Further information on self-care interventions can be found on the WHO website: https://www.who.int/reproductivehealth/self-care-interventions/en/

In addition, the British Medical Journal issued a supplement that outlines in further detail a conceptual framework for self care as well as a broad range of peer reviewed papers on numerous dimensions of self care. https://www.bmj.com/selfcare-srhr

Q+A ABOUT SELF-CARE

What is self care?

WHO’s working definition of self care is “the ability of individuals, families and communities to promote health, prevent disease, maintain health, and to cope with illness and disability with or without the support of a health-care provider.”

What is the scope of self care?

The scope of self care in this definition includes health promotion; disease prevention and control; self-medication; providing care to dependent persons; seeking hospital/specialist care if necessary; and rehabilitation, including palliative care.

WHO’s consolidated normative guidance includes evidence-based recommendations and good practice statements covering existing and new self-care interventions.

Is self care new?

Self care is not new. For millennia people have been taking measures to prevent disease, promote health and cope with illness and disability with and without a health care provider. Today, while self care may be used by and benefit people across all strata of all societies, people in conditions of vulnerability are particularly inclined to use self care as their primary form of healthcare. Self care aligns with the long-standing commitment of WHO to people-centered care: care that is focused and organized around the health needs and expectations of people and communities rather than on diseases. The Global Conference on Primary Health Care highlights the importance of empowering individuals as self-carers and caregivers.

Why produce a consolidated Guideline for self care?

The intention of a consolidated guideline is to recognize that many of individual interventions have commonalities. Reviewing the benefits, preferences, values, acceptability, feasibility, resource implications, equity, ethics, legal and human rights dimensions of different self-care interventions reveals they have barriers and enabling factors in common. A consolidated guideline supports health systems actors and individuals to see those commonalities from a user and health system perspective.
Providers and other health system actors will require evidence that self care does no harm and is beneficial to health outcomes at both individual and population levels. As part of the consolidated guideline, WHO will review and generate evidence that assesses the role of providers and the competencies required in supporting self care. The evidence generated to date suggests that providers can often be the beneficiary of self care, by allowing them to serve a greater number of patients with existing resources and deploying their clinical skills where greatest need exists. Rapid change has occurred across workforces in many sectors this past 25 years and healthcare is no different. With such change comes both challenges and opportunities.

**Is self care specific to SRHR?**

While self care can be particularly effective in the field of sexual and reproductive health and rights, given the stigma and difficulties people often face accessing information and services, self care is not limited to sexual and reproductive health and rights. For example, with the increase of noncommunicable diseases such as diabetes, cancers, cardiovascular and chronic lung diseases, self care can play a vital role in preventing and reducing underlying risk factors, optimizing treatment and managing complications.

**Why this consolidated Guideline now?**

The estimated shortage of 12.9 million healthcare workers by 2035, and an estimated 1 in 5 of the world’s population now living in humanitarian crises, point to the urgent need to find innovative strategies that go beyond a conventional health sector response.

The value of self care is not solely as a response to resource constraints. Self-care interventions can bring users greater choice, access, control, satisfaction and affordable options to manage their healthcare needs. Self care can recognize the strengths of individuals as active agents in their own health care, and not merely passive recipients of health services.

In addition, the rapid evolution of technology is transforming healthcare. New diagnostics, devices, drugs and digital health are all transforming how patients and health systems interact.

**Who is self care for?**

Self care is practiced by everyone and emerging new self-care interventions have the potential to benefit even the most vulnerable populations. In the case of self-care interventions in 2019, the WHO position is that it is essential to place emphasis on the needs of populations who may neither be aware of their right to health nor able to access the services they need. These include vulnerable, marginalized and socioeconomically underprivileged populations who have the poorest health outcomes globally.

**Will health care providers need training to promote self care?**

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