



International anniversary conference marking 35 years of the Declaration of Alma-Ata on primary health care

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Zsuzsanna Jakab, WHO Regional Director for Europe

Your Excellency, honourable Minister of Health of Kazakhstan, Dr Salidat Kairbekova, excellencies, honourable ministers, distinguished delegates and partners, ladies and gentlemen,

It has been a real honour and privilege to participate at this wonderful international anniversary conference marking the 35th year of the Declaration of Alma-Ata on primary health care.

It is clear that, when a country takes the lead on a topic and when that country maintains and supports a vision, regularly and constantly, this vision materializes and we have to be grateful that Kazakhstan has been a champion to advocate and maintain a high place for primary health care (PHC) on the global agenda, as the cornerstone of people-centred health systems, public health and intersectoral collaboration at the community level.

I would like to thank once again the Government of Kazakhstan for continuing with the tradition of hosting this global event every five years since 1978.

As we all agreed, the Declaration of Alma-Ata was a landmark event for public health in the twentieth century. Its vision, values and principles, which are all still valid today, have played a pivotal role in global health since then.

As I said in my opening speech, Alma-Ata was ahead of its time; it was visionary. It was the first declaration underlining the importance of PHC, and put health equity on the international agenda for the first time. That is why the PHC approach has since then been accepted by WHO Member States as the key to the attainment of the goal of health for all. That is why strengthening PHC has been crucial in improving population health and building more equitable societies.

But in the 21st century we are facing new challenges, such as persistent health inequities and demographic changes, along with a rise in the burden of noncommunicable diseases (NCDs) and the persistence burden of communicable diseases like tuberculosis (TB) and HIV, as well as increased chronicity and co- and multimorbidities.

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Thus, we need to take a big step further and build on the outcomes of this milestone conference to fine tune and complete the new concept of PHC as the basis for the European framework for action on people-centred coordinated and integrated health service delivery: a key pillar of the implementation of the European health policy, Health 2020.

I have heard a few important take home messages which I would like to underline.

- Strong PHC that provides, throughout the life-course, coordinated/integrated and people-centred services, including public health services oriented to both individuals and communities, cannot be achieved by the health sector alone. There must be a joint effort reaching out to other sectors, including education and social services and infrastructure. In line with the WHO European Action Plan to Strengthen Public Health Capacities and Services, the essential public health operations must be integrated in PHC but also in secondary and tertiary care. And we have heard many impressive and innovative country experiences on this integration. It is not or PHC **against** hospitals; it is not curative care **against** public health; it is about a balanced approach between both! It is the holistic approach that we advocate.
- For this, meeting these challenges and addressing health inequities, we need urgently to raise the prestige of PHC and its health workforce through building people's trust, engaging and retraining health professionals from the early stages of their education. The WHO Regional Office for Europe is working through a technical expert group, with health and educational professionals, including the President of the World Federation for Medical Education, on the transformative scale-up of health workforce education; the group will have its second meeting in December. This link between health and education is crucial, ultimately leading to a situation that guarantees that all groups in society (remote and rural areas, poor areas, ethnic minorities) receive safe and high-quality care for universal health coverage.
- For this to happen, there is the need for adequate financing of PHC. We think of new functions and roles for PHC, but funds need to follow these functions. Here I am thinking also about appropriate incentives for quality and performance.
- It also requires the establishment and development of new partnerships, including the whole of society, truly to capture the meaning of health in all policies and effectively tackle the social determinants of health. Invest in people's health literacy so that consumers and patients can best exercise their expertise on their own care needs, empowered with the skills and confidence to manage their health and well-being. This whole-of-government and whole-of-society approach is at the core of the WHO European health policy, Health 2020.
- It also includes access to essential medicines and sound regulation of pharmaceuticals, and better utilization of information and communication technologies to bring service users and health professionals together, but also to better articulate an integrated response to people's needs.

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Lastly, let me thank the Government of Kazakhstan for keeping the global commitment to PHC but also for “walking the talk” and pursuing PHC reforms in Kazakhstan. I congratulate the Minister of Health, Dr Salidat Kairbekova, for this and, Madam Minister, please rest assured of our full support.

I am also very grateful to the Government of Kazakhstan not only for hosting this event but also for its commitment to investing in a “WHO centre of excellence on primary health care” in Almaty! This offer by Kazakhstan was approved by the WHO European Member States at the 2013 session of the WHO Regional Committee for Europe. The centre will be crucial in strengthening PHC in the Region to achieve the new vision of PHC and to strive towards universal health coverage, which is already proceeding in the European Region through the implementation of Health 2020 by countries.

I extend my thanks to:

- Professor Sharmanov of Kazakhstan;
- partners such as the United Nations Children's Fund (UNICEF), including Dr Nicholas Alipui for coming from New York, Mr Jun Kukita and Dr Octavian Bivol, and the UNICEF team in Kazakhstan; the World Bank (Ms Sebnem Akkaya and Mr Nadeem) and Professor Michel Kazachkine of France;
- all WHO Member States from across the globe; and
- the wonderful team led by vice-ministers Baizhunossov and Tokezhanov, and of course Professor Khulzhanov and his team, in particular Dr Saltanat Yegeubayeva but also the motivated staff of the organizing committee; my own teams led by Dr Hans Kluge and Dr Melita Vujnovic and their colleagues, who worked extremely hard over the last months and will continue to do so in an excellent partnership for the benefit of the new centre of excellence, serving all of you, our Member States.

Dear colleagues and friends, thank you for your kind attention.