



European Forum for Primary Care Statement to the 65th Session of the WHO Regional Committee for Europe Agenda item 5 (c): Priorities for health systems strengthening in the WHO European Region 2015–2020: walking the talk on people centredness

Based on international evidence, a number of policy recommendations were developed to support improvement of primary health care for getting more cost-effectiveness of health care systems and more equity in health during last decades. Demographic ageing and increasing prevalence of chronic diseases in the community creates a challenge for all countries in the Region: more resources are needed and they need to be better allocated to address changing societal health needs. Increasing multi-morbidity, patients having multiple (chronic) conditions at the same time, will confront primary health care with new challenges.

The combination of increasing health needs with demands from better informed patients, requires strengthening of primary care characteristics such as person-centredness, first contact care, continuity, comprehensiveness, holistic modeling. Moreover, almost all countries in the Region face a shortage of professionals in primary care and a decreased interest of medical students to choose family medicine. Countries should develop systems that stimulate 50 % of the medical graduates to go for primary care. A strategy to make that happen is early exposure (clerkships in family practice and primary care) in the education and training of all health care professionals. Training of nurses should be changed in order to give them competences to work in primary health care more independently with patients. This requires a modification of patients' perceptions and behaviour and changes in the financing systems towards more integrated (capitated) systems.

How are we going to address the challenges? Most countries have adopted a disease-oriented approach through vertical, disease-oriented programs. This may lead to fragmentation, duplication of interventions,.... especially in patients with multimorbidity. What is needed, is a fundamental paradigm-shift from disease-oriented towards goal-oriented care, taking the goals of the patient in terms of quantity and quality of life as the starting point for the intervention. And, very often, the goals of the patient are related to functional status (being able to prepare food, to go for shopping,...) and social participation (being able to visit friends..).

Authorities should develop incentives to guarantee high quality primary health care services, empowering patients and focusing on person-centred and goal-oriented care. Most fundamentally this will also require dialogue and communication between the health sector and people in need of health care, involving different stakeholders in society. European Forum for Primary Care (www.euprimarycare.org) works in that direction and calls for strong collaboration with other networks and institutions. Next year it will also gather in the Baltics for a conference in Riga on the connection between Informal Care and Professional Primary Care (4-6 september 2016).