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ROM THE PRESIDEN⁻

UNIVERSAL HEALTH COVERAGE?

As family doctors we emphatically support the goal of Universal Health Coverage. We know that the best way to achieve Universal Health Coverage is to have a comprehensive, coordinated primary health care system as the basis for the whole health system, with clinically appropriate referrals between primary and secondary care. A crucial element of joined-up primary care is immunisation and vaccination, which provide the necessary protection against some of the world's preventable illnesses, diseases and conditions.

After the fanfare of the Astana Declaration in October 2018, where every country signed up to and committed their nations to the delivery of Universal Health Coverage, there was hope that the goal was more achievable than ever.



Then COVID 19 happened and every nation was understandably addressing this major global health threat. Recognising that the threat is not unique to one country, that it does not respect borders, that it cannot be contained neatly, was important. One year ago, in my column in the September 2020 issue of WONCA News, I observed some of the challenges being faced across the world in the context of the pandemic, difficulties faced in reflecting accurate figures, and challenges in collecting data in ways which made comparisons easier and more meaningful. In the same column I also reflected on opportunities which the global threat offered.

'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.'

I now feel that this statement was overly optimistic, expressed too much hope in our health systems, in our politicians, in our development partners. As I write today, despite the development, the availability and the production of numerous effective vaccines, we are faced with intransigence, stubbornness and almost complete lack of collaborative work across nations to ensure that the basic act of vaccinating the global population against the threat of changing and mutating variants of this virus can happen.

The reasons for the appalling delay in providing vaccines to populations which need them are many.

DR DONALD LI Wonca president



In the midst of the ongoing noise surrounding vaccinations there are the big pharma companies whose directors are protecting their patents; most big pharma companies (with one notable exception) refusing to provide vaccines at cost; governments storing and hoarding vaccines while millions of people in other countries are left unprotected; and governments buying-in to dubious assertions about efficacy of some vaccines.

We hear daily about vaccine diplomacy (which would appear to be anything BUT diplomatic), vaccine wars, information wars ... when, in the real world, the battle is actually about fighting the virus and protecting the world's population. When was the opportunity for collaborative working across nations, cultures, specialities squandered? Why was it squandered? The risk of this virus and its inevitable mutations remains a global risk. As global citizens, we cannot simply sit back and assume that the pharmaceutical economy will take an ethical or moral stand. We can now see, clearly, what is driving the battle within pharma. While no-one ever expected pharma companies to take a noble stand, we did expect governments to take a moral stand and do the right thing for humanity. The ongoing battle for precedence among pharma companies is unseemly.

It is not pretty. And the refusal of governments to support their global neighbours – or make a show of sharing negligible doses of the vaccine - is a reflection of a world where empathy and compassion have all but disappeared.

If we, as global citizens, cannot even work together to achieve fair and equitable vaccination against the biggest global threat in history, how do we think we are going to work collaboratively to achieve Universal Health Coverage?

... and a PS In the context of dispelling misinformation about COVID vaccines, the London School of Hygiene and Tropical Medicine has produced a mobile toolkit for practitioners, hosted on the WHO's Digital Health and Innovation pages. This toolkit provides simple, useful information on sharing trusted sources of information; ready-to-go assets to share on social media accounts; and even support to create content. See A Social Media Toolkit for Healthcare Practitioners - desktop (who.int)

> Dr Donald Li, WONCA President

> > <u>Español</u> Français 中文

WONCA WORLD CONFERENCE



MEET OUR FACULTY



TOGETHER WE OWN THE FUTURE #WONCA2021



Anna Stavdal Lecturer and Associate Professor, University of Oslo President Elect, WONCA Norway

EACH: International Association for

Communication in Health Care

Netherlands



Donald Li President

WONCA World China



Uruquay

India

Hassan Salah Regional Advisor, Primary and Community Health Care World Health Organization - EMRO Egypt



Hernan Julio Montenegro MD, MPH Health Systems Adviser HIS/PSP WHO Geneva

Evelyn van Weel-Baumgarten Associate Professor Emeritus



Jacqueline Ponzo Adjunct Professor, Family and Community Medicine Faculty of Medicine of University of the Republic (UDELAR)





Meng-Chih Lee Superintendent of Taichung Hospital Taiwan



Michael Kidd Founder and editor-in-chief of the Journal of Medical Case Reports Australia



Raman Kumar President Academy of Family Physicians of India



Shabir Moosa Family Physician and Associate Professor

Russian Federation

Johannesburg Health District and University of Witwatersrand (Wits) Regional President, WONCA Africa South Africa

Nick Guldemond Professor Integrated Care and Technology





Sir Andy Haines Professor, Environmental Change & Public Health London School of Hygiene and Tropical Medicine United Kingdom



Laurence Dorman

Royal College of General Practitioners (RCGP) Northern Ireland



Nagwa Nashat Assistant Professor, Family Medicine Menoufia University Egypt



Alain Labrique Founding director of the Johns Hopkins University, mHealth Initiative Maryland, United States



Mohammed Rasoul Tarawneh Secretary General, High Health Council President, Jordan Society of Family Medicine Jordan



Ryuki Kassai Professor and Chair, Department of **Community and Family Medicine** Fukushima Medical University Japan

SEE COMPLETE LIST

FROM THE EDITOR

WELCOME TO WONCA NEWS SEPTEMBER!

This edition is dedicated to World Patient Safety Day, celebrated on September 17. World Patient Safety Day was established in 2019 by the 72nd World Health Assembly through the adoption of resolution WHA72.6 ("Global Action for Patient Safety"), based on the fundamental principle of "First, do no harm".

Since then, every September, the World Health Organization calls for solidarity and global action to improve patient safety. We would like to invite WONCA Family members, colleagues, caregivers patients. and communities to join this celebration on September 17 and show your commitment to Patient Safety. A special thanks to our colleagues from the WONCA Working Party on Quality and Safety, particularly to the WP Chair, Dr Maria Pilar Astier Peña, and Dr José Miguel Bueno, Secretary of the Working Group.

PATIENT SAFETY DAY



ABOUT THIS ISSUE

This issue begins with an important message from WONCA President Dr Donald Li, regarding vaccination hopes, the goal of reaching Universal Health Coverage for all, and the global obstacles that the COVID19 pandemic has made evident.

Dedicated to World Patient Safety Day, this edition for September also presents the reflections of WONCA President-Elect, Dr Anna Stavdal, on Patient Satisfaction and Patient Safety. You will also find all the details and objectives of World Patient Safety Day 2021, with the theme "Safe maternal and newborn care". This issue also includes content created by the WONCA Working Group on Quality and Safety about the role of family doctors in Patient Safety, the Global Patient Safety Action Plan 2021-2030, the XIII Conference on Patient Safety in Primary Care, and the blog "Sano y Salvo" (Safe and Sound), to promote Patient Safety Awareness.

WONCA News September also contains information on the Social Media Toolkit for Health Practitioners, launched by the World Health Organization, in collaboration with the UK Government, to tackle COVID misinformation. To close this edition, meet our Featured Doctor for this month, Dr Gabriela Di Croce from Argentina. Also, do not miss out on the latest activities of our Young Doctor Movements, along with the most recent announcements from members of the WONCA Family.

Please remember that the WONCA World Conference 2021 will be fully ONLINE from 22–27 November 2021! You can now discover the complete list experts that will lead our Plenary Lectures and Special Sessions at the official #WONCA2021 website, along with program highlights, important dates and much more.

I hope you enjoy this issue, and please remember that you can drop me a line (or an article!) at editor@wonca.net.

Happy reading, and stay safe!

Sincerely,

Maria Dolores Zavala, WONCA Editor



PATIENT SATISFACTION & PATIENT SAFETY SOME REFLEXIONS



DR ANNA STAVDAL WONCA President-Elect

Conducting an oral examination in family medicine some years ago, I asked the student to explain the principle of personcenteredness. "To give the patient what he asks for ", he said.

It was a good starting point for discussion. What is the relationship between needs, demands, wants, - and quality of health services? How to define quality, - and how to secure patient safety in the framework of person-entered care?

The patient/doctor relationship is mutual, and will always entail a transaction of more or less concrete character. Basically, the scheme is like this:

THE PATIENT IS IN NEED OF HELP, THE DOCTOR PROVIDES PROFESSIONAL ADVICE, THE PATIENT SHOWS GRATITUDE OR APPRECIATION IN RETURN, OR NOT. What happens to the transaction when the parties have different views of what the needs are, not to say what the best solution to the problem is? What about when the patient has clear expectations of the doctor's actions, and the doctor doesn`t respond accordingly? The patient will leave with dissatisfaction, the doctor with frustration. The transaction is unsuccessful for both parties. How does this impact patient safety?

Dr Google and an enormous repertoire of Digital Health tools influence patients' expectations to an in comprehensible extent. There are no common rules for marketing of digital tools and the user is usually left without any idea of who developed them, on the basis of what evidence and in what context. The ordinary user is chanceless when trying to assess the quality of the tool, not to say the relevance for his or her situation. This is a major element the doctor must explore to understand the patient`s expectations.

Sometimes the patient thinks he is well informed, whereas the doctor knows he`s disinformed. In such situations it can be a real challenge to end the consultation with both high patient satisfaction and safety. And without a deeply frustrated doctor who offered his best advice with no appreciation in return, maybe even with a bad review published on the same platforms.

There is common knowledge that patients` online rating of doctors impact clinical decisions.

might lead This to overtreatment and overdiagnosis; better to comply to expectations of tests or prescriptions, than to risk another bad rating from a patient who`s expectations were not met. This way patient satisfaction can lead to lack of patient safety.

We need to meet the challenges coming with the digital era. My strategy is to hold on to the basic values of family medicine. Provide personal care through trust and long standing relationships with patients.

And we have to negotiate, be able to change the course, using time as a diagnostic tool, building trust over time by developing the relationship.

We can't win them all, but this is one approach to achieve patients' satisfaction and high level of patient safety.

GLOBAL PATIENT SAFETY ACTION PLAN 2021-2030:

TOWARDS ELIMINATING AVOIDABLE HARM IN HEALTH CARE



DR MARÍA PILAR ASTIER PEÑA Chair of the Working Party on Quality & Safety



DR JOSÉ MIGUEL BUENO ORTIZ Secretary of the Working Party on Quality & Safety The Global Patient Safety Action Plan 2021-2030: Towards eliminating avoidable harm in health care was launched on 4 August 2021 and is available here. Participants from all over the world attended the Action Plan Launch event, headed by Dr Tedros Adhanom Ghebreyesus, Director-General of the World Health Organization.

The Launch event was followed by a two-day global consultation - Partners in action: Engaging stakeholders for implementing the Global Patient Safety Action Plan 2021–2030. Around 120 experts and partners deliberated and worked in breakout groups to identify priorities and develop modalities for implementing the global action plan for the next biennium (2022-2023).

WHO Deputy Director-General, Dr Zsuzsanna Jakab, greatly appreciated the contribution of all the participants and called for working together to take concrete steps for the implementation of the action plan.

Dr Neelam Dhingra Kumar, Head Unit of WHO Patient Safety Flagship conducted the consultation. Distinguished speakers including - Rt Hon Jeremy Hunt and Sir Liam Donaldson, Dr Evelyn Wesangula from Kenya Government, Dr Kok Hian Tan from Singapur's Institute on Quality and Safety in Healthcare, Mr Joe Kiani from World Patients'Association, Dr Ratna Devi and Dr Mondher Letaief from WHO East Mediterranean Office, spoke about the journey to create the Global Patient Safety Action Plan 2021-2030, and shared the perspectives of government, health care facility and system, stakeholders and WHO. Find the presentations and more details here.

WONCA Working Party on Quality and Safety participated discussion. on Experts' worked Participants in 8 breakout groups regarding the 4 of the perspectives Plan: Healthcare Governments, Stakeholders facilities. (as WONCA) WHO and the Secretariat.



GLOBAL PATIENT SAFETY ACTION PLAN 2021-2030:

TOWARDS ELIMINATING AVOIDABLE HARM IN HEALTH CARE The plan is organized in 7 Strategic Objectives (SO): SO1 Policies to eliminate avoidable harm in healthcare; SO2 Highly reliability systems; SO3 Safety of clinical processes; SO4 Patient and family engagement; SO5 Health worker education, skills and safety; SO6 information, research and risk management; SO7 Synergy, partnership and solidarity.

Each of the 35 strategies included in the global action plan suggest actions for WHO and now is the time to set our priorities for the next two years.



Finally, Dr Hardeep Singh, gave a lecture on developing indicators to monitoring and reporting to assess milestones for progress of implementing Global Patient Safety Action Plan: 1) to establish a global reporting mechanism on a minimum set of core indicators and targets. 2) to help assess implementation progress at global, regional, and national levels. 3) to build a basis for WHO reporting and accountability to World Health Assembly.

The global action plan will provide strategic direction to countries and health care facilities to reduce avoidable harm in health care, with a vision of "a world in which no one is harmed in health care, and every patient receives safe and respectful care, every time, everywhere.". WONCA is committed to collaborate to the deployment through its global family doctor network.

2021: SAFE MATERNAL AND NEWBORN CARE

World Patient Safety Day was established in 2019 to enhance global understanding of patient safety, increase public engagement in health care, promote global actions to improve patient safety and reduce risks. For World Patient Safety Day, 17 September 2021, WHO urges all to "Act now for safe and respectful childbirth!" with the theme "Safe maternal and newborn care". This year the disruption of essential health services worldwide caused by the COVID-19 pandemic makes the World Patient Safety Day celebration even more significant.

WHO calls upon all stakeholders (governments,

nongovernmental organisations, professional organisations, civil society, patient organisations, academia and research institutes) to join this global campaign by lighting up iconic monuments in orange, and organising international, national and local activities and events on and around 17 September 2021.



OBJECTIVES

WORLD PATIENT SAFETY DAY 2021



RAISE GLOBAL AWARENESS

on the issues of maternal and newborn safety, particularly during childbirth.

CALL FOR URGENT AND SUSTAINABLE ACTIONS

by all stakeholders to scale up efforts, reach the unreached and ensure safe maternal and newborn care, particularly during childbirth.



ENGAGE

multiple stakeholders and adopt effective and innovative strategies to improve maternal and newborn safety.

ADVOCATE

the adoption of best practices at the point of care to prevent avoidable risks and harm to all women and newborns during childbirth.

THE ROLE OF FAMILY DOCTORS AND PATIENT SAFETY

Care Primary and Family Medicine are immersed in every life event, including pregnancy, childbirth and healthcare of new mothers and newborns, including the postpartum period. At the same time, Family Doctors cooperate on perinatal healthcare, which refers to healthcare from 22 completed weeks of gestation until seven completed days after birth. They are also often responsible for the newborn health follow up, at least for the first month of a baby's life.

A healthy start during the perinatal period has a crucial influence on infancy, childhood, and adulthood. Therefore, Family Doctors have an essential role in safer maternal, perinatal and newborn health.

Women and newborns are exposed to significant risks due to unsafe care. Every day, approximately 810 women die from preventable causes related to pregnancy and childbirth. In addition, about 2 million babies are stillborn every year, with over 40% occurring during labour. Most stillbirths and maternal and newborn deaths are avoidable by providing safe and quality care by skilled health professionals working in supportive environments. This can only be achieved by engaging policymakers, stakeholders, health workers and adopting comprehensive health systems and communitybased approaches.

During the 69th World Health Assembly (WHA), celebrated in May 2016 in Geneva, Switzerland, the WHO accepted a resolution to ensure that every woman, child, and adolescent worldwide are able to survive and thrive by transforming care by 2030. This resolution calls for investments in the health and development of future generations to achieve the United Nations Sustainable Development Goals (SDGs) through universal health coverage (UHC).

WONCA Working Parties on Women' Health and Quality and Safety in Family Medicine invite the WONCA Family Doctors community to join this campaign to light up in orange their own practices and organising community activities to promote safer maternal and newborn healthcare.



DR MARÍA PILAR ASTIER PEÑA Chair of the Working Party on Quality & Safety



DR JOSÉ MIGUEL BUENO ORTIZ Secretary of the Working Party on Quality & Safety

XIII CONFERENCE ON PATIENT SAFETY IN PRIMARY CARE

WHAT WOULD YOU "NOT DO" TO IMPROVE PATIENT SAFETY!

On June 16 and 17, 2021, the XIII Conference on Patient Safety in Primary Care was held in virtual format for the first time. Virtuality has been a challenge for everyone, especially for the members of the organising and scientific committees, the technical and technological secretariat, the Ministry of Health and the organising scientific societies: the Spanish Society for Healthcare Quality (SECA), the Spanish Society of Family and Community Medicine (semFYC), the Federation of **Community Nursing and Primary** Care Associations (FAECAP), and the Spanish Society of Primary Care Pharmacists (SEFAP). We thank all of them and everyone involved in the face-to-face workshops that unfortunately could not take place in 2020 The opening recording is available here.

The Conference main objective was to encourage debate, exchange experiences related to Patient Safety in Primary Care, and promote a culture based on quality and safety. 2021 reached a new record of communication submissions, with 152 communications received and 143 accepted. The of presentation real-life experiences related to Patient Safety improvement was the most common communication, followed by patient safety incidents taught to professionals. Topics such as "Safe use of medication" and "training, safety culture and organisational management" were the most recurring themes.

During the first day, María Fernández from SEMFYC and Mataix from SEFAP Angel moderated the sessions, with speakers like Montserrat Gens, who reminded us of the importance of Risk Management and a Culture of Safety, also during COVID19 Pandemic, with experiences based on the Health Area of Camp de Tarragona; Juan José Jurado, a nurse at Fuenlabrada Health Center in Madrid, who highlighted the relevance of available evidence on Primary Care nursing; and José Saura Llamas, who focused on the triangle of clinical error on teaching. This session recording is available in Spanish here.

The second panel was moderated by Inmaculada Mediavilla from the Spanish Society for Healthcare Quality (SECA) and Esther Nieto from the Federation of Community Nursing and Primary Care Associations (FAECAP). This session focused on "what not to do", where María José Pérez Boillos shared key tools to implement a "Do Not do" strategy; Marta Sastre Paz presented collaborative documents in Community Care; and José Joaquín Mira Solves shared concrete data on the consequences of ignoring the "Do Not do" recommendations Family Medicine and in Pediatrics. Watch this session here.

This year, sixteen submissions were selected by the scientific committee as candidates for the "Fernando Palacio Award for improving patient safety in primary care".

The book with the 96 communications presented is also available for free download in printable pdf format, with an interactive index.

DISCOVER "SAFE AND SOUND"

A BLOG FOR PATIENT SAFETY AWARENESS

Discover the Blog "Sano y Salvo" (Safe and Sound), created by the Patient Safety Working Group (PSWG) of WONCA Member Organization SemFYC (Spanish Society for Family and Community Medicine). The blog was launched on January 15th 2008, while very few websites focused on patient safety, and nothing referred to primary care.

The group aimed to contribute and improve patient safety in health services in general and in primary care in particular. To this end, the Patient Safety Working Group promote а culture of patient safety among healthcare professionals and through the review dissemination of available knowledge, the development of training and research activities the preparation and and distribution of related materials and documents.

Maria Pilar Astier Peña, who also serves as Chair of the WONCA Working Party on Quality and Safety, writes:

Sano y salvo Blog de seguridad del paciente en atención primaria Sano y salvo Blog de seguridad del paciente en atendión primaria

Sano y salvo @sanoysalvoblog

Seguridad del Paciente en Atención Primaria de Salud. Grupo de Trabajo en #SegPac de semFYC. Patient Safety #PtSafety, Primary Health Care.

◎ España - Spain & sanoysalvo.es III Joined November 2010

"From the beginning, we considered the blog as a simple system to share the existing documentation on the topic among ourselves. We chose a system simple to use, versatile and open to anyone interested in it, such as a blog. Not long after, we found an unexpected increase in visitors worldwide. This moved us to make Sano y salvo what it is now: a place where you can access relevant and up to date information on the subject".

In addition to the latest news on patient safety, this blog is also a comprehensive repository of previous publications on the subject. With more than 1 800 000 views, and 10 600 followers on Twitter, the blog now closely follows the evolution of the pandemic (from beginnings in Wuhan), its offering information, analysis, recommendations and to continue caring for patient safety in times of great challenges and uncertainty.

Discover "Sano y Salvo" here and follow them on Twitter here.

TACKLING COVID-19 MISINFORMATION

Nearly 6000 people around the world were hospitalised in the first three months of 2020 due to coronavirus misinformation. Now, as the Covid-19 vaccines are approved and rolled out, misinformation has started to undermine the public's trust in these life-saving interventions.

People who are already valued experts and leaders in their own communities are the most effective messengers to counter harmful misinformation - people like WONCA members.

The World Health Organization —in collaboration with the UK Government— has been working with the to develop a social media toolkit for healthcare practitioners like you. The kit provides all the tools and tips you need to create online content that addresses COVID-19 misinformation and builds vaccine confidence.

With messages tried and tested by the World Health Organization, the toolkit will help you address common concerns around:

- the safety of the vaccines;
 the speed of vaccine development; and
 - the effectiveness of the vaccines.

healthcare We know that practitioners are extremely busy, now more than ever! The toolkit has been designed so you can tailor content creation to the demands of your schedule. You explore can guidance on creating your own posts, sharing the creative assets provided, or amplifying trusted health organisations' social media content - all options are positive steps to address COVID-19 misinformation online.

There are many scientists and healthcare professionals already creating and sharing simple, accurate and engaging posts with their online communities. By adding your voice to theirs, you can help people to make the right healthcare choices, ensuring that facts and science rise above the noise of myths and misinformation at this crucial moment in the vaccines' rollout.



Vaccines are the way out of this health crisis. You can help ensure facts triumph and confidence in vaccines remains high globally, so they can do their job of protecting the public and saving lives.

Get your toolkit here!



YOUNG DOCTORS MOVEMENTS

WONCA's Young Doctors' representative on World Executive, Ana Nunes Barata (Portugal), is coordinating regular news from our seven region Young Doctors' Movements.

A WORD FROM ANA NUNES BARATA

The Young Doctors' Movements (YDMs) are WONCA's active network that engages youth and promotes intercultural knowledge exchange that helps to create new ideas, projects and initiatives that contribute for the development of Primary Care at the global level. WONCA's young doctors are defined as in their first five years' of practice as a family doctor OR in training as a family doctor. Each WONCA region has its own YDM that strives to develop its network and engage with the young doctors from every country it represents.

You may find more information about the YDMs here.



DR ANA NUNES BARATA YDM representative on WONCA Executive 2018-2021



Vasco da Gama Movement



WONCA NEWS

R A Z I MOVEMENT

NEW MEMBERS

Gehad Farid from Egypt and Nouf Al Noun from UAE were included in our group from April 2021.

MONTHLY MEETINGS

Al Razi team kept his regular meetings on monthly basis.

AL RAZI YDM WEBINAR MEET THE EXPERT

bv Reina Alameddine Led (Lebanon). The first session was on 10 April 2021; in which Beesan Maraga from Palestine shared local studies that shaped the government response to COVID-19 pandemic.

YDM LEADS WEBINAR

FAMILY MEDICINE IDENTITY

Organised in in collaboration with Waynakay YDM:

- Adel Yasky was the organizer and moderator of the webinar and its preparatory meetings from Al Razi side.
- Salam Khashan (Palestine team) represented Al Razi in her talk about "Family Medicine in Conflict areas".

WORLD FAMILY DOCTOR **DAY 2021**

ABU DHABI PRE-CONFERENCE WORKING GROUP

We have created the Abu Dhabi Pre-Conference Working Group represented by all YDM groups and is responsible for organizing the YDMs pre-conference workshops. Reina was named as the Pre-Conference Manager, and Nouf was nominated to facilitate communication with the HOC.

LOCAL TEAMS ACTIVITIES UAE

- Team: Nouf Al Noun (team leader), Aala Khalaf, Aisha Al Falasi, Asma Al Ameri, Ebtihal Makki, Jawaher Al Mulla, Lamya AL Marzoogi, Najma Al Rahmani.
- Planning for internal activity, a CME accredited webinar in the name of Al Razi group.



EGYPT

- Team: Gehad Farid (team leader), Asmaa Abo Bakr, Basma Shokry, Narmean Bebars, Rofida El Saga, Manal Hamdy, Eman Elsaket, Marwa Tarek.
- Celebrating WFDD: video about telemedicine and poster of family physicians pictures during COVID pandemic.

We stand strong in the most difficult times to support our patients and our health systems, looking for a better future..







R A Z I M O V E M E N T

PALESTINE

- Building skills of Al Razi members (2nd online session): Workshop "CBT in Primary Care: A Brief Introduction".
- Incollaboration with MAP and FFMP, several meetings planning CBT training for Palestinian family doctors.
- Building Al-Razi members' in Gaza Research Capability: virtual course over several weeks in June and July 2021.
- Eleventh Lancet Palestinian Health Alliance conference: Al Razi presented a poster in this conference.

JORDAN

- New team member: Maram Smairat.
- Two meetings during the second quarter.
- Awareness video targeting general public about vaccination, April 2021.
- Celebrating WFDD 2021 by creating a poster, participating in JSFM activity and distributing roses for attendees.
- A poster celebrating World No Tobacco Day (WNTD), in collaboration of MOH / FM department.

SAUDI ARABIA

 In addition to previous activities; Family Medicine Identity Webinar & moderating social media accounts, Adel has recruited new team members: Hila Al Othman, Samiah Al Mehmadi, Abdulaziz Al Alwan, Abdulaziz Al Otaibi.

LEBANON

 In addition to previous activities "Meeting the Expert & Pre-Conference Manager", Reina has set evaluation framework for EMR young doctors' applications for WONCA World Rising Star Award.



YDM leads Webinar "Family Medicine Identity"



Polaris

POLARIS MOVEMENT

STATE OF THE MOVEMENT

Polaris was created to promote familv medicine globally, enhance international collaborations. facilitate exchanges, form leaders. identify adopt best and practices, and to represent medical North America's Family Medicine students, residents, and junior physicians to the rest of the world

"Connecting North American young doctors and trainees to the global Family Medicine community."

Today we are at a pivotal point – as we regroup to build a vibrant community and a sustainable structure.

CONNECTING WITH MEMBERS

This year, Polaris will be formally represented at:

FMX - AAFP National Conference for Students and Residents presentation on Careers in Global Health

YDM Webinar: Integrated Care After COVID - Equity.

AAFP Global Health Summit, -Panel on Equity in the eyes of young physicians globally.

WONCA World - YDM Preconference.



This year on World Family Doctors day we made a brief video.

NEWSLETTER

- Launched again this year as a quarterly Polaris Newsletter, after a brief hiatus.
- Each newsletter has a theme that aligns with the WONCA working parties and special interest groups in a North American context.
- Each newsletter includes a featured young family medicine doctor who is providing excellent primary care in their respective region.

HEALTH EQUITY

 Polaris members have been active in the Inaugural CGHI Health Equity Group within AAFP Polaris is leading a webinar on Integrated Care After COVID - Health Equity.

DECLARATION ON HEALTH EQUITY

- The Albuquerque Statement on Health Equity was created to outline our commitment to advancing health equity as new family physicians from North America.
- It will be presented at the Global health Summit in 2021.

ATTACHMENTS

• Declaration on health equity



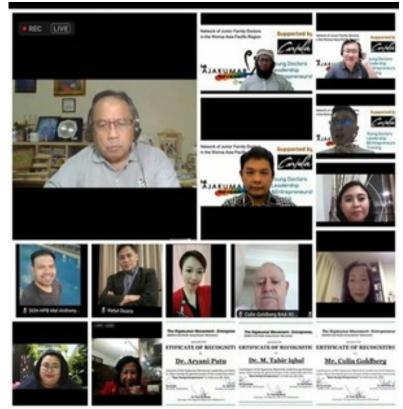
HE RAJAKUMAR MOVEMENT

The Rajakumar Movement closed 2nd batch of entrepreneurship training for young doctors. The best participants were Dr. Tahir Iqbal (Pakistan), Colin Goldberg (South Africa) and Dr. Aryani Putu (Indonesia). The closing ceremony was attended by Dr. M. Husni Jamal (Chair Elect of WONCA APR) as keynote speaker. We also had reguler meetings and participated in regional conventions and conferences, such as Phillippines Academy of Family Physicians (Dr. Erfen and Dr. Wong Ping Foo as speakers), Japan Primary Care Association (Dr. Loretta, Dr. Daisuke Kato and Dr .Erfen as speakers), Hongkong Primary Care Conference (Dr. Erfen as VIP participant). Dr. Loretta (Hongkong) and Dr. Chloe Lam Chan (Hongkong) are also helping Global YDM Webinars as translators from English into Mandarin.

We have chosen the winner of Young Doctor Rising Star 2021 in Asia Pacific Region: Dr. Noor Harzanah Harrun (Malaysia) who will compete in Global Young Doctors Rising Star. The judges were Dr. Naomi Harris (Australia), Dr. Erfen (Indonesia), and Dr. Wong Ping Foo (Malaysia).



TRM regular meeting



Closing ceremony of 2nd Batch of Entrepreneurship Training for young doctors





THE SPICE ROUTE STAR AWARD

In order to appreciate the efforts of young doctors in promoting Family Medicine, the Spice Route initiated The Spice Route Star Award. The winner of this award was Dr. Tula Krishna Gupta from Nepal who was nominated for the WONCA World Rising Star Award to be presented in WONCA World Conference 2021.



THE SPICE ROUTE CPD ACTIVITIES

Regular CPD activities for young doctors of their respective countries have been organized by Sri Lanka, India and Pakistan by the name of GPs' Café, Spice Route Classroom and The Lounge, respectively.



Dr. Tula Krishna Gupta

THE SPICE ROUTE WEBSITE

The Spice Route designed a website by the name of woncaspiceroute.org and was launched on 19th May (World Family Doctor Day).



COMMEMORATION OF IMPORTANT DAYS

The Spice Route commemorated some important days by circulating social media messages or videos benefiting the general public as well as family doctors. Some of the important messages circulated were, World Bicycle Day on 12th June by Bangladesh and World Blood Donor Day on 14th June by Bhutan.



VASCO DA GAMA MOVEMENT



THE BRIDGE PROJECT

Currently in its pilot phase, with the first round of this project starting in April 2021, this brings together mostly VdGM members, but also others, from around the world, forming groups to discuss. share and learn together. The aim is to create something after 6 months communicating and collaborating - the outcome is up to the group! We hope this project will be successful and will expand!

For **World Family Doctor Day 2021**, we joined in the campaign by WONCA, creating our own collage or Family Doctors building together! On the 27th of June we had a **Council meeting** to discuss some important topics for the future of our organisation. We also elected a new policy officer - Ana Cristina Franco Spinola, as well as appointing a new Good Governance Committee, and for the first time, a Finance Committee, that will support our treasurer in her work.

In July a number of us managed to meet face to face, with others joining online for our **hybrid pre-conference in Amsterdam**. This was a great experience with some fascinating workshops, very good learning and discussion. Our presence during the virtual WONCA Europe Conference following this was also strong! VdGM Guide - in 2020 the idea came about to create a guide to our organisation that is accessible. This has been completed and published on our website. It includes a 2-page which will summary be translated into all languages represented in VdGM. Find it here!

WONCA NEWS



Vasco da Gama Movement

VASCO DA GAMA MOVEMENT

VdGM Activity Report - this looks at our work since 2019; who we are, what we have been doing. Find it here!

Finally, we would also like to announce a few awards that were given during the WONCA Europe Conference 2021:

Marina Jotic Ivanovic - Fons Sips Achievement Outstanding Award. This is an award given every 2 years to a VdGM member who has inspired us. Someone who has worked hard both within the organisation as well as within clinical practice. Marina has been an inspiration and is truly deserving of this award! She will be put forward as VdGM's nominee for the WONCA Rising Star Award.

Peter Kurotschka Junior Researcher Award for a qualitative study on the experience of GPs across Italy during the early stages of the COVID pandemic with a thematic analysis.

Runners-up were Ebrahim Mulla looking at predicting frailty, and Aviel Nagar looking at a UTI diagnostic tool.

Joana Silva Guerra (went to Washington D.C.) and Eva Leceaga Gaztambide (went to Sri Lanka visiting different cities) -FM360 Exchanges Awards



We also awarded two VdGM Fund bursaries for attendance at pre-conference our in Amsterdam and Online toJonathan Brill (Israel) and Simonovska Sara (North Macedonia).



Marina Jotic Ivanovic, recipient of the Fons Sips Award 2021.



ΑΥΝΑΚΑΥ MOVEMENT



The resident and young family doctors in Latin America are still working in the pandemic stage. We believed this has been possible due the characteristic of the family medicine people, available always and enthusiastic.

Waynakay continues developing biweekly interview sessions where young Latin American family doctors can show the rest of the world what it is like to work in family and community medicine in each country. These interviews are broadcast live, on Friday afternoons / nights, through Waynakay Latin America's Facebook live. The interviews are led by Hernán Giacomelli, a young journalist from Argentina who, to date, has interviewed more than 13 people from at least 10 different countries, among which we can mention Mexico, Costa Rica, Panama. Uruguay, Brazil. Bolivia, Colombia, Argentina and Paraguay. We believe this is another way to share our vision of the speciality.

We are pleased to share that our next activities are related to the organization of the 7th Ibero-American Congress of Family Medicine of Wonca-Iberoamericana- CIMF as well as the Waynakay preconference and the nomination of one of our colleagues for the Rising Star Award from Wonca YDM.

For this nomination we created the "Apuchay Waynakay Award". Our Candidate for the Rising Star Award will be made known during the 7th Ibero-American Congress. Also in this regional conference, the new Boards of Directors of Waynakay will be elected to give the new generations the mission to keep moving forward.

During the last 4 months we had meetings with online the Directive Councilevery 2 months. Waynakay has also participated and contributed to the YDM Global webinars and it was thanks to these wonderful activities that we were able to establish new relationships with the rest of the world.

We worked together with the Al Razi Movement, for the WONCA YDM webinar session under the topic : Family Medicine Identity: Practice Diversity in and Perspectives across the world, and on July 25th we participated with Polaris movement of young doctors. For almost all webinars we shared and provided support for the simultaneous translation of these webinars from English to Spanish.



FEATURED DOCTOR GABRIELA DI CROCE (ARGENTINA)

DOCTOR

WHAT WORK TO DO NOW?

I currently work for a medical care institution run by the Worker's Union in the Metropolitan Area of Buenos Aires Province in Argentina. My tasks involve the medical management of two centres of this institution, which is a task that I have been developing for five months since I returned to my home province.

It has been a great challenge, a new activity for me but very gratifying and enriching. It's not an easy assignment, since around 50 or 60 people among doctors and other staff depend on my work.



I am also trying to set up my private practice, which is one of my biggest illusions. However, it advances slowly due to the multiple contingencies that we have to undergo. Furthermore, I dedicate my spare time to another essential and meaningful job such as the Regional Coordination of Waynakay Movement Latin America and participation in the local Association of Family Medicine.

TELL US ABOUT YOUR EXPERIENCE AS A FAMILY DOCTOR?

My relationship with family medicine is the reverse of most colleagues. I graduated from the Faculty of Medicine without understanding what being a family doctor really meant.

However, I was lucky enough to be able to travel to the north of Argentina to perform a mandatory internship after getting my MD degree.

FEATURED DOCTOR

To develop this activity, I had chosen the rural area. I learned there the true meaning of being a family doctor. The essential skills and knowledge you need, but above all, the immense range of possibilities to connect with your team and community in a way I could have never imagined; travelling long distances to visit patients, among other things.

It was deep love, a process of intense deconstruction, with an unexpected result but that I would choose again. Since then, I have travelled many areas of Argentina, working, learning and building this endless universe.

WHAT OTHER RELEVANT ACTIVITIES HAVE YOU PARTICIPATED IN?

During my student years, I was a teacher of internal medicine for four years. After finishing my studies, I returned to the north of Argentina, where I spent 18 months in charge of a rural primary care centre, with deep participation in community activities.

Then, after a brief period in Buenos Aires, I travelled to Mendoza (Argentina), where I was trained as a family doctor. During this period, I got to know the "Argentine Federation of Family Doctors", Wonca Iberoamericana-Cimf, WONCA and the YDM.

Little by little, I began to get involved in different tasks going from the local coordination of Waynakay Argentina to the Regional Coordination of Waynakay Latin America, and today, I integrate the Executive Committee of CIMF.

I have also been an active member of the local Societies of Family Medicine, involved in their Directive Committees, and in multiple CIMF-Wonca Special Interest Groups (SIGs), especially Quaternary Prevention. In my personal life, I like to enjoy my family; spend time with my partner and my children. Being a mother, a doctor, a young woman in a region like Latin America is not easy at all. On the contrary, It could be very challenging.

I have some very diverse personal interests, but if I had to choose one, it would be touring America, learning from the ancestral knowledge of our original cultures and, why not, a bit of its worldview and its way of understanding the world.

WHAT ARE YOUR INTERESTS AT WORK AND IN PRIVATE?

It may sound somehow simple, but the main interest of my work is to make medicine fundamentally "harmless" every day.

I want to help to contribute to people's health with my small contributions, from a place of respect, empathy and always ruled by equity. I cannot think of myself functioning otherwise within this profession. FEATURED

WONCA UPDATES

JOIN THE FM PIVOT INITIATIVE BY THE BESROUR CENTRE FOR GLOBAL FAMILY MEDICINE.

The Besrour Centre for Global Family Medicine is excited to announce the FM Pivot learning module "Finding Great Research Questions in Pandemics and Other Crises: An introduction for family medicine researchers" is now available at www.fmpivot.ca.

The online module aims to apply global experience from the COVID-19 pandemic to build research skills and capacity amongst community-based family doctors and trainees.

Start this learning module <u>here</u>.



WELCOME TO FM PIVOT!

Ready to get Started?

XXII CHILEAN FAMILY MEDICINE CONFERENCE

SCIENTIFIC SOCIETY OF FAMILY AND GENERAL MEDICINE OF CHILE

The Scientific Society of Family and General Medicine of Chile (Sociedad Chilena de Medicina Familiar) invites you to the XXII Chilean Family Medicine Conference, fully online (in Spanish), with the theme "Construyendo Salud en Sociedad" (Building health in Society).

30th September - 2th October 2021. Register here.



W O N C A U P D A T E S

UPDATES



ONLINE MASTER OF SCIENCE IN MEDICAL EDUCATION

WARWICK UNIVERSITY

Find out more about an amazing new Online Master of Science in Medical Education! An exciting collaboration between Warwick University, UK & iheed, Ireland -a specialist e-learning team. supported by members of the WONCA working party in Education and designed for busy clinicians.

Find more information <u>here</u>.

DISCOVER THE HEALTH SERVICES LEARNING HUB

WORLD HEALTH ORGANIZAITION

The WHO Health Services Learning is a knowledge platform that aims to drive cross-country learning on maintaining essential health services during the COVID19 pandemic & throughout the post-pandemic recovery phase.

The HLH supports implementation of WHO's operational guidance on maintaining essential health services.

Find more information here.



