



Wonca NEWS

MARCH • 2021





World family doctors. Caring for people.

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Dr Donald Li, WONCA President

FROM THE PRESIDENT

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As the governments of wealthier countries discuss the logistics - and the moral compulsion - to share COVID-19 vaccines with poorer countries and as the vaccine is increasingly delivered around the world, we can begin to look at what the next phase of our lives might be like. They will not go back to what they were before COVID-19 but we might be able to retrieve a semblance of what we consider to be 'normal'.

Over the last year, all of our lives have been challenged, professionally, socially and, for many, personally. And yet, our innate desire to try to maintain a semblance of normality is very strong in each of us. In the context of WONCA, one of the things which has amazed me over the last year is the enthusiasm by our regions, our Working Parties, our Special Interest Groups and our Member Organisations to continue to hold conferences and meetings. Just over recent weeks, we have had WONCA Europe, the Royal Australian College of GPs, the RCGP UK, the WWP on Rural Health and the Philippine Academy of Family Physicians holding successful and well-attended conferences.

Many of these conferences are, to some extent at least, interactive, with side events, voting systems and Q&A sessions. Some of the sessions are streamed live; others pre-recorded. Timing, of course, is a challenge, when participants are living and working in multiple time zones. But the thread is the same: family doctors across the world are keen and enthusiastic about building and sharing knowledge; about meeting and refreshing relationships with their global colleagues and friends, albeit virtually.

Of course, during the last year we have all had to learn new skills, or expand those we had rarely used since our days as medical students; or develop skills in accessing and using technology to provide a better service to our patients. After the worst of this pandemic has passed and we are on a more positive trajectory, these refreshed or new skills will continue to stand us in good stead. Our 'new normal' will include the best of what we have learned.

In general practice and family medicine circles, the skills of managing patients with co-morbidities are very normal, entirely usual. But we forget that this is not the case for many clinical specialists. The issues around co-morbidities, such as diagnosis, treatment protocols, consequences, vulnerabilities, contraindications, poly-pharmacy – all of these are part of our day-to-day toolbox of family medicine. We are trained and skilled in treating our patients as whole people rather than a set of individual clinical signs and symptoms. One of the issues, which hospital treatment of patients with COVID-19 has brought to the fore, is how crucial it is for the whole range of clinical specialists to know and understand, at least to some extent, the implications of multi-morbidity in our patients and to understand the implications of recovery from the most serious impacts of the virus.



For those who have successfully recovered from the worst effects of the virus, a long road to recovery is ahead. Family doctors will be crucial in supporting and contributing to the research needed to help us all understand the long-term implications of recovery. Some of the challenges are already becoming clear: chronic fatigue, lack of concentration, survivor guilt, to name very few. It is after the drama of hospital care, crucial as it is, that family doctors will pick up the pieces of their patients' lives, to help them move towards as good a new 'normal' as can be achieved. With the continued sharing of our knowledge, through our conferences, Working Parties and Special Interest Groups, we are able to ready ourselves for the primary care implications and challenges to come.

(PS Last month I thanked the Cross Straits Medical Association for undertaking the Mandarin translation of my columns. This month I would like to thank Julien Artigny, who is a member of our LGBTQ SIG, for agreeing to do the French translation of my column)

Dr Donald Li,
President

FROM THE HEADQUARTERS



The change of the Secretariat has come amidst challenging times for humanity. Family doctors, members of our WONCA family, have worked tirelessly on the frontline along with other primary healthcare professionals. Not only have they offered care to patients with COVID-19, but they have also continued caring for the rest of the patients and the public; from those with non-communicable diseases to those suffering from the repercussions of the measures related to the pandemic.

For several months we have been working on setting up the new Secretariat office in Brussels. Our team consists of Andrea Zard, Chief Administrative Officer; Maria Dolores Zavala, Communications & Public Relations Officer;

Marie Mahieux, Accounts Manager; and Andrea Marengo, Membership Manager. I am particularly appreciative of their effort, diligence, and enthusiasm in this new beginning. Please also do take note of the new email address for general inquiries: secretariat@wonca.net

We would all like to express our gratitude to Dr Garth Manning and his Bangkok secretariat team, Dr Nongluck Suwisith, Ms Anuta Mustafa, and Ms Ya Min Cho, for their support and guidance in the transition. For more than eight years, Dr Manning worked together with the WONCA leadership to build a sustainable foundation for our organisation; you can read many of his achievements in his [final report](#).

Before we touch on more organisational matters, I would like to take the opportunity to warmly welcome Professor Taghreed Farahat, the Chair of the East Mediterranean Region, to the WONCA Executive Committee. It will be a pleasure for all of us to work together.

Furthermore, we are delighted to announce the theme of World Family Doctor Day 2021: “*Building the Future with Family Doctors*”. We are currently developing communication material, including a media kit that you will be able to tailor and use for your national campaign. We will soon be informing you with more.

For the past months we have been working on several organisational aspects along with the Executive Committee:

1. EXTRAORDINARY GENERAL MEETING OF THE COUNCIL

As you may know by now, the pandemic resulted in postponing the World Council Meeting of Abu Dhabi from 2020 to 2021. We have called for an Extraordinary General Meeting of the Council to adopt the resolution of altering our Bylaws with six specific changes, which will allow us to hold meetings of the Council by electronic means. The Extraordinary General Meeting of the Council will take place from 11 to 16 May 2021: Council members will be able to attend the meeting by logging into a dedicated online platform, consulting the pre-recorded material and voting. Although there will be no live events during these six days, we are planning for two live Q&A Dialogue Sessions (27 March and 10 April), during which representatives of our Member Organizations have been invited to join, discuss and ask questions.

Dr Donald Li and Professor Shabir Moosa explain the rationale of this decision [in these videos](#). We invite you all to watch these videos and carefully read the [key procedural points](#) that we have prepared for you.

Please do not hesitate to contact us with any questions at the email address that we have activated specifically for this meeting: egm2021@wonca.net.

2. MEMBERSHIP PORTAL

We are setting up a new membership portal, which will help us get in touch with individual and organisational members. This will roll out in a stepwise manner throughout the year; Member Organizations have already received an invitation to join the platform from our Secretariat, and soon Direct Members will be able to access it too. We do welcome your comments and ideas.

3. DATA PROTECTION AND PRIVACY POLICY

Moreover, we are working on adapting our processes according to relevant data protection regulations. We are updating our privacy policy, which will soon be available on our website. We will introduce a Data Protection Officer, who will take office in April.

Finally, before closing for this month, I would like to encourage you all to follow our social media channels on [Facebook](#), [Twitter](#), and [LinkedIn](#).

All of us in the Secretariat are looking forward to engaging and working closer with all the members of the WONCA community.

Dr Harris Lygidakis
WONCA CEO

FROM THE EDITOR

NEW MONTH, NEW ISSUE!

Welcome to the 2nd edition of volume 47 of WONCA News! Firstly, I wish to begin by saying I am highly appreciative for all feedback received regarding the February issue. I look forward to continuing to share the voice of WONCA, the way that everyone in this big family deserves.

Since the beginning of activities at the new WONCA Secretariat, we have had a very active couple of months, getting to know everyone who makes it possible for our organisation to continue its mission. I have been able to meet (digitally) with representatives of all the WONCA regions, our Member Organizations, our Working Parties and our Special Interest Groups to collaborate with all of them and reflect on their efforts in every edition.

During this month I also had the opportunity to work with several of our colleagues on the occasion of International Women's Day 2021, an important date for our organisation, as women represent 70% of workers in the health and social sectors [1].

Through articles, messages and videos, some members of the WONCA family highlighted the work of our female colleagues worldwide and the major role of family doctors in balancing gender inequalities.

ABOUT THIS ISSUE

In this edition I would like to highlight the work of our colleagues of all genders within the WONCA family, who every day build a better future through primary care.

First, I would like to warmly welcome a new member of the WONCA Executive Committee, Prof Taghreed Mohamed Farahat (Egypt), as [Regional President of WONCA East Mediterranean 2021](#).

In his [column](#), WONCA President, Dr Donald Li, talks about the adaptation of worldwide activities to overcome the challenges presented by COVID-19; and highlights the efforts of primary health care professionals to continue their mission despite adverse circumstances.

WONCA CEO, Dr Harris Lygidakis, posts the very first edition of the new column, [From the Headquarters](#). This column contains the most recent activities from the Secretariat, including information regarding the Extraordinary General Meeting of the Council in May, the new Membership Portal and all the updates related to Data Protection and Privacy Policies.

This edition for March also includes information regarding dialogues on medicines and technologies for diabetes care, organised by the WHO Department of Noncommunicable Diseases (NCD), in which Dr Hina Jawaid (Pakistan) participated on behalf of WONCA.

Please, do not miss out on two special items: one from our guest feature Dr John Wynn-Jones, immediate past chair of the WONCA Working Party on Rural Practice; and the other from our WONCA Special Interest Group on Ageing and Health, with small section Ageing lines: stories from caregivers and elderly patients, with anonymous collaborations and inspiring anecdotes.

Finally, stay up-to-date with the latest news on upcoming WONCA conferences and our Member Organizations events.

Enjoy this issue, and please remember that you can always drop me a line (or an article!) at maria.zavala@wonca.net.

Sincerely,
Maria Dolores Zavala,
WONCA Editor

[1] (Boniol, M., Mclsaac, M., Xu., L., Wuliji, T., Diallo, K., and Campbell, J., *Gender Equity in the Health Workforce: Analysis of 104 Countries*, World Health Organization, 2019.





We thank the contribution of our female colleagues in primary care from all over the world and we raise our voices for a gender-equal world!

INTERNATIONAL WOMEN'S DAY

Dr Anna Stavdal, WONCA President-Elect

To celebrate International Women's Day, WONCA President-Elect, Dr Anna Stavdal, writes about the role of women within the healthcare workforce and the importance of an equal future in a post-COVID-19 world.

Family doctors can play a major role in balancing gender inequalities. As the first point of contact with health care, we hold the opportunity to actively look for where and how gender inequalities play out in our community and for the individual woman and her family. Gender is also playing out in diagnosing and treatment of disease. It can easily be forgotten because most of us didn't learn medicine from that perspective.

Gender inequalities mirror general societal structures, and the family doctor's ability to act can seem limited. But we can always do something: We can detect, describe, and not least recognize the situation the patient finds herself in. Recognition is the first step of empowerment.

Secondly, we can report. The data we hold about our population, our community, is crucial for a fair distribution of resources on the policy level.

[1] <https://eurohealthnet.eu/PP-Gender>

Men are 1.3 times more likely to die from COVID-19 once infected. Yet women face higher exposure to the virus and stress-induced mental health challenges, as they make up the majority of frontline workers. Women's health is also more likely to be challenged by job insecurity, poverty, the increased burden of informal labour, and decreased access to health, social, and anti-violence services [1].

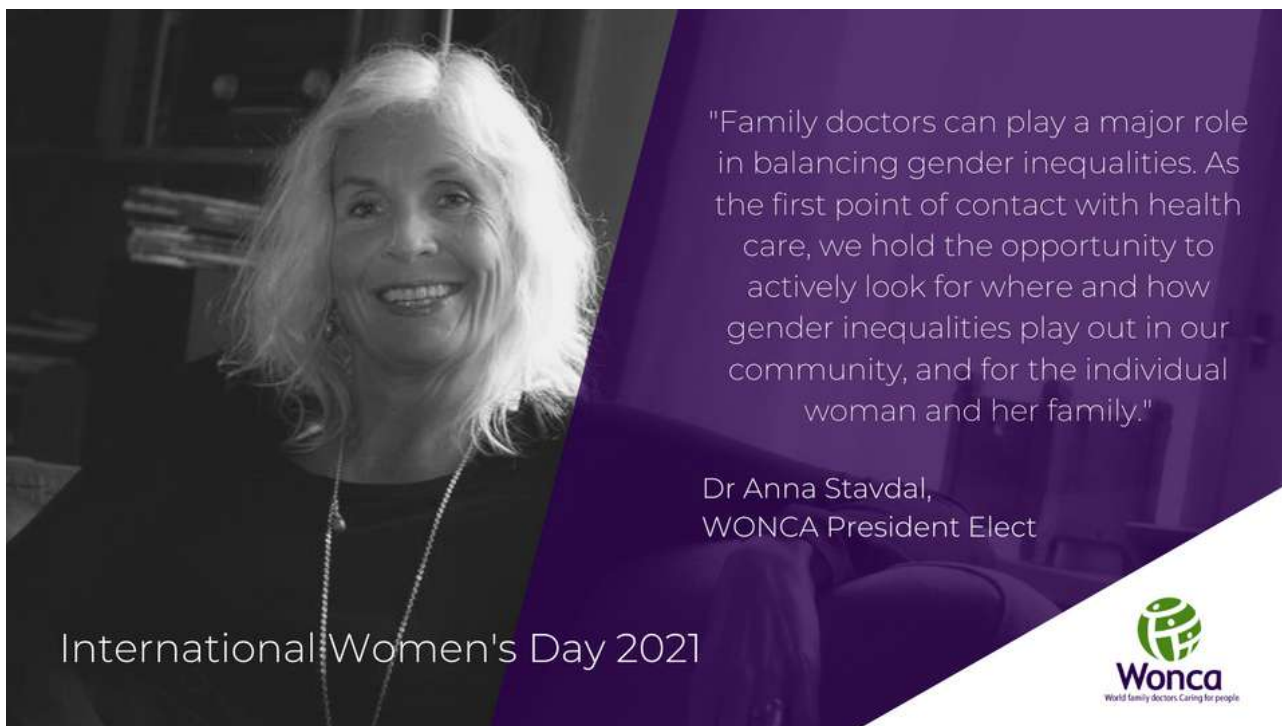
While men generally have worse health outcomes, they are less likely to visit a doctor. Women, on the other hand, live longer than men but often spend those years in poor health, with disabilities, or in poverty.

Access to maternal and newborn health facilities is often the service to suffer in all sorts of crisis. The implications for child and adolescent health later in life are extensive.

The gender lens is a prerequisite to understanding disease and ill-health. It is a responsibility for all healthcare workers, regardless of gender, to polish this lens and use it actively in daily work.

The gender issue, of course, also plays out in the community of healthcare workers.





"Family doctors can play a major role in balancing gender inequalities. As the first point of contact with health care, we hold the opportunity to actively look for where and how gender inequalities play out in our community, and for the individual woman and her family."

Dr Anna Stavdal,
WONCA President Elect

International Women's Day 2021



The health workforce consists primarily of women. In general, health is delivered by women, led by men.

This pattern has become more visible during the current pandemic.

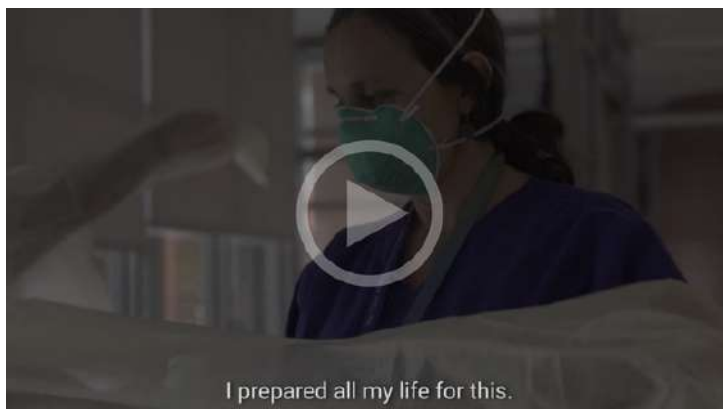
I hope that the gender issue will be actively discussed in the global family medicine community in the time to come. I wish colleagues of all genders my very best, - let`s build resilient primary care for the future!

Dr Anna Stavdal, WONCA President Elect


Dr Viviana Martinez Bianchi, Executive Member-at-Large & WHO liaison

On International Women's day, I would like to salute all women of the world, and especially family doctors who have risen to the occasion of caring for their communities during the pandemic.

Achieving an equal future in a COVID-19 world takes for each one of us to make a difference in the places where we work and live, working with our communities to achieve equity, leading and participating in interdisciplinary teams to improve access to healthcare, to COVID testing and vaccinations for historically marginalized populations.




Video Credits: Andrea Patiño Contreras and Victoria Bouloubasis



"Achieving an equal future in a COVID-19 world takes for each one of us to make a difference in the places where we work and live, working with our communities to achieve equity, leading and participating in interdisciplinary teams to improve access to healthcare, to COVID testing and vaccinations for historically marginalized populations."

Dr Viviana Martinez Bianchi,
Executive Member-at-Large
& WHO liaison

International Women's Day 2021



Dr Jacqueline Ponzo, Regional President of WONCA Iberoamericana-CIMF

Regional President of WONCA Iberoamericana-CIMF, Dr Jacqueline Ponzo shared an article written by two young women, Su-ming Khoo, specialist in Political Science and Sociology, and Mayara Floss, a family and community doctor from Brazil. The article deals with in-depth problems of inequity exposed by the pandemic in Brazil. Dr Jacqueline Ponzo translated the article into [Spanish](#). You can also read the English version at Discover Society [here](#).



International Women's Day 2021

EDGES OF THE
PANDEMIC – SURVIVAL
ACTIVISM AT THE
PERIPHERIES IN BRAZIL

Jacqueline Ponzo

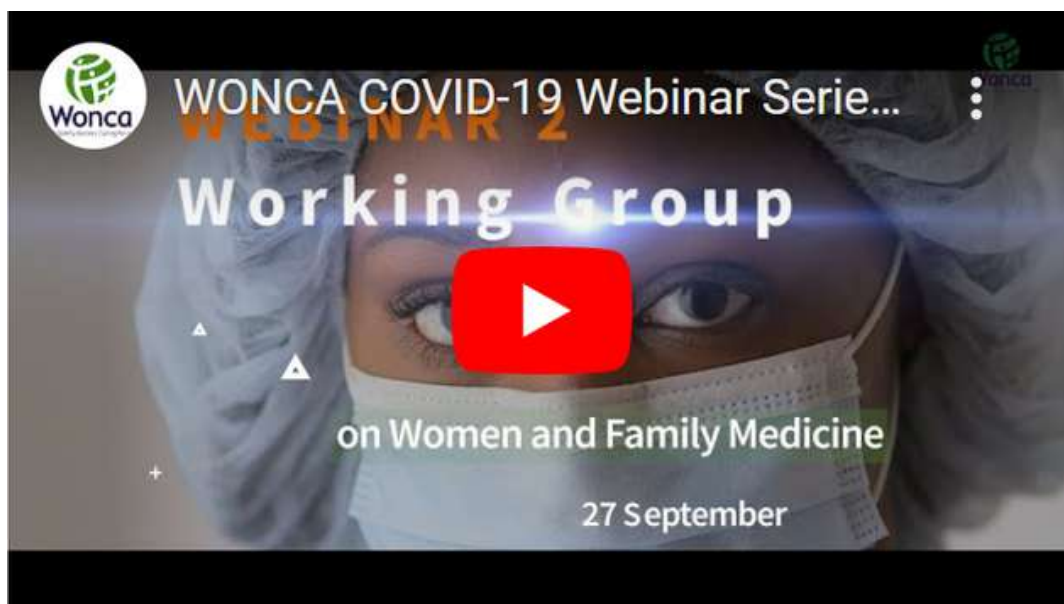
Mayara Floss

Su-ming Khoo



WONCA Working Party on Women and Family Medicine

Watch the webinar on Gendered Impact of the Pandemics on YouTube. The session was organised by WONCA and the WONCA Working Party on Women and Family Medicine, and features: Aileen Espina, Mimi Doohan, Anna Stavdal, Amanda Howe, Paula Henry, Victoria Tkachenko, Patience Ekperi, Tim Myo Han, Lucy Candib, Kate Anteyi, and Erfen Suwangto.



WONCA REGIONS NEWS

WONCA EAST MEDITERRANEAN

WONCA is delighted to announce the appointment of Prof Taghreed Mohamed Farahat (Egypt), as Regional President of WONCA East Mediterranean 2021, succeeding Prof Jinan Usta (Lebanon).

Presently, Prof Farahat is President of the Egyptian University Promotion Committee (EUPC) for Family medicine and community medicine. She also serves as Chair Person of the Egyptian Family Medicine Association (EFMA), contributing with technical assistance to the Ministry of Health to establish the Egyptian Board of Family Medicine, developing training sessions, and educational curriculum, programs & guidelines in Family practice.

Additionally, she works as Project manager (PI) & Head of the Taskforce of family medicine curriculum development for undergraduate medical school students, Head of the research committee of WONCA /EMR Founder and Ex. Chairman of the Department of Family Medicine, Menoufia University.

Prof Taghreed Mohamed
Farahat
Regional President of WONCA
East Mediterranean 2021



WONCA AND WHO

Dr Hina Jawaid (Pakistan) participated, on behalf of WONCA, in a series of dialogues organised by the Department of Noncommunicable Diseases (NCD) of the World Health Organization (WHO), which were carried out virtually on 23 and 24 February 2021 from Geneva, Switzerland, with speakers connected from multiple regions around the world.

These interventions were part of the preamble to launch the WHO Global Diabetes Compact, to be released next April, which marks the 100th anniversary of insulin first used in the treatment of diabetes.

The dialogues aimed to define meaningful and effective contributions to implement national responses for the prevention, management and control of Noncommunicable Diseases and the attainment of related Sustainable Development Goal (SDG) targets.



I would like to thank WONCA -World Organization of Family Doctors- for asking me to speak on their behalf. I am a General Practitioner, had training in the UK. I have the clinical experience of working in the NHS, have maintained a portfolio of support information, professional knowledge & skills and appraisals are up to date.

In Pakistan, I work as Assistant Professor in Family Medicine at the University of Health Sciences Lahore. Working in these two countries have given me a chance to understand the health systems more closely, particularly identify ways to improve the quality of care in health facilities in Pakistan. I am currently involved in the training of medical officers based in primary care facilities of the public sector in the south of Punjab, which represents a primary care transformation initiative, like no other taken in the province ever before.

DIALOGUE ON MEDICINES AND TECHNOLOGIES FOR DIABETES CARE

While attending the private sector dialogue on SDG 3.4 NCDs, I had a chance to listen to other speakers, including Daniela Rojas, representative of People living with NCDs.

My talk aimed to present the real challenges faced, by myself and fellow family physicians, not only from Pakistan but also from other countries in South Asia. With a massive burden of NCDs in our region and a lack of a well-established and functioning primary care system, I believe both public and private sectors have a crucial role in dealing with these chronic diseases.

The continuing medical educational (CMEs) activities, arranged by the private sector (pharmaceuticals), must focus on evidence-based medicine, encourage GPs/ family physicians to be patient advocates, and provide medications/ related products at a discounted rate, especially in COVID-19 times when a significant number of families have been affected by job losses.

In conclusion, governments and private sector companies must collaborate and take measures to ensure that patients with diabetes, particularly type 1 DM, must not be left untreated. Those patients should be fully supported through pharmacological and non-pharmacological interventions.



Dr Hina Jawaid

MBBS(Pak), MRCS(UK), MSc(UK),
MRCGP(UK)

Assistant Professor in Family Medicine
University of Health Sciences Lahore
Pakistan



WONCA WP & SIG NEWS

RURAL PRACTICE



17TH WONCA WORLD RURAL HEALTH CONFERENCE

WONCA Working Party on Rural Practice shares some exciting news! The 17th WONCA World Rural Health Conference original lecture recordings and webinar series are now available for viewing and download [here!](#)

You can also relive some of the best moments and memorable global experts discussions at the conference Closing Ceremony.



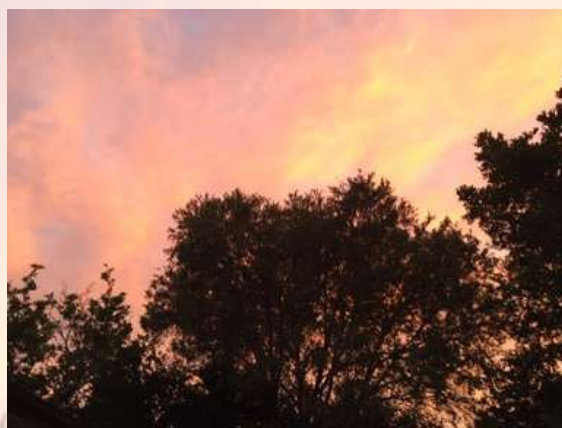
AGEING AND HEALTH

AGEING LINES: STORIES FROM CAREGIVERS AND ELDERLY PATIENTS

This is a space dedicated to caregivers and elderly patients, created with anonymous collaborations from the WONCA Special Interest Group on Ageing and Health. This section includes inspiring anecdotes for the simple purpose of adding value and quality to older patient's lives.

"I have a 97-year-old patient who tells me that one of the joys of his life is to watch the sunset light up trees outside his bedroom window.

We often underestimate how much pleasure nature can bring our older patients. Perhaps we should encourage them or their family members to get outside, or place them so they can look through the window, or if that is not possible, to have a pot plant or some flowers nearby to give them some pleasure."



WONCA CONFERENCES

WONCA EUROPE 2021: YOU CAN ALREADY SAVE A SPOT

The WONCA Europe 2021 Conference, originally planned to take place in Amsterdam, is now coming to you, virtually!

We are pleased to invite you to the [Virtual WONCA Europe 2021 Conference](#), hosted by the Dutch College of General Practitioners, which will take place between 6-10 July 2021, online.

We are still facing the challenges stemmed from the global pandemic, including many uncertainties regarding travelling and gatherings worldwide. We are adapting to these challenges and preparing for the WONCA Europe 2021 Conference accordingly.



WONCA Europe 2021 will enable us to continue exchanging knowledge and advancing science, despite the circumstances.

Check the registration rates [here](#) and mark your calendar now and join the WONCA Europe community online!

WONCA CIMF - 7º CONGRESO IBEROAMERICANO

On February 4, the [7th Ibero-American Congress of Family Medicine](#) was officially announced during a digital session led by Prof Jacqueline Ponzo, President of WONCA Iberoamericana-CIMF.

The congress will be held on August 18 to 21, 2021, in Vitoria, Espírito Santo, Brazil. The event will be held in a hybrid way (face-to-face and online), enabling greater participation due to possible mobility restrictions concerning the COVID-19 pandemic for some Latin America countries.

The event program will integrate the members' suggestions of the SBMFC and CIMF, following guidelines previously defined by the organizing committee, aligned with this year's theme Health and Sustainability: From the Environment to Health Systems.



ANNOUNCEMENTS AND UPDATES

VIRTUAL TORONTO INTERNATIONAL PROGRAM TO STRENGTHEN FAMILY MEDICINE

In these challenging times, coming together as a global community committed to high-quality family medicine and primary care is more important than ever.

The Department of Family and Community Medicine (DFCM) at the University of Toronto is excited to announce the launch of the VTIPs-FM, the first virtual edition of the longstanding Toronto International Program to strengthen Family Medicine. This year's edition will be delivered online from April 7 to June 23, 2021, with an orientation session on March 31, 2021.



This 12-week course, taught by faculty leaders from the Department of Family and Community Medicine (DFCM) and international guest faculty, provides an overview of how to leverage excellence in education, research, clinical services and leadership to deliver high quality family medicine globally, by sharing experience and building on lessons learned at the DFCM, in Canada and around the world.

Registration is now open [here](#). Details of the program can be found on the [DFCM website](#) or dfcm.globalhealth@utoronto.ca.

Join to learn together and support progress towards Health and Well-Being for All. Please share widely with your networks!

EACH: INTERNATIONAL CONFERENCE ON COMMUNICATION IN HEALTHCARE PART 2

EACH: International Association for Communication in Healthcare is delighted to invite you to participate in the [International Conference on Communication in Healthcare 2020 Part 2: Online from 15 - 16 April 2021](#).

This online conference offers the opportunity to participate in the second part of the 2020 ICCH programme, bringing together the community of healthcare researchers, teachers, practitioners and policy makers from around the globe.



In addition to a variety of engaging oral presentations, the conference includes interactive workshops, roundtable discussions and networking sessions on many topics such as clinician-patient interaction, shared decision making, health equity & health disparities, communication technology, and many more.

ANNOUNCEMENTS AND UPDATES

JOIN THE 5TH ANNIVERSARY OF THE BESROUR FORUM POSTER PRESENTATIONS

The Besroure Centre for Global Family Medicine (Besroure Centre) is pleased to announce the call for abstracts for posters that will be presented at the 2021 Besroure Forum as part of the College of Family Physicians of Canada's Family Medicine Forum (FMF) from November 10 to 13, 2021.

The CFPC is currently planning for FMF to be either a hybrid or fully virtual event. A hybrid event would include some virtual sessions and some in-person sessions. It is important to note that in person sessions will take place only if health guidelines allow for them in November.

The Submission deadline is Friday, April 30, 2021. Please read the [poster guidelines](#) here and submit to Besrourecentre@cfpc.ca

PANDEMIC-RELATED RESEARCH

While clinical research, program evaluation, quality improvement, and medical education projects are encouraged (provided a scholarly approach is taken), the committee is especially interested in work focused on family medicine concerns in the later phases of the COVID-19 pandemic. Areas such as chronic disease, mental well-being, and collaboration with public health efforts are of particular interest.

ABSTRACT MENTORSHIP

The Besroure Centre encourage novice and experienced researchers to submit abstracts. If you are interested in mentorship in this regard, the Besroure Scientific Committee is available to provide support. Please reach out to us and a committee member will be pleased to connect with you to offer advice, answer questions, or provide constructive feedback.



KEEP IN MIND

- If your work has not been completed, you may submit it with “In progress” in the title.
- If you submitted an abstract to WONCA World Conference 2021, consider submitting this abstract to the Besroure Forum, as well.
- Once your abstract is accepted, at least one author must register for at least one day of the conference, whether it is virtual or in-person. Registration information will follow at a later date.

BEST POSTER AWARD

Posters are judged by a panel of peers. Please see the [poster guidelines](#) for more details about the award.

For more information please click [here](#) or If you have any questions about how to write an abstract or poster presentation, please contact Dr. Sumeet Sodhi (ssodhi@cfpc.ca) and Dr. Innocent Besigye (ibesigye@gmail.com), Co-chairs, Besroure Centre Scientific Committee.

ANNOUNCEMENTS AND UPDATES

FM 360° VIRTUAL EXCHANGE - VDGM MEETS WAYNAKAY

Join the first Virtual FM360 Exchange between Vasco da Gama and Waynakay on Sunday 14 March 2021 from 16:00 - 19:00 UTC, featuring experiences from Brazil (Dr Natasha Anisio and Dr Andry Cruz), Mexico (Dr Francisco José Molina Silva) and Peru (Dr Luz Núñez).

If you want to participate in the First International Virtual Exchange, please send your CV and Motivational Letter to fm360vdgm@gmail.com.

If you want to participate in the first Intercontinental Virtual Exchange, please send to fm360vdgm@gmail.com the following information before the 13th march (included):

- CV
- Motivational letter

**FM360° Virtual Exchange
VdGM meets Waynakay**

Sunday 14th March
5 pm-8 pm CET

CALL FOR ABSTRACTS

IHF BARCELONA & LA UNIÓ CATALANA D'HOSPITALS

Share your work with the international healthcare community at the IHF World Hospital Congress!

The [44th World Hospital Congress](#) of the [International Hospital Federation](#) will be held in Barcelona on 8-11th November 2021 as a hybrid event: mixing in-person and digital program elements. The Congress is hosted by [La Unió Catalana d'Hospitals](#) (The Catalan Union of Hospitals) with the overarching theme: "People on board: Transforming healthcare by blending agility, responsiveness, and resilience."

The Congress is a unique forum that brings together IHF members, executive leaders of hospitals, health services, and healthcare organizations from more than 50 countries.

As the COVID-19 crisis has challenged healthcare globally, it is vital to discuss how transformations contribute to the enhancement of responsiveness, flexibility, and resilience of healthcare systems and hospitals. If you have a compelling story to share with healthcare leaders from around the world, [submit your abstract now](#).

Deadline for submission is on 16th April 2021.

2021 IHF BARCELONA
44th World Hospital Congress



[Submit Abstract](#)

FEATURED STORIES

THE GARDEN

The English philosopher and statesman Sir Thomas More said that "the many great gardens of the world, of literature and poetry, of painting and music, of religion and architecture, all make the point as clear as possible: The soul cannot thrive in the absence of a garden. If you don't want paradise, you are not human; and if you are not human, you don't have a soul."

GUEST FEATURE BY JOHN WYNN-JONES: THE GARDEN



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 'Rural Miscellany' email with poems and resource ideas to help and divert us in this difficult time. In this, the second item of 2021, we publish "The Garden" - written by John this month.

I have just spent a productive weekend, working in my own garden. Spring is tantalisingly beginning to reveal itself in the new buds and early flowers everywhere. After so much time spent in lockdown over the last 12 months, one begins to appreciate the private, psychological and personal space that your garden occupies.

The garden is such a force that revitalises and restores the spirit. Our gardens reflect the seasons, our moods and our loves & desires. They are an open book to our inner beings.

The French philosopher, Voltaire said of gardens "We must cultivate our own garden. When man was put in the garden of Eden he was put there so that he should work, which proves that man was not born to rest". Gardens are not just about sitting in the sun or the shade, they need constant maintenance and attention. Above all, working in our gardens can be the best therapeutic exercises that we can undertake at any time.

I have collected an array of poems dedicated to the garden and to gardening. They explore the peace, beauty, toil and trials associated with the garden through time. This post is dedicated to all you gardeners and would-be gardeners out there.

Enjoy!

Dr John Wynn-Jones



Andrew Marvell (1621-1678)

Andrew Marvell was an English Metaphysical poet, satirist and politician whose political reputation overshadowed that of his poetry until the 20th century. He is now considered to be one of the best Metaphysical poets. He sat in the House of Commons at various times between 1659 and 1678. During the Commonwealth period he was a colleague and friend of John Milton.

He spent his boyhood in the Yorkshire town of Hull, where his father, a clergyman of Calvinist inclination, was appointed lecturer at Holy Trinity Church and master of the Charterhouse when the poet was three years old. At the age of 13, Marvell attended Trinity College, Cambridge and eventually received a BA degree. From the middle of 1642 onwards, Marvell probably travelled in continental Europe.

He may well have served as a tutor for an aristocrat on the Grand Tour, but the facts are not clear on this point. While England was embroiled in the civil war, Marvell seems to have remained on the continent. His poems range from the love-songs, to evocations of aristocratic country houses & gardens and political satire. Although earlier opposed to Oliver Cromwell's Commonwealth government, he wrote "An Horatian Ode upon Cromwell's Return from Ireland" (1650), and from 1653 to 1657 he was a tutor to Cromwell's ward William Dutton. In 1657 he became assistant to John Milton as Latin secretary in the foreign office.

After the restoration of Charles II in 1660, Marvell turned to political verse satires. Marvell is also said to have interceded on behalf of Milton to have him freed from prison in 1660. His political writings favoured the toleration of religious dissent and attacked the abuse of monarchical power.

"The Garden" is one of the most famous English poems of the seventeenth century. It takes the form of meditation in a garden.

Some have interpreted it as a response to the original biblical garden, Eden, while other commentators have understood the poem as a meditation about sex, political ambition, and various other themes. Its celebrated lines about 'Annihilating all that's made / To a green thought in a green shade' are especially memorable.

Marvell depicts the garden as a retreat, as a place of repose and restfulness – an escape from the more frenetic world of public life that lies beyond the boundaries of the garden. We've probably all dreamed of chucking it all in and retreating to some quiet and tranquil place where our soul or mind will know some rest. When our passions have run their course, love can blossom in the space of the garden.

The Garden

*How vainly men themselves amaze
To win the palm, the oak, or bays,
And their uncessant labours see
Crown'd from some single herb or tree,
Whose short and narrow verged shade
Does prudently their toils upbraid;
While all flow'rs and all trees do close
To weave the garlands of repose.*

*Fair Quiet, have I found thee here,
And Innocence, thy sister dear!
Mistaken long, I sought you then
In busy companies of men;
Your sacred plants, if here below,
Only among the plants will grow.
Society is all but rude,
To this delicious solitude.*

*No white nor red was ever seen
So am'rous as this lovely green.
Fond lovers, cruel as their flame,
Cut in these trees their mistress' name;
Little, alas, they know or heed
How far these beauties hers exceed!
Fair trees! wheres'e'er your barks I wound,
No name shall but your own be found.*



*When we have run our passion's heat,
Love hither makes his best retreat.
The gods, that mortal beauty chase,
Still in a tree did end their race:
Apollo hunted Daphne so,
Only that she might laurel grow;
And Pan did after Syrinx speed,
Not as a nymph, but for a reed.*

*What wond'rous life in this I lead!
Ripe apples drop about my head;
The luscious clusters of the vine
Upon my mouth do crush their wine;
The nectarine and curious peach
Into my hands themselves do reach;
Stumbling on melons as I pass,
Ensnar'd with flow'rs, I fall on grass.*

*Meanwhile the mind, from pleasure less,
Withdraws into its happiness;
The mind, that ocean where each kind
Does straight its own resemblance find,
Yet it creates, transcending these,
Far other worlds, and other seas;
Annihilating all that's made
To a green thought in a green shade.*

*Here at the fountain's sliding foot,
Or at some fruit tree's mossy root,
Casting the body's vest aside,
My soul into the boughs does glide;
There like a bird it sits and sings,
Then whets, and combs its silver wings;
And, till prepar'd for longer flight,
Waves in its plumes the various light.*

*Such was that happy garden-state,
While man there walk'd without a mate;
After a place so pure and sweet,
What other help could yet be meet!
But 'twas beyond a mortal's share
To wander solitary there:
Two paradises 'twere in one
To live in paradise alone.*

*How well the skillful gard'ner drew
Of flow'rs and herbs this dial new,
Where from above the milder sun
Does through a fragrant zodiac run;
And as it works, th' industrious bee
Computes its time as well as we.
How could such sweet and wholesome hours
Be reckon'd but with herbs and flow'rs!*

William Blake (1757-1827)

William Blake was an English poet, painter, visionary and printmaker. Largely unrecognised during his lifetime, Blake is now considered a seminal figure in the history of the poetry and visual arts of the Romantic Age. We have come across his poetry on many occasions and hence I refrain for further introduction.

Blakes tell us that he goes into the “Garden of Love” where he used to play as a child. He finds a chapel built on the spot where he once played. The gates of the chapel are shut, and commandments and prohibitions are written over the door. The garden has become a graveyard, its flowers replaced by tombstones. The garden is an allegorical image of liberty, in the shape of a garden being crushed and turned into a world of death and restriction. It also alludes to the garden of Eden and what was lost when Adam and Eve gave in to temptation. Blake disliked organised religion and the chapel represents the organised religion that he hated the most.

The Garden of Love

*I went to the Garden of Love,
And saw what I never had seen:
A Chapel was built in the midst,
Where I used to play on the green.*

*And the gates of this Chapel were shut,
And Thou shalt not writ over the door;
So I turn'd to the Garden of Love,
That so many sweet flowers bore.*



*And I saw it was filled with graves,
And tomb-stones where flowers should be:
And Priests in black gowns, were walking their
rounds,
And binding with briars, my joys & desires.*

Sara Coleridge (1802-1852)

Sara Coleridge was an English author and translator. She was the third child out of four and only daughter of the romantic poet Samuel Taylor Coleridge and his wife Sara Fricker. She gained popularity with instructive verses for children.

During her childhood, her father was seldom at home, and his brother-in-law Robert Southey influenced Sara's early years. She did not see her father from 1812 to 1822, when she visited him at Highgate with her mother. Thereafter his influence was strikingly evident. In 1829 she married her cousin, Henry Nelson Coleridge. For her children, she wrote *Pretty Lessons in Verse for Good Children* (1834) and *Phantasmion* (1837), a fairy story with some delightful lyrics. When her husband died in 1843, she took up his unfinished task of editing her father's works and also made several contributions to Coleridgean studies.

"The Garden Year" tells us that our gardens reflect every season and every month of the year. There is always something to do.

The Garden Year

*January brings the snow,
Makes our feet and fingers glow.*

*February brings the rain,
Thaws the frozen lake again.*

*March brings breezes, loud and shrill,
To stir the dancing daffodil.*

*April brings the primrose sweet,
Scatters daisies at our feet.*

*May brings flocks of pretty lambs
Skipping by their fleecy dams.*

*June brings tulips, lilies, roses,
Fills the children's hands with posies.*

*Hot July brings cooling showers,
Apricots, and gillyflowers.*

*August brings the sheaves of corn,
Then the harvest home is borne.*

*Warm September brings the fruit;
Sportsmen then begin to shoot.*

*Fresh October brings the pheasant;
Then to gather nuts is pleasant.*

*Dull November brings the blast;
Then the leaves are whirling fast.*

*Chill December brings the sleet,
Blazing fire, and Christmas treat.*

Elizabeth Barrett Browning (1806-1861)

Elizabeth Barrett Browning was an English poet of the Victorian era, popular in Britain and the United States during her lifetime. Born in County Durham, the eldest of 12 children, Elizabeth Barrett wrote poetry from the age of eleven.

The Barrett family were part Creole and had lived in Jamaica, where they owned sugar plantations and relied on slave labour. Elizabeth's father, Edward Barrett Moulton Barrett, chose to raise his family in England, while his fortune grew in Jamaica. Educated at home, Elizabeth apparently had read passages from *Paradise Lost* and a number of Shakespearean plays, before the age of ten. By her twelfth year, she had written her first "epic" poem, which consisted of four books of rhyming couplets. Two years later, Elizabeth developed a lung ailment that plagued her for the rest of her life. Doctors began treating her with morphine, which she would take until her death. While saddling a pony when she was fifteen, Elizabeth also suffered a spinal injury. Despite her ailments, her education continued to flourish.



Throughout her teenage years, Elizabeth taught herself Hebrew so that she could read the Old Testament; her interests later turned to Greek studies. The abolition of slavery in England and mismanagement of the plantations depleted the Barretts's income, and in 1832, Elizabeth's father sold his rural home, finally settling permanently in London.

Gaining attention for her work in the 1830s, Elizabeth continued to live in her father's London house under his tyrannical rule. He began sending Elizabeth's younger siblings to Jamaica to help with the family's estates. Elizabeth bitterly opposed slavery and did not want her siblings sent away. While staying by the coast to improve her health, her brother Edward drowned, and this had a profound impact on her becoming an invalid and a recluse. She spent the next five years in her bedroom at her father's home. She continued writing and her 1844 collection, entitled *Poems* gained the attention of poet Robert Browning, whose work Elizabeth had praised in one of her poems, and he wrote her a letter.

Elizabeth and Robert, who was six years her junior, exchanged 574 letters over the next twenty months. Immortalized in 1930 in the play *The Barretts of Wimpole Street*, by Rudolf Besier, their romance was bitterly opposed by her father, who did not want any of his children to marry. In 1846, the couple eloped and settled in Florence, Italy, where Elizabeth's health improved, and she bore a son. Her father never spoke to her again.

This poem, one of Barrett Browning's "Sonnets from the Portuguese" (1850), was written about her love for her husband, Robert, describing how her beloved brought her flowers plucked in the garden, as tokens of his affection.

The poem is about her courtship and eventual marriage to Robert Browning whom she instructs to accept her gifts (her thoughts) which, like the flowers in the garden, have grown within her and under his care 'shall not pine'.

Sonnets from the Portuguese 44: Beloved, thou has brought me many flowers

*Beloved, thou hast brought me many flowers
Plucked in the garden, all the summer through
And winter, and it seemed as if they grew
In this close room, nor missed the sun and showers,*

*So, in the like name of that love of ours,
Take back these thoughts which here unfolded too,*

*And which on warm and cold days I withdrew
From my heart's ground. Indeed, those beds and
bowers,*

*Be overgrown with bitter weeds and rue,
And wait thy weeding; yet here's eglantine,
Here's ivy!— take them, as I used to do
Thy flowers, and keep them where they shall not
pine.*

*Instruct thine eyes to keep their colours true,
And tell thy soul, their roots are left in mine.*

Alfred, Lord Tennyson (1809-1892)

Alfred, Lord Tennyson was an English poet often regarded as the chief representative of the Victorian age in poetry. He was the Poet Laureate during much of Queen Victoria's reign and remains one of the most popular British poets. Although decried by some critics as overly sentimental, his verse soon proved popular and brought Tennyson to the attention of well-known writers of the day, including Samuel Taylor Coleridge. Tennyson's early poetry, with its medievalism and powerful visual imagery, was a major influence on the painters of the Pre-Raphaelite Brotherhood.

"Come into the garden, Maud" is probably the most famous garden poem in the English language. The poem describes a lover's wait for his lady love at the end of a ball. ... He speaks to the lilies and roses, describes the beauty and enigma of the lady love. Throughout the poem, the learnt imagery and the sensuality makes the poem even more appealing.

Come into the Garden Maud became a popular Victorian parlour song. The publisher John Boosey selected tactfully from Tennyson's lengthy poem (1855) and sent the verses to the composer Balfe, who composed this song for the celebrated tenor Sims Reeves.

Come into the garden, Maud

*Come into the garden, Maud,
For the black bat, night, has flown,
Come into the garden, Maud,
I am here at the gate alone ;
And the woodbine spices are wafted abroad,
And the musk of the rose is blown.*

*For a breeze of morning moves,
And the planet of Love is on high,
Beginning to faint in the light that she loves
On a bed of daffodil sky,
To faint in the light of the sun she loves,
To faint in his light, and to die.*

*All night have the roses heard
The flute, violin, bassoon ;
All night has the casement jessamine stirred
To the dancers dancing in tune ;
Till a silence fell with the waking bird,
And a hush with the setting moon.*

*I said to the lily, 'There is but one
With whom she has heart to be gay.
When will the dancers leave her alone ?
She is weary of dance and play.'
Now half to the setting moon are gone,
And half to the rising day ;
Low on the sand and loud on the stone
The last wheel echoes away.*

*I said to the rose, 'The brief night goes
In babble and revel and wine.
O young lord-lover, what sighs are those,
For one that will never be thine ?
But mine, but mine,' so I sware to the rose,
For ever and ever, mine.'*

*And the soul of the rose went into my blood,
As the music clashed in the hall;
And long by the garden lake I stood,
For I heard your rivulet fall
From the lake to the meadow and on to the wood,
Our wood, that is dearer than all;*

*From the meadow your walks have left so sweet
That whenever a March-wind sighs
He sets the jewel-print of your feet
In violets blue as your eyes,
To the woody hollows in which we meet
And the valleys of Paradise.*

*The slender acacia would not shake
One long milk-bloom on the tree ;
The white lake-blossom fell into the lake
As the pimpernel dozed on the lea ;
But the rose was awake all night for your sake,
Knowing your promise to me;
The lilies and roses were all awake,
They sighed for the dawn and thee.*

*Queen rose of the rosebud garden of girls,
Come hither, the dances are done,
In gloss of satin and glimmer of pearls,
Queen lily and rose in one;
Shine out, little head, sunning over with curls,
To the flowers, and be their sun.*

*There has fallen a splendid tear
From the passion-flower at the gate.
She is coming, my dove, my dear;
She is coming, my life, my fate;
The red rose cries She is near, she is near;
And the white rose weeps, 'She is late;'
The larkspur listens, 'I hear, I hear;'
And the lily whispers, 'I wait.'*

*She is coming, my own, my sweet,
Were it ever so airy a tread,
My heart would hear her and beat,
Were it earth in an earthy bed ;
My dust would hear her and beat,
Had I lain for a century dead ;
Would start and tremble under her feet,
And blossom in purple and red.*