

Regional Committee for Europe

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## Resolution

Realizing the potential of primary health care: lessons learned from the COVID-19 pandemic and implications for future directions in the WHO European Region

The Regional Committee,

Recalling the Declaration of Alma-Ata (1978) and the Astana Declaration (2018) on primary health care (PHC), and the commitments affirmed in World Health Assembly resolution WHA72.2, and Regional Committee resolutions EUR/RC66/R5, EUR/RC67/R5, EUR/RC68/R3, EUR/RC69/R8, as well as the political declaration on universal health coverage adopted by the General Assembly of the United Nations at its 74th session;

Recognizing that PHC has major potential to enhance people's physical and mental health, as well as social well-being, and that PHC is the cornerstone of the sustainable health and social systems needed for attaining the Sustainable Development Goals;

Recalling the Thirteenth General Programme of Work, 2019–2023 and the European Programme of Work, 2020–2025 – "United Action for Better Health in Europe" (EPW) endorsed through resolution EUR/RC70/R3, in which PHC is noted as essential for the pursuit of health and well-being;

Recognizing the need for a comprehensive and aligned health systems-based approach to strengthening PHC, as outlined in the Operational Framework for Primary Health Care endorsed by the Seventy-third World Health Assembly in November 2020;

- 1. RECOGNIZES the importance of comprehensive, efficient and accessible PHC in the pursuit of the three core priorities of the EPW and its four flagship initiatives;
- 2. EXPRESSES its commitment to applying the lessons learned from the COVID-19 pandemic to take sustained actions aimed at developing PHC services that are fit-for-purpose and leave no one behind, in the pursuit of the three core priorities of the EPW and its four flagship initiatives;

## 3. URGES Member States:<sup>1</sup>

- (a) to strengthen governance mechanisms for PHC to ensure greater responsiveness to regional and local needs, including through the participation of different professionals, where appropriate connecting national and subnational levels, and to ensure that they are clearly defined with an explicit mandate to develop policy frameworks, facilitate implementation of change, and monitor progress;
- (b) to prioritize financing and resourcing for PHC, based on country-specific business cases for investing in PHC to accelerate improvement in health and well-being, in order to:
  - ensure the provision of essential or, where relevant, comprehensive PHC services free of charge and expand the coverage of medicines for PHCsensitive conditions to reduce financial hardship and unmet needs, as appropriate;
  - (ii) adopt incentives to attract, train and retain health and care workers in the various disciplines needed, including by redistributing responsibilities, to deliver quality "fit-for-purpose" PHC;
  - (iii) accelerate the uptake of digital solutions to support multidisciplinary teamwork and telemedicine, and to create virtual networks integrating multilevel care delivery; and
  - (iv) invest in the appropriate infrastructure for service delivery;

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<sup>&</sup>lt;sup>1</sup> And regional economic integration organizations as appropriate.

- (c) to improve the quality of PHC by nesting general practice and family medicine within multiprofile PHC teams, thereby addressing wider psychosocial needs and leveraging multimodal delivery that combines face-to-face, mobile and digital platforms to take services to the people;
- (d) to adopt strategies to enhance the integration of a comprehensive range of services across care levels for optimal shared care pathways aligned with people's health needs and ensuring efficient use of resources;
- (e) to build partnerships within local communities, including with civil society, as well as with patients and their carers, to support those most in need and leave no one behind;
- (f) to ensure that PHC is a core component of strengthening preparedness and response mechanisms for future emergencies, including its role in dual-track service delivery that supports a potentially protracted emergency response, continues to provide essential health services, reaches and protects those most in need, and protects health workers in emergency settings;
- (g) to better leverage PHC to promote health and well-being and contribute to addressing the social determinants of health by:
  - (i) building bridges between primary health and public health and social services;
  - (ii) utilizing information and digital solutions to strengthen population health management and risk stratification capabilities at the PHC level to identify and reach people with health and social vulnerabilities in real time, while protecting personal data;
  - (iii) incentivizing delivery of health promotion, prevention, early detection and condition management; and
  - (iv) investing in health literacy, including digital health literacy;
- (h) to position PHC as a platform for delivering the regional EPW flagship initiatives by bringing transformed mental health services into the PHC setting; utilizing PHC to deliver effective immunization services including COVID-19 vaccination;

- anchoring digitalization of health services in PHC; and incorporating behavioural and cultural insights into PHC design, delivery and evaluation; and
- to invest in PHC performance monitoring and management, and engage in national and cross-national research and research networks to document the impact of alternative approaches to strengthening PHC during the pandemic and beyond;

## 4. REQUESTS the Regional Director:

- (a) to continue to make the case for PHC as a core strategy for economic and social development across the WHO European Region;
- (b) to support Member States by making the case for investment in PHC, providing policy options to achieve the objectives set out above, and guiding implementation of the selected strategies in a contextualized manner;
- (c) to invest in international platforms of exchange to inspire change by updating international evidence on PHC through supporting relevant research and publishing policy papers and country-focused case studies to support regional and subregional networks that generate evidence, and to channel evidence to policymakers and implementors;
- (d) to establish a network of national PHC focal points and launch regional and subregional platforms to facilitate the exchange of practical country experiences, with a focus on overcoming implementation barriers;
- (e) to design and launch measures to enhance the capacity of PHC policy-makers, managers and providers at national and subnational levels; and
- (f) to further develop metrics for the measurement and monitoring of PHC impact, performance and capacity within and, as appropriate, across countries, signal opportunities to accelerate improvements and identify proven policy options that can be shared among countries.

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