



Interview with Dr Otmar Kloiber, WMA Secretary General, on the upcoming WHO Global Conference on Primary Health Care in Astana, Kazakhstan, 22-23 October 2018

In September 1978, the WHO staged the first International Conference on Primary Health Care in Alma-Ata, Kazakhstan (at that time a part of the Soviet Union). The outcome was a document widely known as the Alma-Ata Declaration on Primary Health Care. The conference also started a program called "Health for All in the Year 2000" setting targets that should improve the health status of all nations.

Forty years later, the WHO has called for a second Global Conference on Primary Health Care, hosted this time by the government of Kazakhstan, along with WHO and UNICEF, in its new capital Astana. Peteris Apinis, editor of the World Medical Journal talked to Otmar Kloiber, Secretary General of the World Medical Association about the significance of this conference.

Apinis: Next month health ministers, representatives of WHO, UNICEF, the World Bank and the International Monetary Fund will meet in Kazakhstan for the 2nd Conference on Primary Care. Will it be as successful as the first conference?

Kloiber: I hope it will be a much bigger success than the Alma-Ata conference.

Apinis: You sound as if you were not satisfied with the outcome of the Alma-Ata conference. Why is that?

Kloiber: Alma-Ata was the biggest WHO event ever, however the results were patchy or mixed, to put it kindly. The Alma-Ata Declaration reads well, but what many countries took away from it was no more than a minimalist approach. Primary Health Care became a cheap substitute for real care. This has led to disappointments and misunderstandings, and sometimes to a rejection of the concept of Primary Care. This must not happen again. Primary Health Care should be at the core of every health care system, even of the most advanced and comprehensive health care systems. Primary Health should not be a dead-end road and should not be seen as a second-class concept for poor people.

Apinis: Do you mean that Primary Health Care is only for affluent countries?

Kloiber: No, no it is truly for everyone. Health care systems should be organised around a solid core of Primary Health Care providing prevention, medical treatment, dental care, rehabilitation and palliative care. This should offer pathways to secondary and tertiary care. But when starting up a health care system, your focus will have to be on Primary Health Care as this provides care options for most health needs. But again: it must not be a dead-end road. When serious conditions and trauma cannot be dealt with, frustrations will rise. Comprehensive health care systems have to be built around the core of Primary Care.

Apinis: Why now after 40 years?

Kloiber: Yes, this is late. In fact the WHO issued a remarkable report in 2008 entitled “Primary Care – Now more than ever”, but obviously this advice was not taken. Now the WHO is looking into Universal Health Coverage. This is the most ambitious WHO program ever: the desire to bring affordable health care to everybody, not sectorial, siloed programs, not episodic care – real health care for all people. If you want to achieve this, Primary Health Care is the first step on the delivery side.

Apinis: What is on the other side?

Kloiber: Aiming for Universal Health Coverage means, in the first instance, tackling the Social Determinants of Health. Without bringing justice – some people call it “social justice” – to people Universal Health Coverage will remain wishful thinking. And yes, this must include providing the necessary financial resources. If countries don’t understand that health care is an investment and not an expense they will not get this done.

Apinis: What mistakes should be avoided this time?

Kloiber: It needs a comprehensive approach, starting with the Social Determinants of Health, and it must not end with a high-quality Primary Care service – although establishing this first is a sound idea. After Alma-Ata, countries reduced their ambitions to a minimum of care – they thought the cheaper the better. In some places where health targets were aimed at everything else got forgotten. The typical “window-dressing” problem: Fulfil the targets to look good, drop the rest. This can easily turn into a fatal concept.

Apinis: What is the role of medical doctors in Primary Health Care?

Kloiber: Everybody who needs a doctor should be seen by a doctor. Medical doctors have the highest level of competency and they should lead the primary care team. This doesn’t mean that doctors have to direct and command everything. There are other professionals that can contribute with their expertise, but in the end this is about health and medicine. Medical doctors should be in charge wherever this is possible.

Apinis: This sounds very logical, why are you stressing it?

Kloiber: Firstly, doctors are a scarce resource in many countries. We must understand that in the short run a doctor will not be available everywhere. Secondly, there are groups and donors who again want to “save money”. At the World Health Assembly this year we heard all too often that doctors are too expensive. Some want to focus only on Community Health Workers; others such as the OECD prefer nurses as leaders of Primary Care teams, giving physicians more of a bystander’s role. In my opinion these are perfect recipes for repeating the mistakes of 1978. Investment in human resources for health must include investment in the education and employment of physicians.

Apinis: Is there no role for nurses and Community Health Care Workers?

Kloiber: There definitely is. Nurses are desperately needed, for nursing care. Community Health Care workers can support health professionals through outreach work, especially in rural communities. And this again is no simple task. A lot can be done right now by well-trained Community Health Care workers, and more will be possible in the future with better and more

intelligent e-health tools. But this will not replace a nurse, it will not replace a dentist, it will not replace a physiotherapist, a pharmacist or a physician.

Apinis: What do you expect from the Astana Conference – or more specifically from the participants?

Kloiber: From the WHO: keep aspirations high and do not settle for second best. From politicians: go for Universal Health Coverage, even if it will be a long journey. The Social Determinants of Health have to be on the agenda of every minister in every government and quality Primary Health Care is a sound delivery concept to start with. From donors: support sustainable solutions and not quick fixes that don't last. From doctors: engage for the Social Determinants of Health, for equitable access to health, health care and medical care.

Apinis: Dr Kloiber thank you for your insights.