



PRIMARY HEALTH CARE POLICY AND PRACTICE: IMPLEMENTING FOR BETTER RESULTS

Youth-led outcome
statement

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The development of the outcome statement was led by youth representatives from the WHO Regional Office for Europe's Youth4Health network, the WHO Youth Council, the WHO Primary Health Care Young Leaders Network and UNICEF youth representatives. An online written consultation process was organized from 3 to 12 October during which more than 100 comments were received. The final result is a youth-led statement prepared on behalf of all Conference participants.

As we come together to celebrate the 45th anniversary of the Declaration of Alma-Ata and the 5th anniversary of the Declaration of Astana, we, the online and face-to-face participants of the International Conference on Primary Health Care Policy and Practice: Implementing for Better Results, reaffirm the ambitious commitments expressed in those declarations as well as the goals set in the 2030 Agenda for Sustainable Development in pursuit of Health for All. The devastating COVID-19 pandemic and catastrophic health emergencies that shake the foundations of communities and societies reinforce the importance of adaptable primary health care-oriented health systems and the key role of the workforce in responding to people's health and well-being needs and building a bridge of trust and communication between communities and decision-makers.

We recognize and emphasize that primary health care remains the most inclusive, equitable, cost-effective and efficient approach to enhance people's physical, mental and social well-being. Therefore, investing in primary health care is a just and lasting pathway to improve human development and societal, environmental and economic well-being in a way that is fair. As we strengthen our approaches, we highlight the importance of whole-of-society approaches and intergenerational collaboration to respond to all health issues across the life-course to strengthen primary health care and to ensure the highest level of health and well-being for all, within planetary boundaries.

The accessibility, quality and equity of primary health care-oriented health services remain key concerns. Young people – who led the development of this statement – are deeply concerned about the inequities observed today in the delivery of accessible comprehensive health services (health promotion, disease prevention, treatment, rehabilitation and palliation), especially for people facing marginalization and discrimination. Poor working conditions and environments remain a concern and create challenges for delivering high-quality care in primary health care settings. In addition, they threaten the attractiveness of choosing primary health care as a profession for young people and retaining the health and care workforce once they enter the profession.

We envision primary health care-oriented health systems that give priority to solidarity and equity and that make human rights, health rights, gender equity and social justice fundamental principles. Further, they are sustainable and climate friendly, integrated into education and are well equipped and empowered by a health and care workforce working in optimal environments. In this future, communities are not just beneficiaries but proactive partners in co-producing health, with their voices amplified and their needs and aspirations at the heart of designing and implementing primary health care.

This vision calls for future-proofing primary health care transformation and focusing on robust implementation strategies to continue the move from vision to action. We urge all stakeholders to learn from successful primary health care transformers and to identify and tailor key success factors for transformation, such as political commitment, clear mandates for institutions at the national and subnational levels, adequate financing, effective health and care workforce strategies, approaches to fostering innovation and participatory processes to include practitioners, young people and communities in decision-making. Because no single approach works everywhere, we further call on investing in policy-relevant research, evaluation and performance monitoring to move towards learning health systems.

We call on decision-makers to give priority to the following.

1. Ensure equitable access to primary health care

We urgently advocate for investing in primary health care-oriented health systems that are accessible to every individual regardless of age, sex, gender, ethnicity, religion, geographical location, socioeconomic status and linguistic or political affiliation. To achieve this, we call for increasing public financing to implement the envisioned primary health care approach, giving priority to solutions to address gaps in the health and care workforce, strengthening the role of informal caregivers, revisiting the model of services to better address intersecting biological, mental and social needs often arising in the context of multimorbidity through multidisciplinary teams and optimizing the use of digital technologies. We strongly advocate taking services closer to people and resourcing the delivery of services in people's homes, schools, workplaces and locally important settings in communities. To empower all individuals and communities to take charge of their own health and well-being and navigate health services with knowledge and confidence, we advocate investing in health literacy, including digital literacy.

2. Commit to enhancing the quality of primary health care services as the foundation of trust

We envision future primary health care-oriented health systems in which the quality of care is a crucial commitment to the population and all health and care workers. Safe, people-centred and clinically effective care should be the core of primary health care, in which people's needs and preferences are respected and treatments arise from thorough clinical investigation, ethical considerations and understanding of the social, geographical, financial and cultural environments of people, with all the accompanying challenges and opportunities. We envision compassion as a key driver for primary health care. We urge a strong focus on continued learning from both primary health care successes and failures, within and between countries. Monitoring and evaluating the impact of primary health care-oriented health systems is a prerequisite for continued transformation and for informing evidence-informed practice, and this requires scaling up research and learning systems. Many areas warrant specific exploration, such as the role of traditional, complementary and integrative health care.

3. Invest in a primary health care-oriented health and care workforce

We urge increasing investment to optimize the primary health and care workforce through policies to retain current professionals and attract future ones. Comprehensive primary health care education in undergraduate health curricula should be assured, and establishing residency and training programmes in primary health care should be a priority. We call on decision-makers to take urgent action to guarantee decent pay and working conditions and to create healthy, safe and supportive working environments by protecting the mental and physical health and well-being of workers and addressing such problems as burnout, gender-based violence and discrimination. In addition, we strongly advocate investing in opportunities for continued learning through training, mentoring, research and networking.

4. Ensure the human and relational aspects of primary health care amid the opportunities of the digital era

The current digital developments, including for artificial intelligence, telemedicine and big data, offer opportunities for primary health care to leapfrog towards more effective models of care. However, these developments should not reduce equity or widen the digital divide and should safeguard the right of individuals to have their health data protected. In addition, they should be implemented as part of strategic system-wide digitalization aimed at building digital health literacy and trust among the workforce and users, preserving and enhancing the foundational values and principles of primary health care. The essence of primary health care is based on human and relational aspects, including relationships, trust and compassion.

5. Enhance resilience to current and emerging health and well-being challenges, such as mental health, social vulnerability, the impact of climate change, antimicrobial resistance and emergencies

The primary health care-oriented health systems of the future must be able to adapt and respond swiftly to current and emerging health challenges, including noncommunicable diseases and mental health, the many types of social vulnerability, the impact of climate change, antimicrobial resistance, migration and conflict and health emergencies. We urge decision-makers to transform emerging challenges into opportunities to design and deliver high-quality adaptable health services based on the principles of primary health care.

In conclusion, we stand together today united in urging a radical reorientation of health systems towards primary health care. We stand united in working tirelessly to shape accessible, equitable, high-quality and innovative primary health care-oriented health systems for all that address each individual's health needs at all stages through the life-course. We stand together today with compassion for our fellow people across the world, ready to do whatever it takes to catalyse the transformational shifts that are required to move towards primary health care. We commit to championing these priorities and re-emphasize the importance of intergenerational solidarity in working together across countries, both in times of peace and conflict, to create systems that leave no one behind and ensure a healthier, safer and sustainable future for us all.