



Address by

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to the

**REGIONAL CONSULTATION ON STRENGTHENING SERVICE PROVISION
THROUGH THE FAMILY PRACTICE APPROACH: TOWARDS UNIVERSAL
HEALTH COVERAGE IN THE EASTERN MEDITERRANEAN REGION**

Cairo, Egypt, 18–20 November 2014

Distinguished Participants, Development Partners, Colleagues, Ladies and Gentlemen,

It gives me great pleasure to welcome you to this important regional consultation, which is yet another initiative to support countries in their efforts towards universal health coverage. Some of you will recall that the same time last year the Regional Office organized a consultation on universal health coverage that focused on aspects of health financing. This consultation aims to share evidence and experience on the service provision aspects of universal health coverage. Family practice is among the principal approaches for improving service provision and in helping countries move towards universal health coverage.

Let me at the outset acknowledge the contribution of the World Organization of Family Doctors (WONCA) today. This regional consultation is the result of our collaboration with WONCA to support Member States of the WHO Eastern Mediterranean Region in developing family practice as a major strategy for service provision.

There is a growing consensus that universal health coverage will figure prominently in the post-2015 development agenda. At the same time, there have been some concerns that the services delivery dimension of universal health coverage has not received adequate attention. This consultation is meant to address these concerns. In addition, during the coming weeks other similar consultations will discuss the development of a regional health workforce strategy, reform of medical education and rational use of health technologies in the region. All these are essential for the provision of quality health services that are universally accessible to all populations.

Ladies and Gentlemen

By now you may well know that health system strengthening is among one of the five priorities in the Region for the period 2012-16 and we have been consistently working to support our countries. Provision of quality health services to all is the *raison d'être* of any health system. With the burden of disease reoriented towards noncommunicable diseases and mental health disorders, there is a need to reconfigure health services such that these are well integrated at the primary care level, the package includes the whole spectrum from promotive care to palliative services, and there is continuity of longer term care. Family practice, often referred to as family medicine, provides the appropriate approach to meet these prerequisites.

You may be familiar with the concept of person-centred integrated health services, also promoted by WHO. Indeed we acknowledge the importance of this concept; however, having been in the policy arena for now almost two decades I would like to keep matters simple and easily understood by policy-makers. Family practice represents largely the same elements and characteristics as the approach that some of you may prefer to call person-centred integrated health services.

Ladies and Gentlemen

Family practice is not a new initiative. Some countries have reasonably functioning family practice programmes, others have committed to such programmes yet are struggling to scale up their implementation, and yet others may have some way to go before they establish family practice programmes. However all countries, irrespective of whether they are among the now well-understood Group 1, 2 or 3 countries, face challenges in implementing family practice. There are some concerns, for instance whether the countries have the appropriate workforce, or even a roadmap for producing such a workforce, comprising trained family physicians, nurses and teams, to implement a family practice programme. Similarly, even when countries have developed an essential package of health services, is this package being implemented and does it include the needed promotive and preventive elements? Will the family practice programme be delivered through public providers or will it be able to attract private providers who can then be contracted to provide the essential package of health services? Finally, who will pay for this care – the government, social insurance, private insurance or the users directly? Indeed financial risk protection is as important as providing quality services in any sustainable family practice initiative. I hope that this regional consultation will be able to answer at least partially some of these critical questions.

Together with WONCA, WHO is aware of the challenges associated with establishing such initiatives across the diverse countries of the Region. Indeed, we are not promoting a one-size fits all approach. There are many low- and middle-income countries where access to health services remains a challenge. In such situations, community health workers and community midwives can play a significant role, and their importance should not be underestimated. At the same time, as many countries face population ageing and an increasing prevalence of chronic diseases which need to be managed at home, we also recognize the growing importance of home health care.

Ladies and Gentlemen

In preparation for this consultation, the Regional Office undertook a situation analysis of family practice in the Region in terms of provision of services as well as the existence of training programmes. While recognizing the many gaps identified in the implementation of family practice, we hope that the analysis will support a more evidence-informed discussion and dialogue. In addition, effort has been made to collect successful global and regional experiences and best practices to share with you. The purpose is to come up with a realistic roadmap for scaling up implementation of family practice programmes that I feel confident can be taken to the Regional Committee, the highest ministerial level governing body on in the Region.

In addition, WHO sponsored six country case studies to assess quality of care at primary health care level. These were in Egypt, Jordan, Iraq, Islamic Republic of Iran, Morocco and Sudan. These case studies provided us with a rapid assessment of the quality of service provision in countries where family practice programme is being implemented.

A rapid assessment of the family medicine education and training programmes in the Region was recently undertaken with the assistance of WONCA and the Agha Khan University, Karachi. The assessment showed major gaps in these programmes at the undergraduate and postgraduate levels. Similarly, continuing medical education programmes are few and far between. With the current level of production, the Region will not be able to address the shortage of family physicians for a long time to come and more innovative approaches need to be devised. A session has been devoted to the discussion of this subject during this consultation.

Ladies and Gentlemen,

Universal health coverage is a strategic goal to which all Member States are committed. Last month, the 61st Regional Committee in Tunis endorsed a regional framework for action for advancing universal health coverage in the Eastern Mediterranean Region and called on Member States to develop and implement a national road map for universal health coverage based on the

regional framework. Ensuring access to an essential package of quality health services through a family practice approach is a critical element of that framework.

WHO will continue its technical support to the Member States to raise high-level political commitment. In partnership with academic institutions and relevant institutions from within and outside the Region, we are considering the development of a training package for general practitioners that orients them to the principles of family practice, facilitates exchange of experiences on engagement with the private sector, and promotes establishment of the different elements of family practice. Please be reassured that the intent is not to produce quasi-trained family physicians but to improve the orientation of general practitioners towards family practice.

I am expecting this consultation to come out with a clear regional roadmap for scaling up implementation of the family practice programme to help countries move towards universal health coverage. In addition we hope to establish a network of family practice experts who would be able to collaborate with WHO to expand the family practice agenda across the Region. I look forward to your inputs during the discussion and your guidance on how best to take this important issue forward in our Member States.

Thank you for your attention.