloved and never forgotten Claudio Carosino, and I have been involved in many initiatives over the past 15 years, sometimes joint EGPRN / EURIPA activities.

I have always been interested in research. In

previous work at University I had carried out quite a lot of research in cardiology so, when I left University there was something missing. Stimulated by my international colleagues in WONCA Europe (and its networks), I managed to get a Master of Science (MSc) in Primary Care & General Practice at the University of Ulster (United Kingdom) in June 2008.

In June 2019, aged nearly 61, I defended my PhD thesis at the Center for Primary Health Care Research, Department of Clinical Sciences in Malmö, Lund University, Sweden. The title of my thesis: Dementia Management in European Primary Care.

In EGPRN I am still active. I have developed and implemented a web-based course in research in family medicine. This project is led also by Profs Mehmet Ungan and Shlomo Vinker and is composed of 25 web-based modules and a final workshop.

I am a member of the WONCA Europe Communications Advisory Board (WECAB) and also member of the WICC, the WONCA (World) international Classification Committee.

In 2018, I joined the WONCA Working Party on Mental Health, and I lead of the Dementia Group. I am also the first author of the chapter on dementia of the WONCA Book, "[Global Primary Mental Health Care: Practical Guidance for Family Doctors](#)" published in December 2019.

What is your role on EURIPA and can you tell us a little about EURIPA?

EURIPA is a representative network organisation of WONCA Europe and was founded by rural family doctors to address the health and wellbeing needs of rural communities and the professional needs of those serving them across Europe. Recruiting and retaining young general practitioners in rural areas is one of the main visions of EURIPA. Recently, I have been nominated chair of the EURIPA Scientific Board.

What are your interests inside and outside

work?

I have managed to publish several articles on rural medicine in rural primary care journals, and I think that rural communities are extraordinary opportunities to conduct more holistic, integrative, and relevant research using new methods and data sources.

I love the countryside all over the world and I personally think that protecting our beautiful genuine rural villages, our mountains, our little

islands from being abandoned by their populations requires the provision of a good quality primary care. The massive emigration of population from our calm rural areas to troubled suburban living with high social disenfranchisement is one of the worst possible future scenarios, which is already happening, creating big social problems. Having good health care in rural areas is not only a health issue but also a public policy issue.

Dr Andrée ROCHFORT Ireland - Family doctor

What work do you do now?

I am a GP in rural practice in Ireland and an academic GP as Director of Quality Improvement with the Irish College of General Practitioners (ICGP) in Dublin.



On the clinical side of work, I practice as a general practitioner in County Wexford, a beautiful rural county in the south east of Ireland with glorious beaches and scenic hill walks. The practice is a busy group practice with a dynamic and varied team. In the practice kitchen we have a lot of laughter and chat together at lunch breaks and during tea breaks when there is an opportunity to cross paths during intensive long days seeing new patients every ten minutes. These are important minutes in a work day which help to sustain a GP team. We miss these interactions since we implemented social distancing in the tea room and our meetings now take place online from our individual consultation rooms! Being an academic GP practice we have an active in-house peer group CPD programme for the GPs and nurses and the practice trains GP Trainees and hosts medical students also.

Tell us more about your ICGP work?

My ICGP work is a programme of medical education and guidance on quality improvement and safety in healthcare delivery

in general practice, focussing in particular on Human Factors for quality and safety of care. The role evolved from and incorporates my initial position of Director of the ICGP Doctors Health in Practice programme, a system of supports, services and medical education for GPs own personal and professional health, and wellbeing at work by promoting good physical, psychological and occupational health.

The basis for quality rests on structures, processes and outcomes, and healthcare delivery is deeply dependent on the quality of human interactions, and influenced by the processes of decision-making of both the professional and the patient. The complexity of options and choices in healthcare has increased dramatically in recent decades and the next decade will bring about even more complexities with telemedicine and digital health developing rapidly.

Ireland has a population of just under five million and has 3,500 GPs so we are a small but very dynamic college. The ICGP has a very strong role in supporting family doctors through the pandemic, and has moved rapidly to deliver medical education and continuous professional development online during restrictions so that general practice can stay connected and up to date with best practices in infection control and delivery of services to patients.

The “bigger picture thinking” role of an academic GP with external liaison and representation gives me some work life balance. In ICGP, I am a member of a number

of committees including Membership Services, Quality Safety & Standards, and I also report to Education Governance Committee. During the pandemic I developed a series of digital “Doctors Health and Wellbeing Bulletins” to support GPs work life balance and creativity at a difficult time. It is important to highlight the value of mental health promotion and healthy lifestyles for health workers as being equally as important as how we promote it for our patients.

My work in the area of professional health has also led me to a very productive experience of working on the scientific committees for a series of European conferences of the [European Association for Physician Health](#) along with colleagues from different medical specialties across a number of European countries who are part of this forum.

What of your involvement in WONCA Europe and EQuIP?

As the national representative from the Irish College to [EQuIP](#), the European Society for Quality & Safety in General Practice, a network organisation of WONCA Europe, I co-chair the EQuIP working group on Professional Health and Patient Safety with Dr Isabelle Dupie.

EQuIP brings together the European colleges of general practice representatives in quality and safety to assist GPs and practice staff on topics of risk management, patient safety and continuous quality improvement. Outputs are disseminated through conference presentations, policy statements and publications and online. In 2018, I was honoured to represent EQuIP on the WONCA Europe Working Group on Taking Action on Overdiagnosis, and under the chairmanship of Prof Johann Sigurdsson we developed a position paper which was approved by WONCA Europe. Family medicine across Europe and the world has demonstrated the critical importance of high quality general medical services to patients at local community level is the key to an effective functioning health system.

Your interests at work and privately?

In clinical practice: paediatrics, adolescent health and care of the elderly are my main clinical interests. Occupational medicine is

also a topic of interest, and following a term on the Board of the Faculty of Occupational Medicine in Dublin, I developed a course curriculum for an e-learning course for GPs in occupational medicine. As family doctors we see that the work patients do has a two-way influential relationship with their overall health and wellbeing; it is the same for doctors.

Clinical risk management, patient safety at transitions in healthcare, reducing harms from over-intervention in medicine, patient self-management support in chronic conditions, planetary health and lifestyle medicine are other interests.

I am active in a charity called the Medical Benevolent Society of Ireland, and a member of its central committee. This organisation provides financial support to doctors and their families who experience hardship through illness, accident or bereavement, on the basis of social worker assessment

One of my proudest achievements has been as a football manager, team coach and mentor. This was a volunteer role with a ladies football team for teenagers from several different schools and backgrounds. This three year term taught me that team members with different skills and strengths and abilities are needed to make up a successful team. We won the county championship title in two of those years and had a lot of fun along the way among the players and the parents, without whose support it could not have happened. I also spent two years on the management team of a county football team and our team won one national All Ireland championship title. It was time intensive but such enjoyable work. I have no idea how I managed to fit it into an already busy life but so glad I did.

Nature and the natural world is important to me, and we have a wild meadow area in our garden which this year supported a large number of larvae for peacock butterflies, and some tadpoles which have successfully developed into frogs. My husband and I love to relax in our garden after work. I enjoy the visual arts and have learned a lot from one of my daughters who has a degree in fine art, while another daughter being a nutritionist keeps us all informed about the importance of good nutrition and sustainable food production. Young people are the future of the planet indeed, and they need all the support they can get from adults and from their GPs.

Conferences and virtual meetings

Virtual 2020 Besroure Family Medicine Forum



Dear Besroure Colleagues,

The Besroure Centre for Global Family Medicine (Centre) at the College of Family Physicians of Canada (CFPC) invites you to participate at the [Virtual 2020 Family Medicine Forum](#) taking place Wednesday, November 4 to Saturday, November 7, 2020.

The Centre remains committed to engaging with the Canadian family medicine community and will be dedicating Besroure-related activities on the Thursday, November 5, 2020.

The two sessions are:

'Role of Family Medicine during the COVID-19 Pandemic'. Join us and hear the panels' perspective on the role of family medicine during COVID-19. Global experiences with public health issues and global through the lens of family medicine. There will be sharing of collective stories centred on the defined CANMEDS-FM roles of the global family doctor.

'Introduction to program evaluation for academic family physicians' Join our session on evaluation of programs where sharing of findings in a scholarly way will be explored. Participants will have the ability to describe the purpose of a logic model and apply these skills in program planning and improvement.

While the one day registration for the two Besroure Sessions is optional, we encourage you to take the opportunity and register for the full four days. The Family Medicine Forum (FMF) includes four energizing days of interactive networking, and educational and inspiring content for you to explore. Canada's largest family medicine continuing professional development conference offers everything you have come to expect and more! For interactive live-streaming daily overview, see schedule [here](#). All times are Eastern Standard Time (EST). You will continue to be inspired by leaders, motivators and change makers in family medicine.

Registration: visit the FMF online registration. Early Bird Discount ends September 12, 2020!

Sponsorship: The Centre is pleased to be offering limited sponsorship for one-day registration to partners from low- to middle- income countries. If you are interested in applying for sponsorship, please [click here](#). Complete no later than Monday, August 24, 2020. Do not hesitate to reach out if you are having problems with the form.

We look forward to welcoming you at this event and encourage you to contact us with any questions you may have.

[The Besroure Centre for Global Family Medicine](#) | Le Centre Besroure pour la médecine familiale mondiale

The College of Family Physicians of Canada | Le Collège des médecins de famille du Canada
2630 Skymark Avenue, Mississauga, ON L4W 5A4
Phone 1-905-629-0900 ext 269

Virtual AfroPHC Workshop

Dear colleagues

Please join us for the Virtual AfroPHC Workshop to be held 4-7pm over three days 9th-11th September 2020. The theme is “Building Teamwork for PHC in Africa”. It is intended to be a truly interactive African experience that is free and open to anyone interested in building PHC in Africa. Please see more details and register for the [AfroPHC Virtual Workshop](#).

The focus will be on addressing three questions

- Who are we? Getting to know the ambulatory primary health care (PHC) team in Africa
- What does the community expect from ambulatory PHC service delivery in Africa?
- Who should be part of the PHC team and how should the PHC team work in ambulatory PHC service delivery in Africa?

The workshop webpages will be open five days before the meeting to allow registered participants to see each other’s short video

answers, including panellists. The sessions will be characterised by robust moderated discussion with panellists, group discussions and then group feedback. This will be punctured by short videos and online team games.

Our aim is to bring together national leaders of the PHC team: nurses, clinical officers, doctors, community healthcare workers, community leaders and all PHC team members to ensure we truly build teamwork in African PHC. Your role in this will be critical! We hope to issue a joint statement to the UN General Assembly later in September.

We would also love to get you, as key figures in African PHC and participants, to respond to these questions in a short 15min video that will be available to all participants. See the attached guidance for the videos.

Pray, keep well and safe
Prof Shabir Moosa

Revised Important dates – WONCA World conference Abu Dhabi, now 2021

Abstract Submissions Open (Workshops/Symposia) July 5, 2020
Online Registration Open (Early Bird) July 5, 2020
Abstract Submissions Open (Oral/Poster) July 5, 2020
Submission Close (Workshops/Symposia) January 10, 2021
Author Notifications (Workshops/Symposia) March 7, 2021
Online Accommodation Open March 18, 2021
World Council November 21-23, 2021
World Conference November 25-28, 2021

➤ [website](#)



Resources

Education for Primary Care feature free access COVID-19 articles



Prof Val Wass, Chair WONCA Working Party on Education writes on the latest open access items in *Education for Primary Care*.

The WONCA Working Party on Education is very aware of our members need for support to look forward to delivering medical education post Covid-19 and to share our learning in these challenging times . We are therefore delighted that Taylor and Francis are offering for a limited time free access to the following *Education for Primary Care* articles which are attracting great interest:

Free access

Provision of e-learning programmes to replace undergraduate medical students' clinical general practice attachments during COVID-19 stand-down. Roshvist R, Eggleton K, Good-Year Smith F.

- <https://doi.org/10.1080/14739879.2020.1772123>

Remote Supervision in Primary Care during the Covid-19 pandemic - the “new normal”? Miller L.

- <https://doi.org/10.1080/14739879.2020.1802353>

Identity in lockdown: supporting primary care professional identity development in the COVID-19 generation Cullum RJ, Shaughnessy A, , Mayat NY ,El Brown M.

- <https://doi.org/10.1080/14739879.2020.1779616>

Open access is available to a new and helpful article on supervising Family Medicine Trainees. Adaptation and initial examination of the psychometric properties of the Short Supervisory Relationship Questionnaire (SSRQ) for use with general practice registrars. Costello S, Benson J, Burns J, Bentley M, Elliott T, Kippen R.

- <https://doi.org/10.1080/14739879.2020.1806114>

Clinical guidelines summarised for primary care—discounted access for WONCA members

Advertisement

WONCA is always keen to support our members in implementing best practice. We have been approached by the medical publishers of Guidelines.co.uk, offering our members discounted access to over 300 clinical guideline summaries online and are happy to publicise this offer to you. Guidelines is used by over 29,000 GPs

To take advantage of this offer, and receive 12 months' access for the price of 10, visit

[Guidelines.co.uk/WONCA](https://www.guidelines.co.uk/WONCA). Your subscription offer includes:

- 12 months access to Guidelines.co.uk for the price of 10
- Access to over 300 approved summaries of primary care clinical guidelines
- Access to the Guidelines App—for use on the go without internet connection

> Subscribe today—visit [Guidelines.co.uk/WONCA](https://www.guidelines.co.uk/WONCA).

WONCA CONFERENCES

WONCA Conferences 2020

December 17-19 2020	WONCA Europe region conference	Berlin, GERMANY	www.familydoctoreurope2020.org
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WONCA Direct Members enjoy *lower* conference registration fees.

To join WONCA go to: <http://www.globalfamilydoctor.com/AboutWONCA/Membership1.aspx>

WONCA Conferences 2021 and 2022

July 7-10 2021	WONCA Europe region conference	Amsterdam, NETHERLANDS	https://woncaeurope2021.org/
August 5-7, 2021	World Rural Health conference	Kampala, UGANDA	Save the dates
November 25-28, 2021	WONCA World conference	Abu Dhabi, UAE	www.wonca2021.com
April 9-12, 2022	WONCA Asia Pacific region conference	Yangon, Myanmar	Save the dates!
June 1-4, 2022	WONCA Europe region conference	London, UK	www.woncaeurope2022.org
2023 dates to be confirmed	WONCA World conference	Sydney, AUSTRALIA	www.racgp.org.au/wonca-2022/home

Member Organization Events

Note: most are virtual

12 Sep **Hong Kong Primary Care Conference 2020**

- 13 Sep Digital Conference

2020

18 Sep **EURIPA Rural Health e-Forum**

- 19 Sep first e-forum

2020

13 Oct **AAFP FMX Virtual**

- 17 Oct Chicago, USA

2020

15 Oct **RACGP GP20**

- 17 Oct Perth, Australia

2020

04 Nov **Virtual Family Medicine Forum / Virtuel**

- 07 Nov **Forum en médecine familiale**

2020 Winnipeg, Canada

04 Nov **RNZCGP Annual conference**

- 07 Nov Auckland, NZ

2020

20 Nov **North American Primary Care Research**

- 24 Nov **Group (NAPCRG) annual conference**

2020 San Francisco USA

17 Dec **European Conference for Family Doctors**

- 19 Dec **and DEGAM Annual Congress**

2020 Berlin, Germany

11 Feb **RCGP annual primary care conference**

- 13 Feb Glasgow, United Kingdom

2021

24 Feb **Rural Medicine Australia**

- 27 Feb Hunter Valley, NSW, Australia

2021

For more information on Member Organization events go to
www.globalfamilydoctor.com/Conferences/MemberOrganizationEvents.aspx
www.globalfamilydoctor.com/Conferences/MemberOrganizationEvents.aspx