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FROM THE WONCA PRESIDENT:

CHANGE IS IN THE AIR

With a global financial and economic crisis touching virtually every corner of the world, ‘change’ is the order of the day. A period of intensive change is also in store for Wonca. In the last decade, Wonca has seen an unprecedented membership growth that currently brings together 119 organizations from more than 100 countries. This growth in membership coincided in most of these countries with health care delivery and financing changes enhancing primary care. This is, in itself, an objective measure of Wonca's extraordinary success as an effective and increasingly diverse, global and regional academic-political organization of primary care and family medicine. Indeed, Wonca has traveled a long way from its birth in 1972 as a 13-member Anglo-Saxon organization. But no success is without its shadows, and therein resides a compelling and urgent need to address Wonca's structure and objective potential to continue to provide effective global leadership for primary care.

There are three aspects of change to address. The first concerns the Wonca structure and organization that consists of a professional staff of three. Wonca owes a great deal of its success to the dedication of this threesome - Chief Executive Officer Dr. Alfred Loh, Administrative Manager Yvonne Chung and Accounts Executive Gillian Tan – but what may have been an attractive ‘lean and mean’ human resources structure is becoming an increasing source of vulnerability. Together with the limited financial resources, this human resources shortage hampers Wonca's presence and participation in the World stage. Earlier this year, under the leadership of President-Elect Rich Roberts, the GROW project was started to address this challenge. I refer you for more details to the CEO's column in the February issue of Wonca News.

The second aspect of change is the need to bring into the Wonca leadership a better representation of the global representation that is Wonca's strength. ‘Equity’, ‘Gender’ and ‘region’ are the key words in this respect. Capitalizing on the HER statement of the Working Party of Women and Family Medicine, the Wonca Executive has prepared bylaw changes to be tabled at the 2010 Cancun Council, that will address this. To be able to care for the health of people of the world, it is essential to bring together the very best in primary care and family medicine that Wonca has to offer.

The third aspect to be addressed captures the first two challenges and has to do with how Wonca puts its mission into concrete actions. Back in 1972, getting primary care going was a general point and this made the Wonca actions fairly universal: advocating primary care, developing an academic infrastructure of national Colleges and Academies, and building a teaching, training and research agenda. This has resulted in thriving development of family medicine in a large number of countries. As a consequence, there is an increasing variability, from country to country and region-to-region, of what Wonca has to offer. Professional and patient advocacy and primary care practice, research and academic infrastructure development are still of the utmost importance in many parts of the world. But at the same time, the needs of developed primary care systems should not be ignored. For too long, Wonca has presented its model to others as ‘one size fits all’. It is time to diversify in order to be true to Wonca's universal mission of better health for people through primary care. With some urgency, Wonca and its member organizations should address what are the needs and opportunities under ‘developed’ primary care conditions.

To where does change lead if we are to secure a future in which people's health needs are met by a health care system that is timely, effective, efficient and safe? In my view, ‘research’ and ‘health informatics’ present two priorities to equip and strengthen Wonca and its member organizations for the journey ahead.

The Wonca Cancun 2010 World Council will be a timely and critical venue for these discussions. I am looking forward to it.

Professor Chris van Weel
President of Wonca

Wonca has moved to a new address

World Organization of Family Doctors (Wonca)
7500A Beach Road #12-303
The Plaza Singapore 199591
Tel 65 6224 2886  Fax 65 6324 2029
Email admin@wonca.com.sg
FROM THE CEO’S DESK:

WORKING WITH INDUSTRY

In the past five years, it has been my practice as the Wonca CEO to make visits to the various head-offices of the pharmaceutical multinational companies in Europe and the United States sometime in the first quarter of each year.

The purposes of these visits have been primarily:
1. To consolidate and re-establish good working relationships with the various key personalities in these companies and also acquaint myself with the new officials appointed during the year.
2. To acquaint these multinational companies with the various new programs and collaborations that Wonca has with other medical Non-Governmental Organizations (NGOs) and the World Health Organization. To explore opportunities for collaboration between our two organizations to ensure the success of these various programs.
3. To create awareness of the various Wonca regional and world conferences taking place in the year or two ahead and to help secure sponsorship support for these in connection with the conference proper, scientific tracts, satellite symposia and sale of exhibition booths.
4. To learn for myself the many physician and patient advocacy programs that these multinationals introduce each year as part of their contribution to improving global health and healthcare. To explore how Wonca as the global organization representing family doctors may be involved.
5. To secure support for the continued running and maintenance of the Wonca Website (www.GlobalfamilyDoctor.com) and the bimonthly publication of Wonca News by way of the Wonca Global Sponsorship. This is a very important aspect of the annual visits that I make.

Over these past five years since the launch of the Wonca Website, we have seen a significant growth of the website. The latest figures monitored on visits to the site have also shown that there has been gradual and a definite increase also in the spread of countries whose family doctors use the website. In fact, it is no exaggeration to say that the Wonca Website has now become the “face” of Wonca to the world. Plans are underway by the Wonca Publications and Communications Committee to further improve the website and its contents to increase its impact and reach to global family doctors in their continuing professional education. Continued support from industry for the website is vital if Wonca is to succeed in this endeavor, again underscoring the importance of these visits.

Besides familiarizing industry with the various activities and objectives of Wonca, it is equally important that Wonca gets to know how industry in turn views the global family medicine organization and its global mission and objective. It is also important that Wonca understands how industry thinks it can work with our world organization on programs to better the health of the peoples of the world. There are those who only view the relationship between any medical NGOs and the pharmaceutical industry as a one-sided affair with industry having more to gain than the NGO. I would like to differ from this view after my experiences of working with industry for these past many years. Some of the larger multinational pharmaceutical companies have very good and well thought out physician and patient advocacy initiatives or programs consistent with Wonca’s mission and objectives and with no product links or promotion intended. Wonca seeks out these areas of collaboration with industry.

In summary, Wonca regularly updates itself on the well-meaning initiatives and programs of industry that will benefit especially the patients and to also learn how best to collaborate with industry to achieve these common goals. It is equally important for Wonca to understand how industry views Wonca’s objectives and mission and desires to collaborate with Wonca to achieve them.

To this end, in this issue of Wonca News, we have started a series of interviews with key persons in industry with whom Wonca has had working relations. A fixed set of questions will be posed to each of them and the answers will be featured in upcoming issues of Wonca News.

The five questions posed in the interviews to these key persons representing their respective multinational pharmaceutical companies are:
1. How does your company see the future of family doctors and primary care in medical care globally?
2. What are your company’s specific goals and programs as they relate to working with family doctors globally?
3. As a Wonca Global Sponsor, how do you see family doctor organizations working with your global and national colleagues?
4. What are the possible common areas of interest (medical related or otherwise) that your company and Wonca may collaborate on in the next three years?
From the Editor:

Make Your Plans Now to Attend WONCA's Conferences!

Do not wait to finalize your travel plans to attend our WONCA's World and Regional Conferences taking place in the upcoming year and leading up to the 19th WONCA World Conference in Cancun, Mexico from May 23-26, 2010. All of these enchanting venues provide incredible networking opportunities and access to state-of-the-art knowledge and tools for the family doctor. These meetings are featured in this April issue of WONCA News with links for additional information.

The back cover of the February 2009 issue of WONCA News shows the beautiful coastline of San Juan Puerto Rico, site of the 2nd WONCA Iberoamerica Regional Conference taking place April 23-26. This meeting will educate and delight the delegate with the rich history, tradition and dynamic new developments in our Iberoamericana region.

In June, you have the opportunity to attend the WONCA Asia Pacific Regional Conference at the Hong Kong Convention and Exhibition Centre from 4th to 7th June, 2009. The conference theme, “Building Bridges”, is a metaphor for the family doctor’s pivotal role as care coordinator and your opportunity to make new friends and renew old contacts in this dynamic part of our world.

You may also attend the 9th WONCA Rural Health World Conference in Crete on June 12-14, 2009, hosted by the Clinic of Social and Family Medicine, Medical Faculty, University of Crete, Greece in conjunction with the practice-based research rural network of Crete and the Europe (EURIPA). The WONCA World Rural Health Conferences always attract a devoted global following of family doctors with amazing stories and valuable lessons from their individual rural and isolated community practices.

In the fall, you have the wonderful opportunity to travel to picturesque Basel, Switzerland, for the 15th WONCA Europe Regional Conference to be held from September 16-19, 2009, featured on the back cover of this issue. The WONCA Europe Region has a long tradition of bringing together some of the largest gatherings of family doctors from across Europe and around the world.

You also have unique opportunity to attend the 2nd WONCA Africa Regional Conference in Rustenberg, South Africa from October 25-28, 2009. Among its relevant themes, the conference will highlight the role of the family doctor in the African context of cultural diversity, values, traditional beliefs, and community-oriented primary care.

While you experience the joy of attending one or more of these WONCA sponsored world and regional conferences, now is a good time to plan to be part of the 19th WONCA World Conference of Family Doctors in Cancun, Mexico, from May 19-23, 2010. More than 5,000 of our international colleagues are expected in Cancun for this once every three years global gathering. Having been blessed to be able to attend the last six triennial World Conferences, I can tell you with all confidence that you do not want to miss it!!

Marc L. Rivo, M.D., M.P.H.
Editor, WONCA News
marcrivo@aol.com
4566 Prairie Avenue
Miami Beach, FL 33140 USA
1-305-674-8839 (fax)
FEATURE STORIES

EARLY REGISTRATION DEADLINE FOR 9TH WONCA WORLD RURAL HEALTH CONFERENCE IN CRETE

Register by April 27, 2009, and save on registration fees for the 9th Wonca Rural Health World Conference. As President of the Host Organizing Committee, I welcome you to Crete on June 12-14, 2009 for this major event hosted by the Clinic of Social and Family Medicine, Medical Faculty, University of Crete, Greece in conjunction with the practice-based research rural network of Crete and EURIPA.

Human genomics and genetics are frequently main themes of several international meetings and other events, since this field is promising rapid technical advancement. During the past few years, the topic of health inequalities offers a suitable theme to develop interprofessional, interdisciplinary and intersectoral collaboration, an issue of high importance in recent meetings and conferences, especially those addressing rural health.

This umbrella theme covers the three core subjects of the 9th Wonca World Conference: technology suitable for rural settings, island medicine and health services for immigrants. All three subjects are strongly related with the umbrella theme. WHO has undertaken certain important initiatives endorsing health inequalities as one of the main challenges for our contemporary world. This theme also opens an important dialogue on positive health determinants. Today, it is known that traditional epidemiology and risk factor analysis do not provide sufficient evidence on chronic morbidity, leaving large room for discovery of certain hidden supportive, protective and promoting factors for population health, including the capacity for social inclusion and quality of social networks. High mobilization of people in Europe and across the world, together with high unemployment rates and poverty increase anxiety and reduce the sense of control. Strengthening rural communities in remote areas and small islands and empowering immigrants seem to be a high priority and well fitted within the core subjects of a rural conference. The discussion about assets for health and development has recently received prompt attention by the World Health Organization, while certain universities and research institutes foster inter-professional collaboration and dialogue.

The conference’s theme is of key importance for community leaders who could contribute in identifying and strengthening existing health assets and explore pathways for maintenance and change. The introduction of high technology suitable for rural settings comes timely and it is expected to attract the interest not only of rural practitioners but researchers and investigators from other sectors. Thus, it was a challenge for the Clinic of Social and Family Medicine, Medical Faculty University of Crete to focus on health inequalities in this World Rural Conference.

The island of Crete was chosen as a place with significant contribution to the early history of European civilization and a unique epicenter where knowledge developed as a result of Crete's proximity and interface with both Asia and North Africa. Moreover, the city of Heraklion offers an ideal location with perfect climate in early June, friendly atmosphere, famous Mediterranean gastronomy and easy access from most European destinations.

Please visit our website at www.ruralwonca2009.org to obtain additional conference information and to register. We sincerely thank you for making plans to attend this World Rural Health Conference.

Christos Lionis, MD, PhD
Associate Professor of Social and Family Medicine
Head of the Clinic of Social and Family Medicine
University of Crete

PFIZER, FAMILY DOCTORS AND IMPROVING HEALTH

Pfizer is inspired by a single goal: improving health. That’s why Pfizer discovers and develops new, safe medicines to prevent and treat serious diseases, and makes them available to the people who need them. Pfizer believes that from progress comes hope and the promise of a healthier world.

In order to better get to know one of our long-term global sponsors, we asked the following questions to Pfizer.

1) How does Pfizer see the future of family doctors and primary care in medical care?

Family doctors are the cornerstone of providing medical care to our societies.

Primary care physicians play a key role in coordinating care and in helping patients understand health risks and disease management, and appropriately benefiting from health care offerings. Family doctors will play an increasingly important role in educating patients about healthy lifestyles, the key to disease prevention. Finally, in resource-poor countries, family doctors will be in the
forefront in expanding the availability of medical care as countries seek to improve their standards of living and healthcare.

2) What are Pfizer’s specific goals and programs as they relate to working with family doctors?

Pfizer’s over-riding goal is to focus on providing safe, effective and affordable medications to improve the lives of patients. There are two key components involved in this: discovering and developing new medications, and providing information, education and resources for the appropriate use of medications in physician’s practices. Pfizer’s research focuses on unmet medical needs, in a broad range of therapeutic areas including diseases managed by primary care physicians, such as arthritis, asthma, and diabetes. With regard to clinical studies, it is Pfizer policy to sponsor, throughout the world, only high quality clinical research that follows accepted ethical, scientific, and clinical standards. Specifically, all Pfizer sponsored clinical studies are conducted in accordance with local laws and regulations, as well as relevant international standards such as the International Conference of Harmonization (ICH) Good Clinical Practices (GCP) Guidelines. As your partner in providing health care solutions to patients, Pfizer brings you the evidence and knowledge needed to optimize your patient care and manage your practice. Through PfizerPro.com, a Web site designed especially for family doctors and other health care providers, we offer access to product information, patient education materials, professional resources, medical information, and much more.

3) As a Wonca Global sponsor, how do you see family doctor organizations working with your global and national Pfizer colleagues?

As clinical research is vital to the development of new medicines, we would welcome the participation of primary care physicians as investigators in clinical studies, to make their patients aware of clinical trials in which they may be able to participate. Additionally, promoting healthy lifestyles, as in smoking cessation, is an important area for collaboration. Finally, interactions with product representatives to learn about effective use of Pfizer medicines are an ongoing area for our colleagues and can reduce the time from availability of new improved medication and patient access to these medications.

4) What are the possible common areas of interest (medical related or otherwise) that Pfizer and Wonca may collaborate on in the next three years?

In addition to those areas mentioned above, there are other areas of common interest that offer potential for collaboration. First, understanding and properly using evidence-based medicine in clinical practice is an important area.

Second, combating counterfeit medicines is a vitally important concern for patients and physicians, even more so than for Pfizer. Counterfeit medicines can have potentially life-threatening consequences, and all members of the healthcare community have a responsibility to control and eliminate their use.

Last, managing patients in an increased complex health care environment poses significant ethical issues in developed as well as in developing countries. We believe that everybody has to work together to ensure equity and equality, patient safety and human rights and we see a partnership between Pfizer and primary care as essential.

5) Do you see mental health and primary care and primary care research as topics of interest to Pfizer?

These are all important areas. Our commitments to primary care and research in this area are clearly stated. Additionally, we believe that mental and physical health and wellbeing have equal importance.

Soren Rasmussen, MD, MSc
Soeren.Rasmussen@pfizer.com

WONCA REGIONAL NEWS

WONCA ASIA PACIFIC REGION TO MEET IN HONG KONG

We are pleased to announce that The Hong Kong College of Family Physicians is organizing the WONCA Asia Pacific Regional Conference at the Hong Kong Convention and Exhibition Centre from 4th to 7th June, 2009. We are pleased to announce that the early bird registration deadline is extended to 30 April, 2009. This would be a golden opportunity to join this conference and enjoy a special offer.

The main theme of the conference is “Building Bridges”. A pivotal role of the family doctor is to serve as the coordinator of patient disease. The family doctor has to create communication channels or bridges between sectors of the health care team. This role is reflected in the theme of the conference.

We have chosen three main topics to elaborate on this theme, namely infectious disease, mental health and the care of the elderly. Renowned speakers from local and overseas are invited to review with us the
cutting edge medical developments. Local and overseas researchers will also present their works. In addition, there will be practical workshops for participants to update their hands-on clinical skills.

I would like to extend my warm invitation to you to the Wonca Conference and explore this exciting city. We are most happy to provided detail information from the Conference Website at http://www.wonca2009.org/Wonca News February 2009.doc and 2nd announcement at http://www.wonca2009.org/download/2nd_announcement_v4c.pdf for your easy reference.

We look forward to your support to make this world-class congress most successful.

Please do not hesitate to contact our Conference Secretarat at +852 2735 8118 or by email: enquiry@wonca2009.org.

Dr Andrew Ip Chairman, Wonca APR 2009 Host Organizing Committee President, The Hong Kong College of Family Physicians

Dr John Chung Co-Chairman Wonca APR 2009 Host Organizing Committee

WONCA EUROPE TO GATHER IN BASEL, SWITZERLAND

Wonca Europe and the Swiss Society of General Medicine (SSMG/SGAM) will be pleased to welcome you to the 15th Wonca Europe Conference 2009 in Basel, Switzerland which will be held together with the 32nd national SSMG/SGAM Congress.

It is a great pleasure and honour for the SSMG/SGAM to organize this very important European conference in Switzerland for the first time in its history.

We promise you a very exciting conference to the theme of “The Fascination of Complexity – Dealing with Individuals in a Field of Uncertainty”. A deep understanding of complexity and a virtuous handling of uncertainty are very important competencies in the daily practice of family doctors.

The conference will highlight topics related to teaching, research, and quality in family medicine and the daily practice of family doctors. A substantial number of presentations will match the main topic of complexity and uncertainty. We invite you all to present your research and teaching activities and to discuss specific items out of your daily practices and health systems. We are looking forward to your abstract submissions.

And do not forget Basel and its surrounding countryside, either! Switzerland with its rich culture, its famous mountains and its marvelous cities is well worth the visit! Additional information about the sites and attractions of this lovely part of Switzerland and the Wonca Europe conference can be found at www.wonca2009.org

The Swiss family doctors will be pleased to welcome you all to the Wonca Europe Conference 2009 in Basel, the very highly regarded annual reunion of family doctors of Europe and beyond.

Bruno Kissling President of the Organizing Committee

Peter Tschudi President of the Scientific Committee

Lilli Herzig Co-President of the Scientific Committee

Carlos-Fernando Munoz President of the SSMG/SGAM

Hansueli Späth Past President of the Swiss Society of General Medicine

François Héritier President of the Swiss Society of General Medicine

2ND AFRICAN REGIONAL CONFERENCE TO BE HELD IN SOUTH AFRICA

The 2nd Wonca Africa Conference will be held in Rustenburg Civic Centre in South Africa, from October 25 - 28, 2009. The conference will focus on the following major themes: 1) The African context: culture and diversity in health, values, traditional beliefs, family, generalists, connecting, and leadership; 2) Primary Health Care and Family Medicine – relationship, equity/advocacy, intersectoral work, and community-oriented primary care; 3) Training: the development of Training Complexes, and the context of training; 4) How to be “change agents” to improve quality of care; and 5) Teamwork and networking.

Abstract submissions will be accepted until 30th April, 2008. Prizes will be awarded at the end of the conference for the best paper and the best poster as judged by a panel to be appointed by the Scientific Programme Committee. In addition, in order to encourage presentations from important groups within family practice/ primary care, prizes will be presented in each of the following categories: best postgraduate student presentation; best undergraduate student presentation; best Primary Health
Care nurse presentation. These may be for papers or posters.

Rustenburg is one of the fastest growing cities of South Africa. It lies 115 km north of Johannesburg and situated at the foot of the Magaliesberg mountain range in the North West Province of South Africa. The area is rich in wildlife and many exotic scenic exhibitions. The city of Rustenburg is a short drive away from Johannesburg and Pretoria (Tshwane). The Rustenburg weather is mainly pleasant during the daytime but cold at night. Rustenburg boasts of beautiful and luxurious Rustenburg hotels, B&B (bed and breakfasts) and guest houses.

There are various inclusive destinations in Rustenburg which visitors must see. One such destination is Kgawane Game Reserve, which offers a unique experience in wilderness areas of North West Province. Sun City (50 km away) and Rustenburg Natural Reserve are also popular Rustenburg destinations. Sun City is a world famous resort that is located near to Rustenburg, offering four top class hotels, two 18-hole golf courses, a man-made beach, an entertainment centre, casinos and much more.

One of the best ways to Rustenburg is through bus with Translux (www.translux) and Greyhound (www.greyhound.co.za) offering connections to major South African Cities. Also, all the major Rustenburg car hire companies are well represented in all major cities and at the OR Tambo Johannesburg airport. The conference will arrange airport shuttle with one local car hire company at extra cost to delegates interested in utilizing their service (details can be obtained from saafp@netactive.co.za)

To obtain additional conference information, to register and to learn more about the abstract submission process, please visit www.woncafrica2009.org.

Professor Khaya Mfenyana President, Wonca Africa Region

HEALTH AND HEALTH SYSTEM NEWS

INTERNATIONAL HEALTHCARE REFORM EXPERTS MEET IN HONG KONG

The Bauhinia Foundation Research Centre, a leading policy research think-tank in Hong Kong, organized an international healthcare reform conference in Hong Kong on 17 January 2009.

At a time when Hong Kong was contemplating initiatives to reform its healthcare system to enhance accessibility, sustainability and quality, the Conference brought together 400 top healthcare officials, world-renowned healthcare policy experts, academics and stakeholders from around the world to share insights and experience.

Amongst the speakers and discussants were Professor Chris van Weel, Wonca President, World; Dr Donald Li, Wonca President, Asia Pacific Region; Secretary Gao Qiang of the Ministry of Health of China; Dr York Chow, Secretary for Food and Health of the Hong Kong SAR Government; Professor Sian Griffiths of Chinese University of Hong Kong; Professor Nicholas Mays of London School of Hygiene and Tropical Medicine and Dr Tang Shenglang, WHO (China Office).

Apart from healthcare financing, a substantial part of the discussions focused on the key issues relating to the promotion and development of primary care, and the guiding principles and perspectives of Wonca were highlighted at the Conference.

Addressing the Conference, Professor Chris van Weel emphasized the important role of primary care and family physicians in serving the health needs of the global populations. This is evidenced by the fact that family practice deals with most acute and chronic illnesses, while the hospital sector only accounts for a minority of cases.

In meeting the rising healthcare challenges, Professor Chris van Weel called for the integration of prevention and care; he also highlighted the need for family medicine to provide evidence-based, high quality care for patients and communities with teaching and research.

University centres and practice-based research networks, he said,
facilitate the transfer of innovation into the realm of patient care. But the experience of family physicians is important, and so are experiential knowledge and skills. Professor Chris van Weel said patient-centred care, continuity of care and care in the context of the family and social environment would strengthen the evidence base for family medicine and make family medicine more responsive to individual patients’ needs.

Dr. Donald Li chaired 2 discussion sessions with Professor Chris Van Weel joining him in healthcare systems, primary care and healthcare reform. The other discussion session was on healthcare finance options.

WHO DIRECTOR GENERAL: ECONOMIC DOWNTURN IMPACTS HEALTH

On April 1, 2009, the WHO Director General Margaret Chan issue a public statement on the health and health care impact of the global financial crisis. This is an excerpt of the full statement, which may be found with additional related information at www.who.int/mediacentre/news/statements/2009/financial_crisis_20090401/en/index.html

The [financial] crisis is now truly global. It strikes at a critical time for health in all parts of the world. In low-income countries, the impact of the crisis is being felt through reduced demand for exports, tighter access to capital, less foreign direct investment and falling remittances. Consequent unemployment too often comes with no protective safety net. As incomes fall, public sector services become the more favoured source of health care at the very time that government revenues to finance them are under greatest pressure. Information is still patchy, but we know that at least seven ministries of health in Africa - including some of the poorest - have already been notified that the budget for health will be cut as the result of the crisis. Others anxiously await the next budget cycle.

When local currencies are devalued the cost of imports rises. Essential life saving medicines may become either unavailable or unaffordable. We know that costs of medicines rose in previous crises - we are already seeing the same effect again as prices rise, not just in Africa but in Europe and Central Asia (up to 30%). The potential impact extends beyond the individual and family to societies as a whole. Governments have made commitments to keep people living with AIDS on treatment. We have to take the steps needed to ensure that these promises can be upheld. Drug prices are rising in some of the countries affected by drug-resistant TB. Failure to contain this threat to public health has consequences well beyond national borders.

Many high-income countries with ageing populations have been positioning themselves for anticipated increases in spending on health and pensions. Several are in the process of undertaking complex and politically challenging reforms. We must be concerned when we see evidence that plans to set aside resources and create the fiscal space to address the future health needs of the elderly are being shelved as the crisis deepens.

Health is a global concern. It is a vital investment in economic development and poverty reduction. It is central to the achievement of the Millennium Development Goals. Access to health care is a fundamental entitlement and responsibility of governments the world over. Reducing exclusion, extending universal benefits and protecting people from impoverishment are common elements of a growing number of national health policies. Managing expectations and containing spiraling health care costs is critical to the continuing solvency of many economies in the industrialized world. Maintaining the integrity of systems that protect us from cross-border health threats, that detect and respond to outbreaks, pandemics and emerging diseases is of concern to all nations. Progress in one direction depends on all the others. We compromise on any one of these elements at our collective peril.

A global crisis requires global solidarity and actions. Maintaining levels of health and other social expenditures is critical to protect life and livelihood and to boost productivity.

The impact of the crisis will vary country by country, but to sustain levels of health there is a growing consensus as to what needs to be done. We need good quality real-time information to guide the response; we need to be able to identify groups most at risk; to ensure that safety net programmes are well targeted so they reach the most needy; to seek efficiencies in spending where possible; to recognize that crises often offer opportunities for reform; to sustain spending on prevention (which is often the first casualty of spending cuts); and where external aid is required to ensure it is as effective as possible.

People are the ultimate target of economic recovery. WHO's concern is people's health, but health is dependent on many factors: employment, shelter, nutrition, education. In some countries, economic stimulus packages target people's health directly (through reducing health insurance payments, or building less number of clinics). But a well-planned infrastructure programme will have multiple benefits: rural roads increase access to markets, boost farmers' income, and reduce maternal mortality. Assistance to micro finance schemes helps keep children in schools, empowers women, and boosts the
long-term health prospects of their families.

I would argue that a truly global approach to economic recovery, which puts peoples’ lives and livelihoods at its centre, will mean that we could emerge with systems that are stronger, more efficient and more equitable than those that are currently under such serious threat.

MEMBER AND ORGANIZATIONAL NEWS

19TH WONCA WORLD CONFERENCE IN CANCEUN, MEXICO MAY 2010

On behalf of the Host Organizing Committee of the 19th Wonca World Conference of Family Doctors (Wonca Cancun 2010), I have the great pleasure of inviting you to join us and more than 5,000 of our international colleagues in Cancun, Mexico, from May 19-23, 2010. Give us the opportunity to share with you our culture as well as our hospitality.

Through Wonca Cancun 2010 we will analyze issues related with the technical and social role of Family Doctors in the achievement of the main international goals proposed during the 2000 Millennium Summit, the Millennium Development Goals (MDGs). We also will continue the Wonca tradition of distributing cutting edge technology, promoting global calls to action and announcing practical applications of the latest medical progress.

The Scientific Program for the Wonca Cancun 2010 will be structured around the MDGs most strongly linked to Family Medicine, and will respond also to Wonca Goals and scientific needs from the seven Wonca geographical regions.

The Plenary Sessions will include leaders of the UnitedNations health organizations as well as representatives of other international organizations. The Program will also include a variety of activities oriented to increase and strengthen the knowledge and skills of all the potential participants: free standing papers, workshops, symposiums, poster presentations, and academic activities with Wonca Working Parties, Task Forces and Special Interest Groups.

The 19th Wonca world conference, the first ever organized in a Latin American country, promises to be a very stimulating international event with delegates coming from all Wonca regions. Wonca Cancun 2010 will provide the opportunity to bring together experts in family medicine and primary care from all over the world to exchange ideas, information and the most up to date findings allowing us to enhance family health across diverse cultures.

And for the delegates and their families the possibilities for entertainment, adventure and contact with history and nature are endless. Cancun truly has it all.

For more information and to register, please visit us at: www.wonca2010cancun.com/

We look forward to seeing you at Wonca Cancun 2010!

Dr. Javier Dominguez del Olmo
Honorary Chairman
Host Organizing Committee
Wonca Cancun 2010

NOMINATIONS FOR WONCA AWARD OF EXCELLENCE IN HEALTH CARE: THE “5-STAR DOCTOR”

Nominations are called for the Wonca Award of Excellence in Health Care, otherwise known as “The 5-Star Doctor” at the Wonca Regional level.

This is an award to be conferred on physicians, who in the opinion of the Council, have made a significant impact on the health of individual and communities, through personal contributions to health care and the profession. It is instituted in an attempt to increase the global development of Family Medicine, global networking and partnership. The award is preferably given to those who are still active in the field for which they are nominated. Nominations are not limited to Wonca members.

The award will be offered on a Regional basis and on a Global basis. The Regional Awards may be awarded on an annual basis and the Global Award be awarded every third year (i.e in the year of the Wonca World Conference). The Global award will take the form of a crystal trophy and a certificate.

Suitably motivated and validated nominations for Regional Awards should be submitted to the Chairman of the Nominating and Awards Committee and to the appropriate Regional President for regional consideration. The Global Award will be chosen from the recipients of Regional Awards for that triennium.
The criteria for the Wonca Regional Five Star Doctor Award are:

1. A nominee must have the attributes of the 5-Star Doctor (see below).

2. A nominee should be a serving physician in mid-career who in addition to providing regular service:
   - provides innovative services to a community or special group
   - developed services where they were previously not available
   - supports colleagues in another region, country or college and also performs academic work (teaching, research, quality assurance) of exceptional quality and relevance

3. A nominee can work outside his or her region, or create something that can be used outside his or her region or serve as a role model to other regions

4. The attributes of the 5-star doctor are:

   * a care provider who considers the patient as an integral part of a family and the community and provides a high standard of clinical care (excluding or diagnosing serious illness and injury, managing chronic disease and disability and provides personalised preventive care whilst building a trusting patient- doctor relationship
   * a decision maker, who chooses which technologies to apply ethically and cost-effectively while enhancing the care that he or she provides;
   * a communicator, who is able to promote healthy life-styles by emphatic explanation, thereby empowering individuals and groups to enhance and protect their health;
   * a community leader, who has won the trust of the people among whom he or she works, who can reconcile individual and community health requirements and initiate action on behalf of the community;
   * a team member, who can work harmoniously with individuals and organisations, within and outside the health care system, to meet his or her patients and community's needs.

Contact details:
Professor Rich Roberts
Chair, Wonca Nominating and Awards Committee
Email admin@wonca.com.sg

Regional Presidents:
Wonca Africa, Prof Khaya Mfenyana;
kmfenyana@wsu.ac.za

Wonca Asia Pacific:
Dr Donald Li; dr2318@hotmail.com

Wonca Europe:
Prof Igor Svab; igor.svab@mf.uni-lj.si

Wonca Iberoamericana-CIMF:
Prof Adolfo Rubinstein;
adolfo.rubinstein@hospitalitaliano.org.ar

Wonca North America:
Prof Alain Montegut; Alain.Montegut@bmc.org

Wonca Middle East South Asia (MESA):
Preethi Wijegoonewardene; drpreethiw@gmail.com

REMEMBERING ISAAC TANNENBAUM: FAMILY MEDICINE PIONEER IN CANADA

The one-year anniversary approaches of the death of one of the leaders in developing the specialty of family medicine in Montreal, Quebec and across Canada. Isaac (Issie) Tannenbaum was born in Lvov, Poland, but grew up in Montreal, attended McGill University, received his medical degree in 1944, completed a one-year residency in New Jersey and worked a short while as a general practitioner in rural Saskatchewan. In 1947, he returned to Montreal where he practiced until his retirement in 1995.

He won great admiration and respect from his peers when he opened in 1969 a 2-year residency program at the Jewish General Hospital (JGH) in Montreal and based upon the standards of the College of Family Physicians of Canada. He later became Chief of the JGH’s Herzl Family Practice Center. When McGill University established a Department of Family Medicine, the JGH Family Practice Centre became one of its important teaching units and Dr Tennenbaum was appointed an Associate Professor, the first family doctor to hold an academic position at McGill.

Dr Tannenbaum was universally admired and respected for the care and dedication he gave to his patients and for his commitment to excellence in the delivery of primary care. He is survived by Ada, his wife of 60 years, and his children, Terry-Nan and Andre (Dascal) of Montreal, David and Mayta of Toronto, Ontario and Lynn and George (Collin) of Calgary, Alberta, as well as six grandchildren. Family medicine was fortunate to have Dr Tannenbaum as one of its champions – his legacy lives on.
RESOURCES FOR THE FAMILY DOCTOR

THE WONCA INTERNATIONAL CLASSIFICATION OF PRIMARY CARE

The International Classification of Primary Care (ICPC), developed by the ICPC Working Party, broke new ground in the world of classification when it was published in 1987 by WONCA. For the first time, family doctors and other health care providers could classify, using a single classification, three important elements of the health care encounter: reasons for encounter (RFE), diagnoses or problems, and process of care. Problem orientation of the medical record and linkage of encounters over time permits classification of the episode from the beginning with an RFE to its conclusion with a more defined problem, diagnosis, or disease.

The first version of ICPC published in 1987 is referred to as ICPC-1. The version in the 1993 publication “The International Classification of Primary Care in the European Community: With a Multi-Language Layer” is known as ICPC-E. The 1998 version 2 is referred to as ICPC-2. ICPC-2-E refers to a revised electronic version released in 2000. Subsequent revisions of ICPC-2-E are also labelled with a release date. ICPC is used when referring to the generic classification.

In 2003, the World Health Organization recognised ICPC-2 as a WHO related classification for the recording of data in primary care. The Wonca International Classification Committee (WICC) has been active since 1972 and currently has 40 members from 23 different countries.

The non-commercial user is free to use ICPC-2-E, but the copyright remains with WONCA, and all rights are reserved and the same conditions apply as apply to the ICPC-2 book.

If the electronic version of chapters 10 and 11 is to be used for commercial purposes or in national/local coding systems, it will be necessary to negotiate with WONCA about user fees. In that case, please contact the CEO of WONCA (ceo@wonca.com.sg) about an agreement for the use the classification in a commercial computerised medical/health record system or coding system.

ICPC has been increasingly used for reporting the activity of family doctors and other primary care practitioners at both national and international level.

A brief selection of recent publications, extracted from a bibliography of approximately 400 publications using ICPC, is available through the WICC web site at www.GlobalFamilyDoctor.com/wicc. ICPC one-pagers are available in 18 languages on the Wonca International Classification Committee (WICC) website at www.globalfamilydoctor.com/wicc/pagers.html

Professor Michael S. Klinkman
Chair, Wonca International Classification Committee
mklinkma@med.umich.edu

INTERNATIONAL FEDERATION OF PRIMARY CARE RESEARCH NETWORKS

The International Federation of Primary Care Research Networks (IFPCRN) was organized under the Wonca Committee on Research at the May 2001 meeting in Durban, South Africa. Nineteen individuals from seven countries participated. Chris van Weel offered, on behalf of the Wonca Committee on Research, to sponsor the listserv and website for the new IFPCRN.

The mission of the IFPCRN is to support research for primary health care for the benefit of patients by the mutual support of research networks, the exchange of ideas and methodologies, advocacy for the quality of research in primary care, capacity building, policy and advocacy initiatives, and doing collaborative research.

John Beasley from the US was selected as interim chair and Helen Smith (Chair of the UK FPCRN) as interim co-chair. Francisco Gomez Clavelina from Mexico volunteered as editor of the newsletter and the website.

Membership from individuals as well as from networks is being solicited at this time. At a small, informal meeting of some IFPCRN members at the 2001 NAPCRG meeting in Halifax, some preliminary criteria for international projects were established: an energetic and committed PI and support by clinicians in various countries; the question to be answered is of importance and interest to local clinicians; and clear evidence of why an international approach is needed to answer the question.

The IFPCRN members at the Halifax meeting also added to the list of potential projects first articulated in Durban and identified several potential PI’s. The list of potential projects now includes: the impact of HIV/AIDS in primary care; a day in the life of a family doctor; how the stigma of mental illness impacts care; study of publication...
bias and impact of having a euro-centric literature; management of smoking; access to EBM and other information sources in different countries and different areas; definition of alcohol abuse in different countries; contrasting care pathways (e.g. diabetes, maternity care); patient expectations of care for pregnancy; perceived quality of life in different countries; and the role of FP/GP’s in immunization programs.

Two promising initial studies among the areas listed above are: a study of what family doctors do when confronted with patients with HIV/AIDS, and a study of the barriers to immunizations and how family doctors can better assist with immunizing populations.

Membership in the IFPCRN is being developed rapidly, and now includes representatives of networks or planned networks in 13 countries (Australia, Austria, Canada, Kenya, Korea, Mexico, Malaysia, Netherlands, Pakistan, Peoples Republic of China, South Africa, UK, USA).

To meet our goals of the mutual support of research networks and the exchange of ideas and methodologies, the IFPCRN has established a listserver through Wonca’s Global Family Doctor and a website. The external link to the IFPCRN website: http://www.ifpcrn.org/ To contact the IFPCRN, please email John Beasley at jbeasley@fammed.wisc.edu

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2nd African Regional Congress
Rustenburg Civic Centre, South Africa
October 25 - 28, 2009

Web:
GLOBAL MEETINGS FOR THE FAMILY DOCTOR

WONCA WORLD AND REGIONAL CONFERENCE CALENDAR

Wonca Iberoamericana-CIMF Regional Conference, Puerto Rico 2009
Host: Wonca Iberoamericana-CIMF
Date: 23-26 April 2009
Location: Puerto Rico
Contact: Dra. Marina Almenas
Email: congresocimfwonca2009@gmail.com
Web: www.amfpr.org
Tel: (787) 789-6943 / 790-3210
Fax: (787) 731-7161

Wonca Asia-Pacific Regional Conference, Hong Kong 2009
Host: Hong Kong College of Family Physicians, HKCFP
Theme: Building Bridges
Date: 4 - 7 June 2009
Venue: Hong Kong Convention and Exhibition Centre, Hong Kong
Contact: Dr. Andrew Ip
Email: hkcfp@hkcfp.org.hk / enquiry@wonca2009.org
Web: www.wonca2009.org

9th Wonca World Rural Health Conference, Crete 2009
Host: Clinic of Social and Family Medicine, Medical Faculty, University of Crete
Theme: Health Inequalities
Date: 12-14 June 2009
Venue: Creta Maris Conference Center, Heraklion, Crete
Contact: Professional Congress Organiser
Email: wonca2009@acnc.gr
Web: www.ruralwonca2009.org

Wonca Europe Regional Conference, Basel, Switzerland 2009
Host: Swiss Society of General Medicine SSMG/SGAM
Theme: The Fascination of Complexity - Dealing with Individuals in a Field of Uncertainty
Date: 16 - 19 September 2009
Venue: Congress Center Basel, Switzerland
Contact: Dr Bruno Kissling
Email: bruno.kissling@hin.ch
Web: www.woncaeurop2009.org

19th Wonca World Conference, Cancun 2010
Host: Mexican College of Family Medicine
Theme: Millennium Development Goals: The Contribution of Family Medicine
Date: 19-23 May, 2010
Venue: Cancun Conventions and Exhibition Center, Cancun Mexico
Contact: Mexican College of Family Medicine
Email: wonca2009@acnc.gr
Web: www.wonca2009.org

2nd Africa Regional Conference, Rustenburg, South Africa 2009
Host: South Africa Academy of Family Practice/Primary Care Flemish Interuniversity Council
Theme: A Celebration of Diversity
Date: 25-28 October 2009
Venue: Rustenburg Civic Centre, South Africa
Contact: Professor Gboyega A Ogunbanjo
Email: gao@intekom.co.za
Web: www.woncafrica2009.org

Wonca Europe Regional Conference, Malaga, Spain 2010
Host: The Spanish Society of Family and Community Medicine (SEMFYC)
Theme: Family Medicine into the Future: Blending Health and Cultures.
Date: 6-9 October 2010
Venue: Málaga Conference Hall
Contact: Dr. Luis Gálvez-Alcaraz
Email: luisgalvez@semfyc.es
Web: www.wonca2009.org
MEMBER ORGANIZATION AND
RELATED MEETINGS

16th Nordic Congress of General Practice, Copenhagen 2009
Host: The Danish College of General Practitioners
Theme: The Future Role of General Practice – Managing Multiple Agendas
Date: May 13-16, 2009
Venue: The Scandic Hotel, Copenhagen, Denmark
Contact: Peter Torsten Sorensen, M.D., Director
The Danish College of General Practitioners
PO Box 2099
1014 Copenhagen K
Denmark
Tel: +45 3532 6590
Fax: +45 3532 6591
Email: pts@dsam.dk
Web: www.gp2009cph.com

RCGP Spring Conference, United Kingdom 2009
Host: Royal College of General Practitioners
Theme: Creating Solutions for the Future
Date: 15-18 May, 2009
Location: Royal Geographical Society, London
Contact: Royal College of General Practitioners
Tel: 0845 456 4041
Email: info@rcgp.org.uk
Web: www.rcgp.org.uk

The 2009 Family Medicine Global Health Workshop, Colorado 2009
Host: American Academy of Family Physicians
Date: September 10-12, 2009
Venue: Omni Interlocken Resort, Broomfield, Colorado
Contact: Rebecca Janssen
Address: AAFP
1400 Tomahawk Creek Parkway
Leawood, KS 66211
Tel: 1-800-274-2237 ext. 4512
Fax: +1-913-906-6088
Email: rjanssen@aafp.org
Web: www.aafp.org/intl/workshop

The 18th European Academy of Teachers of General Practice (EURACT) Workshop, Bled Slovenia 2009
Host: Slovene family medicine society under the patronage of European academy of teachers in GP/FP (EURACT)
Theme: Learning and teaching about the impact of medicalisation in general practice/family medicine
Date: September 29 – October 3, 2009
Location: Bled, Slovenia
Venue: Hotel Jelovica
Planning: Manfred Maier (Austria), Jaime Correia de Sousa (Portugal), Yonah Yaphe (Israel), Justine Allen (Great Britain), Janko Kersnik (Slovenia), Marija Petek-Ster (Slovenia), Nena Kopeavar-Guck (Slovenia)
Contact: Professor Janko Kersnik
Tel: +386-4-58-84-603
Fax: +386-4-58-84-610
Email: janko.kersnik@gmail.com
Web: http://www.drmed.org/novica.php?id=16146

American Academy of Family Physicians (AAFP)
Annual Congress of Delegates and Scientific Assembly, Boston 2009
Date: October 12-18, 2009
Venue: Westin Waterfront Hotel and Convention Center
Boston, Massachusetts
Contact: AAFP
11400 Tomahawk Creek Parkway
Leawood, Kansas 66211-2672, USA
Tel: 1 913 906 6000
Fax: 1 913 906 6075
Email: international@aafp.org
Web: http://www.aafp.org

College of Family Physicians of Canada (CFPC)
Annual Family Medicine Forum, Calgary 2009
Date: October 29-31, 2009
Venue: Telus Convention Centre
Calgary, Alberta
Web: www.cfpc.ca/FMF

4th Triennial PAN-Caribbean Family Medicine Conference, Barbados 2009
Host: The Caribbean College of Family Physicians
Theme: New Directions in Primary Care
Date: November 20-22, 2009
Location: Bridgetown, Barbados
Contact: The Caribbean College of Family Physicians
19a Windsor Avenue,
Kingston 5
Jamaica, West Indies
Tel/Fax: 876 946 0954
Email: cfp@cwjamaica.com
Web: http://www.caribgp.org
Wonca EUROPE 2009
16–19 September 2009
Basel, Switzerland

The Fascination of Complexity –
Dealing with Individuals in a Field of Uncertainty

Fees: 500 € delegates

320 € young doctors

100 € students (until 31 May 2009)

www.woncaeurope2009.org