

WONCA News

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Contents

From the President: April 2019	2
From the President: Message to New Zealand College	3
From the CEO's desk: Practice Accreditation- Hong Kong/China	4
In my view: Disaster Preparedness and Risk Reduction	6
WONCA WHO Liaison	8
Medication without harm – A WHO meeting	
WONCA Groups	9
Rural Round-up: Targeted Rural Health Education	
WP Environment Highlights	
WP on Mental health report	
WP on Education report	
SIG Quaternary Prevention and Overmedicalization update	
WP on Rural Practice report	
New convenor SIG Point of Care Testing : Rogier Hopstaken	
Featured Doctors	16
Dr Patrick OUVRARD - France: family doctor	
Adrián Castellote: Do we have to evacuate him?	
Conference News	19
WONCA Europe Bratislava	
VdGM meeting together in Bratislava	
WONCA Asia Pacific regional conference Kyoto	
WONCA 2020 World conference website launched	
Dr Atai Omoruto Award - a scholarship for WONCA Africa Conference	
ALL CONFERENCES	25

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From the President: April 2019

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Each WONCA President has an advantage in one part of the world or another depending on where they were born, what language(s) they speak, where they practice, and where they live. We use the advantages we have to help influence the uptake of and quality of family medicine globally – but we also use any advantage we have to influence things closer to home as well.

My advantage is that although I live and work in Hong Kong, I have family and professional associations across one of the largest countries in the world. China has made huge strides in recent years to develop family medicine and improve access to primary health care. The reform of the health service continues.



During March, I was honoured to be a delegate on behalf of the health sector, at the annual CPPCC (The Chinese People's Political Consultative Conference), which took place in Beijing (photo). The CPPCC is presided over by President Xi, with over 2,000 delegates, representing all sectors. Work on health issues was intense and we had a series of large and small group discussions, as well as negotiations about ongoing health reforms in China. Healthy China is China's response to the Astana Declaration to achieve Universal Health Coverage. I was invited to make a

presentation on enhancement of primary care. I stressed the importance of safety and quality and I introduced the work of various related WONCA Working Parties.

I am pleased to be an advisor on family medicine development in one particular area of China – the Greater Bay Area. Development of family medicine is progressing well here, with a real commitment to the way primary health care is delivered. Before the CPPCC, I made a presentation on family medicine development to the Greater Bay Area Medical and Health Development Conference. At the end of the conference, we agreed a training programme for family doctors of the Greater Bay Area, which will be led by UMP of Hong Kong.

During the CPPCC, I took the opportunity to hold further discussions with Madam Zhang, the Head of International Affairs at the National Health Commission, to discuss hosting a side event on primary health care and family medicine at the upcoming World Health Assembly, in May. We will keep you posted on developments.



While in Beijing, there was a welcome chance to meet with WHO's country representative, Dr Gauden Galea (pictured). We discussed WHO's commitment to Universal Health

Coverage, and how WONCA can support the achievement of that goal through practical, technical advice at country level, and through regional offices, and at headquarters. We also discussed the very positive implications of the restructuring of WHO, as announced by Dr Tedros Adhanom Ghebreyesus on 6th March, which puts primary care firmly under the Universal Health Coverage and Life Course pillar. It was also reassuring to see that the increasingly important issue of Emergency Preparedness and Response is now a separate WHO pillar, reporting directly to the Director General.

Family medicine clinics in China were the first to undergo WONCA practice accreditation. Clinics want to show that they are providing appropriate services and quality of care to patients, in the absence of national standards against which they could be assessed. The pilot accreditations were undertaken in April 2018 (in Beijing and Shanghai). The latest batch of practice accreditation visits were

undertaken in February 2019. The accreditation team undertook visits in Hong Kong, before going to Shenzhen for further accreditation visits. While in China the team were asked to visit a number of government health clinics in the Greater Bay Area, to advise on the process to apply for WONCA practice accreditation in the future. The CEO reports more fully on the latest accreditations in his [article this month](#).

As part of WONCA's greater engagement with China, the WONCA Executive will hold their next face to face meeting in Beijing, in April, to coincide with the Chinese Medical Doctors Association conference, at which over 5,000 delegates are expected to attend. I look forward to seeing all of my WONCA Executive colleagues there.

Donald Li
WONCA President

Message to New Zealand College

The following message was sent by our President, Donald Li, to the New Zealand College on Friday 15 March.

The President, CEO and all of the WONCA Executive extend our condolences to our Member Organisation on the massacre at the mosque in Christchurch. We realise that the horror of such an act, in a country which prides itself on its peacefulness and inclusivity, must be horribly shocking. We also realise that you, as family doctors, will be faced with the aftermath of the crisis, dealing with the consequences to families affected both directly and indirectly by the appalling act of terror. People no longer feel safe. That impacts on their ability to undertake normal, usual, tasks and makes people feel and act with caution where they previously would have lived, worked and worshipped in safety.

Our hearts go out to all of you.
Yours sincerely,
Dr Donald Li
President, World Organisation of Family Doctors (WONCA)

A reply has been received from New Zealand.

Kia Ora Donald

Thank you for your kind message and concern. Some of our family doctor team were at the forefront of the aftermath and will need a lot of support, as will all of those directly and indirectly affected. I will pass your message onto our members,

Warm regards

Dr Samantha Murton
President, Royal New Zealand College of General Practitioners

From the CEO's desk: Practice Accreditation- Hong Kong/China



Photo: Garth Manning and Rich Roberts on a clinic visit in Shenzhen

Last year I wrote about a visit undertaken by Professor Rich Roberts and me, when we visited China to undertake practice accreditation visits to Beijing and Shanghai, using the newly developed WONCA Global Standards for Practice Accreditation.

These visits stimulated additional interest and so we were invited back in February this year to formally assess one clinic in Hong Kong and two in Shenzhen. There has also been increased interest from a number of government clinics in China and the team visited a number of these, to informally assess with a view to future formal accreditation.

Hong Kong



Our visit began in Hong Kong, where we were briefed by colleagues from UMP Healthcare (photo), the company which runs and operates the eight clinics previously accredited. This time they had also requested accreditation of their flagship clinic in the central district of Hong Kong, and the visit

began with a briefing from the UMP team, covering general philosophy, their expansion plans since we had last visited and a full briefing on Central Clinic itself.

The [WONCA Global Standards for Practice Accreditation](#), endorsed by Executive in 2017, look at four key areas of practice:

1. Practitioners – assessing the qualifications, experience and training of the doctors, nurses and other health professional staff in the practice who are providing primary health care services.
2. Patients – ensuring that the patients in the practice are being offered respectful and culturally appropriate care, with due regard for informed choice and patient feedback.
3. Practice Operations – evaluating the use of patient health records (ideally electronic), collection and use of health data, and ensuring that there are systems in place for follow-up of tests and results, practice information, health promotion and preventive care.
4. Premises – confirming that practice facilities meet the standards, that practice equipment meets basic minima and that there is safe and quality use and storage of medicines and vaccines.

The formal assessment of Central Clinic confirmed that it met all WONCA standards. Not all health records are electronic, but a process is under way to digitalise all paper records through time.

Shenzhen

Shenzhen is an amazing city. A fishing village of 5,000 around 40 years ago it is now a major metropolis of over 20,000,000, and home to many of China's high-tech industries.

The team started the visit with a briefing from Dr Hubert Wong, owner of the two clinics being assessed. Dr Wong is a Hong Kong-based and residency-trained family doctor who opened the Chi Ho Clinic in 2010 and the Shekou Clinic in 2017. As well as the comprehensive documentation his team had produced in advance of the visit, Dr Wong gave the team a very full briefing on the clinics and his aims and aspirations for family medicine development in China.

The formal assessment of both clinics confirmed excellent facilities and practices, with all WONCA standards easily met. What was more important and relevant though was the leadership provided by Dr Wong. He is clearly a very committed and inspiring family doctor. He has a very clear vision and concept of high quality comprehensive continuing care, and the standard of his clinics reflects that commitment.

Chinese Government Clinics

The WONCA team had also been asked to visit a number of government clinics in the Greater Bay Area (GBA), to assess them for possible future WONCA accreditation. The "Greater Bay Area" refers to the Chinese government's scheme to link a number of cities in the Pearl River Delta (including Hong Kong and Macau) into an integrated economic and business hub.

The visit started in Guangzhou where the team visited four clinics – Panyu Luopu; Panyu Nancun; Zhongcun and Luoxi New Town. Most of these clinics have made good progress in developing and providing a family medicine model of care and the first clinic in particular (Panyu Luopu) demonstrated excellent facilities and services.

The team moved on to Zhongshan and had the opportunity to attend the official opening of the remodelled "Agile Community Health

Service Station of San Xiang Town" (photo of welcome signage at right). The District Chief (Mr He) is most impressive, and really keen to develop Family Medicine services in his district (one of 24 in Zhongshan) and to have the better examples of his clinics accredited by WONCA.



Finally the team visited Dongguan, where authorities are keenly promoting and developing family medicine services. They have agreed to sponsor 30 doctors to undertake the 'GOLD' CPD programme (see below) and also want to enhance health centres and service delivery in order to achieve WONCA accreditation.. Mr Ye Xiang Yang, Director General of the Dongguan Municipal Health Bureau, met with me on Friday 22nd February for very useful discussions, and also met with Dr Donald Li at a separate event (in Shenzhen) on 25th February. On both occasions he emphasised his commitment to make Dongguan one of the leading providers of quality Family Medicine services, and we look forward to future collaboration with him and the health bureau.

Continuing Professional Development (CPD) in China

A significant barrier to access to high quality primary care in China is the paucity of qualified family doctors, with many primary care centres staffed by physicians from other specialities. To upgrade their primary care skills, GOLD (General Practice Oriented Learning and Development) was developed by Dr Kenny Kung, a residency trained family doctor who was previously at the University of Hong Kong and now with UMP Healthcare. The GOLD programme consists of a pre-assessment of aptitude (MCQ, MRC); a two-week orientation on communication and physical examination skills; 52 weekly training modules; weekly MCQs in English (which visa examinations

require); case writing, ongoing assessment; and final overall evaluation. UMP China doctors are expected to complete the curriculum in one year. Every Thursday, at noon for one hour, all doctors in UMP China participate in a Webex educational session that focuses on practical solutions to common primary care problems. The WONCA review team observed one such session during their April 2018 visit.

Government clinics are increasingly keen for their doctors to undertake this GOLD programme – which has recently been formally accredited by the UK's Royal College of General Practitioners – as they have recognised its value in updating their doctors' knowledge, skills and attitudes. Feedback from participants has been very positive to date, and there have been numerous applicants for the limited number of places available. The WONCA team regards this CPD development as a positive step in helping to upskill Chinese doctors in the quest for better quality and more comprehensive services at a community level and we commend UMP for their work in developing and implementing this programme.

WONCA Team Conclusions

The WONCA team was grateful for the hospitality and assistance given them throughout the entire visit. The team has recommended WONCA accreditation of the three clinics formally assessed and this has been confirmed by Dr Anna Stavdal (Dr Donald Li, being Hong Kong based, could not sign off on a Hong Kong clinic).

The team was also impressed and encouraged by the great strides taken in a number of government health clinics in the Greater Bay Area and believes that many either already

meet WONCA standards or will do so with minor modifications. What was clear throughout the entire visit was how important strong leadership is in identifying the changes needed and then providing leadership to the staff to make those changes and to embrace the new concept of working. We look forward very much to receiving requests for formal accreditation from a number of these clinics and plan to return to the Greater Bay Area in July for further visits and discussions.

Forthcoming Activities

April sees the first face-to-face meeting of the 2018-20 WONCA Executive. This will take place in Beijing from 17th to 19th April, to coincide with a large national conference run by the Chinese Medical Doctors' Association (a WONCA Member Organisation). WONCA Executive will take part in one major session of the conference and will provide a number of participants to a panel discussion on family medicine development.

May is inevitably a busy month for WONCA Executive, and this May is even busier than usual. Dr Anna Stavdal will attend the WONCA Iberoamericana-CIMF Region conference, in Tijuana, Mexico, at the start of the month, whilst the President and I will attend the WONCA Asia Pacific conference, in Kyoto Japan. The three of us, joined by Dr Vivi Martinez Bianchi, will then meet up in Geneva to represent WONCA at the World Health Assembly.

We will, of course report back on all these activities in forthcoming editions of WONCA News.

Until next month.
Garth Manning CEO



In my view: Disaster Preparedness and Risk Reduction

[Español](#)
[中文](#)

WONCA
President,
Donald Li, writes
on a topic, which
as chair of the
Hong Kong
Jockey Club



Disaster Preparedness and Response Institute, he is passionate about.

While instances across the globe of natural and manmade disasters and outbreaks of epidemics are relatively rare, they are increasing. Their consequences can be devastating and catastrophic. We only need to think of the Ebola crisis or the Fukushima nuclear disaster - and their long term consequences - to remind us of the importance of being prepared and being able to offer effective care and treatment, subsequent to disaster striking.

The crucial role of family doctors in disaster risk reduction and in disaster preparedness is increasingly being recognised at national and global levels. Training for mitigating the devastating effects of a disaster once it has happened, or for contributing to the prevention of disaster, is limited and, in some countries, non-existent. Yet, as family doctors, we are often the first attenders in a disaster, and we are the professionals left to deal with the consequences to our patients – consequences which can have long term implications for health and wellbeing.

WHO's recent restructuring (March 2019) has recognised the need to strengthen critical health security responsibilities, both in responding to health crises and helping countries prepare for them. The issue is considered so important that the new structural 'pillar' within the organisation, the Division of Emergency Preparedness, is

directly accountable to the Director General. It will support countries in preventing and mitigating the impact of outbreaks and other health crises. This is a welcome initiative. WONCA welcomes the opportunity to build on our existing collaboration with our WHO colleagues on this important issue.

The spotlight is getting stronger on disaster management, including climate related disasters. At the end of 2018, the Global Health Information Network held its first global conference, in Hong Kong. I was honoured to present on the role played by family doctors, in general, and by WONCA specifically.

The opportunities are there for family doctors to engage effectively with community based planning, and in strategic planning for disaster risk reduction and disaster preparedness. As family doctors we can influence policy and encourage cross sectoral co-operation: we are already treating the impact of a range of environmentally-induced illnesses and diseases, and can see how the risks are increasing. Decision-making by individual professional groups undermines the co-operation necessary to ensure that relevant specialists from a range of sectors are fully engaged in addressing issues of mutual relevance.

Family doctors are good at seeing the bigger picture in their own environments. Our knowledge and experience in dealing with real life consequences of evolving climate disasters can be used to help reduce risks. That knowledge and experience can also be used to educate our patients and others to help themselves to reduce their own exposure to risks.

Disaster Management Cycle



Family doctors have a role to play at every stage of the disaster risk reduction management cycle. We can get involved at any or all stages of the planning and response. Building our capacity to mitigate risks and to respond to the

consequences of disasters will enable us to serve our patients through every eventuality.

WONCA's collaboration with the Planetary Health Alliance, through our Working Party on the Environment, recently resulted in a Declaration recognising the role of family doctors in mitigating the risks and dealing with the effects of health hazards relating to environmentally-induced illnesses and diseases. The Declaration is a welcome call to action about the global risks we face on the range of environmental disasters in-the-making.

[Declaration calling for the family doctors of the world to act on planetary health](#)

Disaster risk reduction and disaster preparedness are not nebulous ideas: they are real issues of the day. 'They are not scare mongering', as Professor Sir Andy Haines said in his [recent article in WONCA News](#). We need to build our understanding of the risks and develop appropriate training for family doctors. By doing so, we can ensure that we contribute in the most effective ways possible, alongside the growing body of professionals who plan for and respond to the worst of situations to befall a community.

WONCA WHO Liaison

Medication without harm – A WHO meeting

Dr Ruth Wilson of Canada, reports on the WHO consultative meeting "Implementing WHO's Global Patient Safety Challenge: Medication without harm. Country guidance." The meeting took place from November 22 – 23, 2018, in Geneva.



The World Health Organization has issued three global health challenges. The first was on hand hygiene, and the second was on the surgical safety checklist. The third global challenge, 'Medication Without Harm', focuses on polypharmacy, transitions in care, and high risk medications and situations. This global challenge is more complex than the first two. Although it was launched in 2016, political endorsement has been slower at the country level perhaps as a result.

[>more here](#)

On behalf of the WONCA Working Party on Quality and Safety, I attended the WHO consultative meeting "Implementing WHO's Global Patient Safety Challenge: Medication without harm. Country guidance" in November 2018 in Geneva. Fifteen national experts, ten national organizations, five WHO regions, and nine international organizations were represented. I made a brief presentation on WONCA in general and on the work of our working party on quality and safety in particular. Our contributions were well-received, and as there were no other representatives of health professionals, I was glad we were invited and able to attend.

Sir Liam Donaldson, WHO special envoy for patient safety chaired the meeting and expressed the importance of family doctors and WONCA as being key to achieving the aim of medication without harm. Neelam Dhingra-Kumar of the WHO suggested that every GP office should post the five moments for medication safety poster in their office.

Resources to support this global safety challenge are still in development. Key technical documents, research priorities, undergraduate patient safety curriculum on medication safety, and an evaluation are still to be released. Nevertheless this is an area where family doctors can make a big difference in patient safety, and I am sure our continued involvement will be appreciated.

WONCA Groups

Rural Round-up: Targeted Rural Health Education

Kamille S Sherman, MD FAAFP is co-director of Family Medicine Clerkship and Rural Opportunities in Medical Education in the Department of Family and Community Medicine, at the University of North Dakota School of Medicine and Health Sciences, USA. Here, Kamille describes a program of student-led writing to address a local health concern: Targeted Rural Health Education (TRHE).

Patient education does not need to be enclosed within the walls of a medical facility. Instead, reaching community members in their homes through a mechanism as basic as a newspaper can impact health of communities.

At the University of North Dakota School of Medicine and Health Sciences (UND SMHS), medical students and residents are offered opportunities to publish a newspaper article that addresses a healthcare concern in a rural community. This is modeled after a similar project done by the Idaho Family Medicine Residency program. There are Community Needs Assessments that identify local health concerns, or, the student can work with a local physician preceptor to identify a community health need and then write an article about that topic.



Photo (l to r): Kamille Sherman with Dave Schmitz, and Bryan Delage, - Sherman and Delage are Co- Directors for the Family Medicine Clerkship and the Rural Opportunities in Medical Education program. This photo is from University of North Dakota

"Founder's Day" banquet in February 2019, where Dave Schmitz (who is well known in ruralWONCA) received recognition for his work in Outstanding Faculty Development.

The Center for Rural Health (CRH) at University of North Dakota and the North Dakota Rural Health Association work with the Department of Family and Community to assist in the writing and publication of the articles. A physician writing expert in the Center for Rural Health assists the student at all junctures of the writing process, from the initial draft until final publication, including working with newspaper publishers across the region to get the article submitted for publication.

Most local, rural papers welcome the articles and feature them in the "Health" or "Community" sections. There is no honorarium provided to the student, but the ability to make a difference and raise awareness of a health concern in a community brings some satisfaction to the student and enhances ties of the University of North Dakota SMHS and Center for Rural Health across the region.

Articles published have a broad range of topics, ranging from farm safety practices to technology/telehealth enhancing the health of communities. This continues to be promoted to students during their experiences in Family Medicine training and is especially emphasized to students who are completing portions of their training in rural communities across the region.

Utilizing various forms of social media to reach the general public is a tool we can continually improve. The use of TRHE to enhance the health of rural North Dakotans is a novel approach to community education.

Extensive information on this project can be assessed [here](#).

WP Environment Highlights

Enrique Barros reports:

WP on the Environment - e-meetings

Many members participated in a poll that determined our e-meetings will be bimonthly on Tuesdays at 1200 GMT, starting this 2nd April. We had a very productive e-meeting on strategic planning for the biennium.

Please check out the [minutes here](#).

WP on the Environment - ongoing projects

Updating our vision/mission/objectives

Following on our last e-meeting on Strategic Planning for this biennium (see minutes above), we are finalizing our new official document.

Sustainable and climate-friendly policy for WONCA events

We have been working on this project for a long time (led by Paola and Alice). After much research and thought, our Working Party has decided to mostly adopt the IFMSA recommendations. We will make due adaptations and forward this to WONCA exec for approval.

Declaration on planetary health

The "[Declaration calling for the Family Doctors of the world to act on planetary health](#)" was launched on March 1st 2019

Air Health Train the Trainer Program

The WONCA [Air Health Train the Trainer Program](#) is run through the Working Party on the Environment, which aims to increase awareness among family doctors and other primary healthcare practitioners– and in turn their patients - in Lower and Middle Income countries (LMICs) about the health risks of exposure to air pollution.

[Join our working party](#)

WP on Mental health report

Prof Chris Dowrick, chair of the WONCA Working Party for Mental Health, reports on activities during the past year.

1. WWPMH internal structures

Our membership is currently over 240. Our largest groupings are from Europe, Latin America and Asia Pacific. We have representation across all WONCA regions and constituencies. Our current elected officers are listed on [our webpage](#).

2. Mental health guidance for WONCA members

We encourage primary mental health care



input to all WONCA conferences. During the past six months we have enabled participation in the World Conference in Seoul and forthcoming Eastern Mediterranean, Asia-Pacific and European regional conferences.

We continue to collaborate with other WPs and SIGs, including education, WICC, migrant care and the newly formed SIG on adolescents & young people.

We continue to publicise and produce practical guidance documents for family doctors on topics identified as important by WWPMH

members.

- i. [First depression consultation](#) (led by Bruce Arroll, NZ): a shortened version of this document is published in British Journal of General Practice.
- ii. [Physical health care for people with severe mental illness](#) (led by Alan Cohen, UK and Kim Griswold, USA)
- iii. Shared learning for primary mental health care (led by Helen Rodenburg, NZ): we have produced links to accessible [online training materials](#).
- iv. [Non-drug interventions for psycho-social distress](#) (led by Weng Chin, Hong Kong); we launched our guidance on this topic at the WONCA Asia-Pacific meeting in November and presented it at WONCA Seoul.
- v. [Core competencies for primary mental health care](#) (led by Chris Dowrick, UK). This was presented at WONCA Seoul and will also be presented at WONCA Kyoto.
- vi. [Management of medically unexplained symptoms](#) (led by Tim olde Hartmann, Netherlands); a shortened version of this document has been published in the British Journal of General Practice
- vii. Mental health care of migrants (led by Maria van den Muijsenberg, Netherlands, chair of WONCA Migrant Care SIG).
- viii. Frailty, multi-morbidity and mental health (led by Christos Lionis, Greece).
- ix. Dementia (led by Ferdinando Petrazzuoli, Sweden)
- x. Adolescent mental health (led by Jane Roberts, UK)
- xi. Early years problems (led by Amanda Howe, UK)

We have negotiated a book deal with Taylor & Francis to publish our guidance documents in a single accessible volume, with additional elements on education and service implications.

3. Leadership on global primary mental health care

We continue to advocate for improved primary mental health care on behalf of family doctors and their patients, for example

- o Caribbean, Eastern Mediterranean and Ibero-American colleagues continue to organise a series of mhGAP training events.
- o Molly Shorthouse (Asia-Pacific) is planning a major mental health initiative for indigenous young people in East Arnhem, Australia.
- o A group led by Ryuki Kassai (Asia-Pacific), in collaboration with EACH, has successfully organised a train the trainer programme on depression for family doctors in Japan. The results of this will be presented at a plenary session during WONCA Asia-Pacific in Kyoto (May 2019).
- o A consortium involving WONCA, California Academy of Family Physicians and Health Performance Consulting is progressing a Train the Trainers' initiative to improving family physicians' management of patients with depression and anxiety across the Asia-Pacific region; this includes workshops at WONCA World in Seoul (October 2018) and WONCA Asia-Pacific in Kyoto (May 2019).
- o The International Balint Federation led by Don Nease (North America) and WONCA's Young Doctors Movement have an active collaboration to provide Balint groups to YDM participants.

We continue to promote external collaborations, including with WHO mhGAP, WPA, WFMH and EACH.

- o In the past six months we have offered expert advice to WHO on their guidelines for the physical healthcare for people with severe mental illness (now published); their Quality Rights Toolkit; the primary care version of ICD-11 mental disorders classification; and their proposed mental health diploma for family physicians. In October 2018, I participated in the mhGAP forum in Geneva.
- o In December 2018, several WWPMH members contributed to the Universal Health and Mental Health conference in Malta.
- o I am member of the WPA-Lancet Clinical Commission on Depression.
- o Several WWPMH members will contribute to the WPA World Congress in Lisbon.

[Join our working party](#)

WP on Education report

Prof Val Wass, chair of the WONCA Working Party on education (WWPE) reports on the past year's activities: "Education is the most powerful weapon to change the world" Mandela

I am increasingly aware of the challenge of developing education championship within regions and of improving engagement within WWPE itself. I outline progress against our objectives 2018/9 but would appreciate discussion at the Executive of how strategically we can move effectively forward.

Resetting Objectives for 2019-2020:

2018: Expand the working group to include more countries and encourage engagement: Requests to join continue and we now have over 175 members. Many our younger members are keen for resources and for support for work in their own institutions. We update by email, but email response and interaction is poor.

2019-20: (i) Establish a web depository: David Keegan in Canada is setting up a web site where resources can be deposited. We plan a small group to comment on this initial platform. This would meet the needs of many of our members and hopefully support across all regions. Complete by December 2019.

2018: Engage WWPE members in delivering education workshops at WONCA events. A total 11 Workshops were held in Delhi (rural collaboration), Krakow and Seoul with other WWPE members where available.

2019-20: Establish an executive of influential regional champions for WONCA Education: Although in the past WWPE voted not to have a regional executive I feel now is the time to attempt this again.

2018: Work to collaborate with other WONCA networks and not function in a silo. This is progressing. Collaboration with EURACT at the Leuven conference and through publication in Education for Primary Care: I have also collaborated with the Working parties on Research and also Rural Practice and the SIG for migrant health.

2019-20: Continue to promote education collaboration on scholarship and publication



through our affiliation with Education for Primary Care.

2018: Raise the status of FM and develop standards for undergraduate education. A working group is established and we continue to gather views through regional workshops. A major challenge is the diversity of current practice across the world and the importance of not imposing a Western model.

2019-20: Finalise and disseminate a WONCA document on principles and standards for undergraduate

training in Family Medicine by October 2019

2018: Develop a vibrant WWPE group of students and trainees: We are now actively engaged with IFMSA and EMSA

2019-2020 Continue to work with IFMSA and EMSA to support and collaborate

2018 Expand resources on the website and keep postgraduate and CPD standards updated: The workshops held last year have highlighted the differences in postgraduate training and the diverse needs for CPD delivery globally.

2019-2020 Continue work to disseminate and develop postgraduate and CPD standards

WWPE workshops 2018

Rural WONCA Delhi:

1: Harnessing the medical school undergraduate curriculum to recruit and retain in rural practice: Val Wass with John Wynn Jones of the WONCA rural WP

2: Doing educational research in rural practice – (joint with rural WP)

Phil Wilson, Jon Dowell, Val Wass, Ewen McPhee

WONCA Europe Krakow:

1: Developing effective continuing professional development [CPD] for isolated Family Doctors (Joint workshop EURACT & EURIPA). Biserka Bergman Marković, Isabelle Cibois-Honorat, Val Wass, Jo Buchanan

2: GP training scheme in Europe: ready to qualify as a Specialist? (With EURACT) Scherpbier N, Maagaard R, Michels N, Wass V.

3: Inspiring the young to become family medicine doctors: A tool which triangulates passion, skill and need. Webster J, Wass V

4: WWPE: Developing the undergraduate (UG) curriculum to promote Family Medicine (FM) in medical schools; tackling the perceived lower status of FM: Val Wass

5: WWPE: Evidence for change to ensure family medicine (FM) assessments mirror, rather than detract, from self-directed learning. Val Wass

Seoul WONCA World

1: Professional Training & Development in Family Medicine/ General Practice

around the World - What Is New? Amanda Howe, Valerie Wass, Bastian Seidel, Victor Ng, Cindy Lam

2: WONCA WWPE Continuing Professional Development (CPD) standards: Meeting the needs of WONCA membership organization. Victor Ng Val Wass

3: It sounds so easy but is it? Training trainers for Mental Health Consultations. Christopher Dowrick (Mental Health WP, Val Wass (WWPE), Evelyn van Weel Baumgarten (EACH)

4: Clinical Performance Assessment for generalist physicians. Nobutaro Ban (Japan), Pak Hoonki (Korea), Val Wass (UK)

[Join our working party](#)

SIG Quaternary Prevention and Overmedicalization update

Miguel Pizzanelli, (Uruguay) convenor of WONCA Special Interest Group on Quaternary Prevention and Overmedicalization (QP&O) reports on the period August 2018 to March 2019.



Collaborative Database on Quaternary Prevention Resources and References. Editorial board is Miguel Pizzanelli, Ricardo Lavalle, Marc Jamouille. The project aims to collect, share and retrieve bibliographic references, papers and material on the topic of quaternary prevention, with education or research purposes. Up to time 120 entries exist in the database.

Leadership and Team Building level:

The Iberoamericana and Europe regions have active QP&O groups. The strategy to spread Quaternary prevention interest and focus in a global way is developing strongly in these two regions. However, to achieve a global impact it is necessary to promote leadership and interest in other regions. The activities performed during the WONCA World conference in Seoul were important to promote quaternary prevention in Asia.

Collaborative Network level:

An international team established the coordination of Quaternary Prevention activities during the WONCA World Conference in Seoul successfully. Regions involved in this coordination: Asia Pacific, Europe, Iberoamericana.

Ongoing projects:

Proposal available form:

<https://tinyurl.com/Tutorial-P4-Library>

Exchange Level:

QP&O members participated in the proposal of a manuscript submitted to the BMJ "Reforming Disease Definitions: a new primary care led, people-centred approach"

Main Publications and Communications

Jamouille M, Roland M, Bae J-M, Heleno B, Visentin G, Gusso GDF, et al. Ethical, pedagogical, socio-political and anthropological implications of quaternary prevention. Implicações éticas, pedagógicas, sócio-políticas e antropológicas da prevenção quaternária. Rev Bras Med Fam Comunidade [Internet]. 2018 Oct 10 [cited 2018 Oct

29];13(40):1–14. Available from:
<https://www.rbmf.org.br/rbmf/article/view/1860>

Martins C, Godycki-Cwirko M, Heleno B, Brodersen J. Quaternary prevention: an evidence-based concept that aims to protect patients from medical harm. Status: submitted and accepted by British Journal of General Practice.

Norman AH, Tesser CD. Quaternary prevention: a balanced approach to demedicalisation. Br J Gen Pract [Internet]. 2019 Jan 1 [cited 2019 Mar 6];69(678):28–9. Available from:
<https://bjgp.org/content/69/678/28>

Jamoulle M, Lavalley R. The Quaternary Prevention concept and the social responsibility in medicine schools. (French). Le concept de prévention quaternaire et la responsabilité sociétale des facultés de médecine. Dictionnaire francophone de responsabilité sociale en santé. Avril 2018. Available from:
<http://hdl.handle.net/2268/228046>

Quaternary Prevention at the WONCA World Conference:

Our SIG presented at the WONCA World Conference. Korea, October, 17 and 19, 2018. Chairs: Monica Niveló, University of Chile. Faculty of Medicine, Chile; Daniel Widmer, Institut Universitaire de Médecine de Famille, Switzerland; and Jong-Myon Bae, Jeju National University School of Medicine, Korea. Speakers: Monica Niveló, Daniel Widmer, Marc Jamoulle, Jong-Myon Bae., Patrick Ouvrard. Participation of EUROPREV members. Complete report with all publications and activities is available [here](#).

[Join our SIG](#)
Contact Miguel

quaternaryprevention@gmail.com

WP on Rural Practice report

*Dr John Wynn-Jones, Chair
WONCA Working Party on
Rural Practice (WWPRP),
reports on past year's
activities.*

The WONCA Working Party on Rural Practice (WWPRP) continues to work on a triennium schedule and we will provide a further report after our 16th WONCA World Rural Health Conference in Albuquerque, New Mexico in October.

The current chair of WWPRP is John Wynn-Jones and he will be handing the chair over to Professor Bruce Chater who has been the secretary for the last six years.

Our success in attracting rural practitioners from around the world, meant that we needed to change our structure and as a result we established three tiers of membership

- The executive: Each executive member has a portfolio to manage. Executives are chosen



by the Council and meet at least once (video/audio) during the year in addition to face to face meetings.

- The Council: The council aims to be gender, age, geographically and demographically equitable. We try to ensure that each WONCA region is represented in this way. The membership of the council is limited to approximately 60.

- The Assembly: Everyone who is either a rural health professional, rural academic or a rural health stakeholder is entitled to join the assembly. Assembly meetings take up a day during our annual conferences.

We communicate with each other through a number of media vehicles. The Google Group remains the backbone with over a thousand members. We also run Facebook and Twitter pages.

Rural Seeds

Rural Seeds has been in existence for two years following its launch at the 14th World Rural Health Conference in Cairns in 2017. It has three joint chairs/coordinators Mayara

Floss (Brazil), Amber Wheatly (British Virgin Islands +UK) and Veronika Rasic (Croatia + UK)

Rural Seeds has its own social media platforms in addition it's own google Group. Its achievements over the last two years include:

- Rural Family Medicine Café (global discussion group using a number of social media platforms on a regular basis)
- Rural Success Stories Rural (an extensive blog gathering success stories in rural health care)
- Global mentoring programme for rural medical students and young doctors

Rural Seeds aims to expand its reach and we will be launching a new plan after the New Mexico Conference.

WWPRP achievements over the last triennium

- Equity: Working to achieve equity has been our driving force over the last three years. Our Delhi Declaration: Alma Ata revisited, endorsed at the WONCA World Rural Health Conference in April 2018 identifies six major themes. This document (see attached) is our manifesto for the future:

- o Equity and access to care
- o Rural Proofing of Policy
- o Health System Development
- o Developing and educating a workforce fit for purpose
- o Realigning the research agenda
- o People and communities

- Working in partnership: We have continued to work with other WONCA groups and will continue to do so. We released a joint declaration with the environment group on climate change at our Cairns conference. We have shared workshops and other activities with Education, Indigenous, Research, Women and Family Medicine, Emergency and Family Violence. We continue to work with WONCA Regional Groups, WHO, Towards Unity for Health, ICOH, Darwin International Institute for the Study of Compassion, American Association of Family Medicine and other organisations. We have just signed a Memorandum of Understanding with the National Rural Health Association of America - along with the University of New Mexico are the hosts of the 16th WONCA World Rural Health Conference this October.

- Priority areas: We signalled our intention to prioritise certain areas. We have now a

permanent and productive link with China. Attempts to develop a establish a rural network in Asia Pacific has not moved on any further from a rural meeting at the last Asia Pacific Conference. Links with South America continue to grow. Finally we are delighted that we have established a rural network in Africa (WoRA). A rural day is being held at this year's WONCA Africa conference and the Chair will be giving a Keynote Lecture at the main conference.

- Conferences: 15th WONCA World Rural Health Conference, New Delhi, India 2018. This conference attracted over a thousand delegates from around the world. We were honoured by the participation of the Vice-President of India and two Health Ministers. The timing was perfect as it coincided with major changes in India, aimed at securing access to health care for its poor and rural inhabitants. We were delighted to host a National Consultation on Strengthening Rural Primary Care in India. We launched the Delhi Declaration: Alma Ata revisited. See below for further details.

Working with WHO

Our recent activities to date with WHO include

- In a response to the lack of emphasis on rural health care in the draft Astana declaration we launched our own rural response to the 40th anniversary of Alma Ata, called the Delhi Declaration: Alma Ata Revisited. We were honoured and delighted when WHO put this on their [website](#).

- We contributed to the Astana declaration. After further lobbying and close working with WONCA Executive, acknowledgment of rural appeared in the final declaration. "We will strive for the retention and availability of the PHC workforce in rural, remote and less developed areas."

- We were approached by WHO in October 2018 to undertake a rapid response project to carry out a comprehensive literature review into "Pathways and Pipelines for Rural Training" across all professional groups in LMICs and use the information gained and our extensive rural network to develop a check list to help LMICs to introduce their own training pathways. We were fortunate to be able to commission an excellent team at Monash University to help us with this work and together with our global expert panel and information gathered using our contacts and Google groups, the project finished on time

and has been highly valued by WHO.

Finally: As I finish as chair, I would like to thank all those that have helped me with my work across WONCA. A special thanks to Garth, Nongluck, the WONCA secretariat, Karen Flegg and the three WONCA Presidents (Michael, Amanda and Donald). I would also like to thank my colleagues in WWPRP, the Executive and a very special thanks to Bruce Chater, who as secretary made it all possible.

It has been a great honour and a rich and rewarding experience.

Note: For purposes of space requirements in WONCA News the original comprehensive report has been edited to show highlights. Please contact the chair for the unedited version.

[Join our working party](#)

New convenor SIG Point of Care Testing : Rogier Hopstaken

The [Special Interest Group on Point of Care Testing](#) (POCT) has a new convenor - Dr Rogier Hopstaken of The Netherlands.

[email convenor](#)



Rogier is a general practitioner and innovation specialist at star-shl diagnostic centers, a non-commercial cooperation delivering diagnostic services to over 2000 GPs in the Netherlands. His special interest is point-of-care testing (POCT).

Educated as a GP-researcher at Maastricht University, he has contributed to numerous research publications and book chapters, particularly in the field of diagnostic testing, lower respiratory tract infections, and C-reactive protein POCT. He is still involved in various research and implementation initiatives in this field, in collaboration with various research institutes.

Rogier is a member of several working groups in the Dutch College of General Practitioners (NHG) and in the POCT expertise group at the Dutch College of Clinical Chemists (NVKC), co-authoring guidelines on acute cough and rational laboratory testing. He is the principal author of the Dutch, multidisciplinary guideline on POCT in general practice. He is also a member of the Board of Directors of the GP chronic care group PoZoB.

[Join our SIG](#)

Primary Care-Complete Health Care
South Asia Regional Conference 2019
22-24 November 2019
Avari Hotel Lahore, Pakistan
Organized by Pakistan Society of Family Physicians, Lahore, Pakistan

Featured Doctor

Dr Patrick OUVRARD - France: family doctor

What work do you do?

I am a General Practitioner / Family Doctor working in a group practice in Angers, (France), since 1985. My work is mainly devoted to general medicine, and I do a lot of gynaecology and paediatrics, which to me, are an integral part of general medicine.



I am very involved in continuing education in France. I'm a member of international group of French College of General Practice. As head of a Medical Anthropology Department I manage several research projects in medical anthropology in India and Nepal, particularly on the theme of family violence and access to care.

We also regularly work on a multidisciplinary approach to health with the tribal community of Santals, in India (Santiniketan Region), with French, Swiss and Indian students, doctors, anthropologists, nurses and social workers.

Other interesting things you have done?

Since 2017, I have been Vice President of the European Union of General Practitioners, ([UEMO](#)), partner organisation of WONCA Europe. UEMO's main objectives are:

- To study and promote the highest standard of training, practice and patient care in the field of general practice throughout Europe;

- To defend the role of general practitioners in healthcare systems;
- To promote the ethical, scientific, professional, social and economic interests of Europeans, and to secure their freedom of practice in the interest of their patients;
- To determine the number of members and to represent them in the European Union and international organizations;
- To work with other European medical groupings, such as the Standing Committee of European Doctors (CPME), to strengthen the position and unanimity of the medical profession in Europe in order to maintain the highest possible standards of education, ethics and patient care.

I have participated for more than ten years in many of the conferences of WONCA World, WONCA Europe and WONCA Asia Pacific, as well as some of those of Euripa and EGPRN. I am active in two WONCA Special Interest groups: on Quaternary Prevention and also the one on Family Violence.

What are your main interests in medicine and privately?

The main topics in which I have invested myself are family violence, anthropology, globalisation and quaternary prevention.

I am married, father of two children, my main interests outside general medicine that fascinate me, are, you had probably guessed ... travel and anthropology

Contact : Patrick.ouvard@unimedia.fr

Adrián Castellote: Do we have to evacuate him?

Adrián Castellote is semFYC's representative in WONCA Europe's Network, EURIPA – the organisation for doctors from rural and remote areas in Europe. He is now embarking on a working trip on a sailing expedition to Antarctica. Follow his footsteps live with semFYC with hashtag #MFenAntártida. Here is another exciting step in his adventure.

www.polarsteps.com/AdrianCastellote/125861

[2-antartica](#)

#MFenAntártida

At latitude 63°59'44"South, longitude 056°43'47" West, the ice began to accumulate, cutting off our path and closing the way to the islands of Seymour and Snow Hill, emblematic places of the fascinating expedition of Nordenskjöld 120 years ago, the incredible adventures of survival and rescue, in the

history of polar explorations. We were in the Gulf of Erebus and Terror, and we knew in advance that the Weddell Sea was a place known for the unpredictability of its weather. The previous days were impregnated with images that will forever be stored in our brains: having seen the calm ocean, penguins and sea lions adrift on icebergs, sightings of all kinds of whales next to the ship, glaciers that descend with violence towards the coast, beaches so crowded with polar life, submarine volcanoes, scientific bases, so many walks among thousands of penguins, the icy forms and the skies, the touch of hundred-year-old ice, the wind cutting your face, and the taste of hot tea when returning to the ship.

The dynamics are more or less similar every day: The expedition's leader and his team devise landings that are then carried out – or not – depending on the weather conditions. If possible, we put the zodiacs in the water and look for a path between the ice maze to reach the coast, landing quickly between the breakers in water up to the thighs. Once on land, every day is different: we try to approach to the penguin colonies - Ginsto, Chinstrap, Adelie, King; or sea lions, Weddell seals, elephant seals; ascend to volcanoes, take a path through glaciers, explore new places. I am fortunate, there is a rule that requires the doctor having to participate in all landings in case something happens ...

But at 63°59'44" S, 056°43'47" W we were going to have to turn around in all ways.

A young, healthy passenger (I'll call him Richard) who consulted me the day before for nonspecific abdominal pain and two episodes of vomiting, but with normal examination, was not evolving well. In less than 24 hours, the pain had become localised in the left flank and almost disabling, and the abdomen was distended in the same region. With the passage of hours, although the pain fluctuated, the patient stopped passing gas and faeces, no intestinal sounds were heard, he had tenderness upon percussion of the costovertebral angle and the rectum was empty and very dilated. I did not like the path the patient was taking, so I went to the cabin of the captain's cabin, who listened to me attentively.

- "Do you think we have to evacuate him?"

It was a trick question. While in any other place, in a Primary Care center, I would rather

order complementary tests, here it is not so easy.. A medical evacuation from a remote corner of the Antarctic is a spectacular mobilization: coordination of the few means that can operate in the region, with the Medical Radio Service, with the medical insurance provider. It also requires radically changing the course of the entire expedition for a member who has been waiting and preparing a long time for the trip of a lifetime. The uncertainty that a family doctor always carries in the back of his mind, here in Antarctica weighed more than ever. What if I'm wrong?

The Ship is only equipped with basic medical equipment and its not recommended to bring one's own doctors' bag on board. You will have to be creative with what you know and use what we have" - the captain told me the day I got to the ship. Well, the only diagnostic means on board are the stethoscope and the clinical eye, and in intravenous therapy it does not get much better. The captain was staring at me, waiting for an answer...

"Let's take him out" I said. And the boat turned around in the middle of the ice and at went at full speed heading north to reach the Frei base. The night was intense: the captain contacted the central offices to report the situation, the expedition chief coordinated the evacuation with the Chilean base. For my part, I stayed with the patient all night, who was already on nil by mouth. Among the wobbles of the boat I started an intravenous (IV) line to give fluids that hung from a hook on the cabin roof, administering morphine on demand, the only IV analgesic we had on board, and other symptomatic treatment.

At dawn, the patient was much better and the volcanoes of the South Shetlands could be seen in the distance. The abdomen gave the impression of improvement, and the vital signs remained stable, as well as our doubts.

However, it was a great relief to make this decision jointly with Richard from the beginning. He wanted to be evacuated and cooperated at all times. When arriving at the bay where the Antarctic base was, winds of 40 knots and waves of 3-4 metres lashed the coasts, making any disembarkation difficult, however, the same wind that was shaking us, had delayed the flight that came to meet us from Punta Sands until further notice. We wait patiently anchored in the bay with everything ready waiting for an order. At mid-afternoon, the commander of the Chilean base gave the

OK, and then we launched the zodiac and we were finally able to take the patient ashore to the very door of the plane.

Hours later, we learned that he was admitted to a hospital in Chile and we were returning to explore the glaciers that surround King George Island.

It was a hard and unexpected shock for the entire crew, but we still have forty days of travel ahead. Taking advantage of the favorable winds that blow from the southwest, we unfold the sails to Elephant Island, a mass of rock and ice in the middle of the ocean where the last men of Shackleton's expedition remained in an improvised shelter for four months of winter waiting for an improbable rescue.

Adrián Castellote



Conference News

WONCA Europe Bratislava- March news

Dr Michaela Macháčová, president of the 24th WONCA Europe Conference 2019, writes about the conference coming to Bratislava, Slovakia from June 26 - 29, 2019.

Dear Colleagues,

I am delighted to inform you that the preparation for the WONCA Europe Conference 2019, to be held this year in Bratislava from June 26 to June 29, 2019, is in full swing.

For us, general practitioners, this is a unique opportunity to take part in such major event, to meet colleagues from around the world, share with them their experience and move our primary care in the right direction.

In these times of intense scientific research and technological changes, the human side of medicine is becoming more and more important.

Therefore the main theme of our conference became "General practice - the Human Side of Medicine".



We believe that family doctors have to work on human and personal lifelong relations with their patients. More open relationship helps family doctors to increase the quality of prevention and care. To take care of our patients is more than just to diagnose them and to treat them. It also means tailoring the diagnostic process and treatment to the needs of our patients, avoiding overdiagnosing and overtreatment. Health and happiness can't be experienced individually, alone, but in a healthy and happy human society only.

For the Slovak Society of General Practice, it was a historical moment, when we faced a strong competition and for the first time we won the opportunity to organize a European conference in our country, in Slovakia.

The SSGP Organizing Committee and PCO GUARANT International are intensively working on a science and organizational program. The Scientific Committee of the Conference, which also consists of leading foreign experts for primary practice, is intensively preparing an attractive program.

The key messages will be presented by 6 renowned leaders not only from abroad but also from Slovakia.

The Conference will be held in Bratislava, in the attractive surroundings of the new building of the Slovak National Theatre, the Sheraton hotel and the Cinemax city Eurovea. The students of medical university are ready to help you with everything, both organization arrangements and great feeling in exploring the town of Bratislava. They can speak English, German and Spanish.

One of the medical attractions will be Skillslab, where you can improve your skills in POCT, USG, practical visits and more :)

We recommend you to enjoy morning walking workshop with Slovak gold Olympic winner Matej Toth, he is prepared and looks forward to spending time with you during walks in beautiful places along the river of Danube.

Together with the organizational and scientific team, I look forward to meeting you soon.

Bratislava is ready to go :)

Register before the regular registration deadline: May 24, 2019 to receive the reduced rate!

[Register today!](#)

Sightseeing Tours

Get to know Bratislava! Interesting sightseeing tours are available.

Promotional code: WONCA2019 (while making a reservation choose "Name of conference/congress" WONCA 2019)

Book now ([link](#))

Bratislava Highlights - Blue Church



The St. Elizabeth's church built in the Art Nouveau style at the beginning of the 20th century is remarkable for the blue colour of its façade made with attention to detail with often use of mosaic. It is a popular place for weddings and baptisms.

Let your colleagues know

Please send this email to any colleagues and friends who you think will be interested in attending the conference.

Conference Secretariat

GUARANT International spol. s r.o.

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VdGM meeting together in Bratislava



Vasco da Gama Movement

Greetings from VdGM, the European Young Doctors Movement! We are getting ready for our busiest time of year here preparing for the WONCA Europe Conference, the VdGM Pre-conference and the VdGM Council Meeting in Bratislava this June.

As part of our preparations for Bratislava we are receiving nominations for our various awards:

- The Hippocrates and Carosino Exchange Awards
- The Junior Researchers Award
- The VdGM Fund Wonca Europe Conference Bursaries
- The Fons Sips Outstanding Achievement Award; which recognises outstanding contributions to VdGM and Primary Care by our young doctor members.

All VdGM members are called upon to nominate their most deserving colleagues!

In addition to awards, we are calling for nominations for our new Liaison to the WONCA Europe Board. This important role embodies our strong relationship and valuable connection to our parent organisation, enabling us to promote the voice and interests of young doctors.

Look out for our posts on our social media and our webpage or contact your national Council Representative for more information on how to apply or nominate!

The Bratislavan Pre-Conference organised by our Slovakian young GP colleagues is shaping up to be an exciting and vibrant event. The Pre-conference exchange will see up to 20 colleagues from across Europe take part in a professional exchange in clinics and

consultations in East, Middle and West regions of Slovakia. On June 25 and 26, the VdGM Preconference will be held in the elegant and modern Sheraton Hotel in Bratislava. We expect that more than ever, the event will be full of freshness, updated science and innovative ideas.

The Pre-conference will include three types of workshops: Skills & development, Small group discussions groups and "Spotlight Sessions". The themes include GPs in emergency medicine, refugee care, transgender care, ultrasonography in primary care and virtual medicine.

After the resounding success of the "Spotlight Sessions" initiative in the 2018 WONCA Prague Preconference, we will once again bring together the representatives of VdGM SIGs and WONCA Europe Networks offering them the opportunity to deliver short workshops for our pre-conference attendees aimed at showcasing their activities and giving opportunities for young and future GPs to become involved.

During the main WONCA Europe Conference we will be hosting our traditional workshops for Exchanges, the Junior Researchers Award and the innovative Young Doctors Marketplace, where senior and junior colleagues can learn more about VdGM activities and network to share ideas, projects and programs. We are awaiting the results of abstract evaluation to learn of the success of the many other abstracts submitted by our Executive, Council, Liaisons and Special Interest Groups, however we are certain there will be many young doctor led activities throughout the event.

You will be able to find VdGM Executive, Council Members, Special Interest Groups and Liaisons manning our VdGM Booth in the WONCA Village throughout the Conference, so please drop in and see us! We will welcome you with a warm smile and a good dose of the famous VdGM virus!

Warm Regards
Claire Marie Thomas (President) and Elena Klusova (Events Officer) on behalf of the VdGM Executive

WONCA Asia Pacific regional conference Kyoto – last announcement



Dates: May 15-18, 2019

Venue: Kyoto, Japan

Online registration ends April 15

[Conference website:](#)

It's less than two months until the WONCA Asia Pacific region (APR) conference, in Kyoto. We are now in the full swing of final preparations. More than 500 papers have been submitted and participants from more than 40 countries have already registered.

Last year was the 40th anniversary of the Declaration of Alma-Ata and the importance of Primary Health Care was reaffirmed at Astana, Kazakhstan. Also, earlier this year, a [Memorandum of Understanding was signed between WONCA and WHO](#) reflecting the crucial role played by family medicine in achieving the goal of Universal Health Coverage. The MOU offers all our members and Member Organizations an official entry point to build even closer collaboration with WHO colleagues globally.

Although aspects of the primary health care approach, with an emphasis on primary care services, have been implemented to varying degrees in many countries over the past half-century, we still have to do lots of things to bolster primary care and increase the level of "people-centered" approach.

We at the Japan Primary Care Association are proud of organizing the WONCA APR conference in this memorable era.

Join us and enhance communication between countries. We are looking forward to seeing you soon, in Kyoto.

kindly yours,

Prof Nobutaro Ban
Representing the Japan Primary Care Association
Chair, Organizing Committee, WONCA APR 2019 Japan

Professor and Director
Medical Education Center
Aichi Medical University School of Medicine



WONCA 2020 World conference website launched



Picture of organising team (left to right): Lina Alaa Al Deen Nazmi, Meeting Minds PCO; Dr Mohamad Farghaly, Co-Chair of International Scientific Committee; Dr Garth Manning, WONCA CEO; Dr Hussain Abdul Rahman Al Rand, Assistant Under-Secretary of Health Centers and Clinics Sector, UAE Ministry of Health and Prevention, Chair of HOC; Dr Wadeia Mohammad Sharief AbdulRahim, Co-Chair of HOC, Dr Hayfa Hamad Abdalla Faris, Director of Family Medicine Residency Program, UAE Ministry of Health and Prevention; Medhat Nassar, CEO, Meeting Minds Experts.

Dates: November 26-29, 2020

Venue: Abu Dhabi, UAE

Website: <http://wonca2020.com>

Welcome Message

On behalf of the Emirates Medical Association and the HOC I warmly invite you to the WONCA World Conference in Abu Dhabi in November 2020. The website was recently launched at the WONCA EMR conference in Beirut and can now be accessed. It contains details of all aspects of the conference, including abstract submission, and I urge you to visit it and to book the dates in your dairy – 26th to 29th November 2020.

Dr Wadeia Mohammad Sharief AbdulRahim
President, Emirates Society of Family Medicine
Co-Chair of Host Organizing Committee



Dr Atai Omoruto Award - a scholarship for WONCA Africa Conference

WONCA is seeking applications for the Atai Omoruto Scholarship award to attend the [WONCA Africa Regional Conference](#) and WONCA Working Party on Women and Family Medicine preconference in Kampala, Uganda 5 -8 June, 2019.

This award is a recognition of the late Dr Atai Omoruto (pictured), and is made in the spirit of Atai's leadership in family medicine in Africa, inspired by her dedication to the advancement of women physicians and women's health in family medicine, and in tribute to Atai's exceptional courage, selflessness, and commitment to her patients with Ebola both in Uganda and Liberia. She pioneered the establishment of family medicine program at Makerere University, Uganda and was head of the family medicine department, Makerere University from 2004 to 2011. Atai was an executive member of the WONCA Working Party on Women and Family Medicine and was the recipient of WONCA [2016 Global Five Star Doctor Award](#) in recognition of her extraordinary service as a family medicine leader over many years, her service to the people of Uganda, and her recent extraordinary leadership tackling the Ebola crisis in West Africa. Atai passed away in May, 2016.



Focus:

The aim of the award is to support opportunities for African women doctors whose economic circumstances limit their ability to attend WONCA regional conferences, particularly those women in their early career.

The candidate for the Atai Omoruto Award should be an African woman family physician or family medicine resident in Africa, who demonstrates significant contributions in Africa, in any the following areas:

- Leadership in Family Medicine at the institutional, local, or national level
- Commitment to the advancement of women in family medicine
- Clinical courage and selflessness in providing care to the most vulnerable populations.

It is desirable that applications show evidence of high level achievement for those applicants in early career stages; evidence of work with disadvantaged peoples; breadth of activity within family medicine (e.g. teaching / research); prior involvement with WONCA activities.

Process:

A potential candidate should submit:

- a two-page essay stating how her attendance at the WONCA Africa regional meeting in June 2019, including the WONCA Working Party on Women and Family Medicine preconference immediately before the regional meeting) will contribute to her ability to advance her work in some or all of the above three areas of achievement demonstrated by Atai.
- Evidence of need for funding in order to attend
- a letter of support from a family physician familiar with her work
- a curriculum vitae

Please send completed applications to amanda.barnard@anu.edu.au by Friday 26 April 2019. The selection panel will consist of the executive of the WONCA Working Party on Women and Family Medicine.

Professor Amanda Barnard,
phone: +61414185207
email: amanda.barnard@anu.edu.au

WONCA CONFERENCES

WONCA Conferences 2019

May 1-4, 2019	Congreso Iberoamericano de Medicina Familiar	Tijuana, MEXICO	http://cimfwonca.org/eventos/proximos-regionales/
May 15-18, 2019	WONCA Asia Pacific region conference	Kyoto, JAPAN	www.c-linkage.co.jp/woncaaprc2019kyoto
June 5-8, 2019	WONCA Africa region conference	Kampala, UGANDA	www.woncafrica2019.com
June 26-29, 2019	WONCA Europe region conference	Bratislava, SLOVAK REPUBLIC	www.woncaeuropa2019.com
October 11-15, 2019	WONCA World Rural Health conference	Albuquerque USA	www.ruralhealthweb.org/wrhc
November 22-24, 2019	WONCA South Asia region conference	Lahore, PAKISTAN	www.globalfamilydoctor.com/SAR19

WONCA Direct Members enjoy *lower* conference registration fees.

To join WONCA go to: <http://www.globalfamilydoctor.com/AboutWONCA/Membership1.aspx>

WONCA Conferences 2020

April 21-22, 2020	VIII Cumbre Iberoamericana de Medicina Familiar	San Juan, PUERTO RICO	Save the dates.
May 28-31, 2020	WONCA Asia Pacific region conference	Auckland, NEW ZEALAND	www.conference.co.nz/wonca20
June 24-27, 2020	WONCA Europe region conference	Berlin, GERMANY	www.woncaeuropa2020.org
November 26-29, 2020	WONCA World conference	Abu Dhabi, UAE	Save the dates

Member Organization Events 2019

27 Apr **STFM Spring conference**
- 01 May Toronto, Ontario, Canada
2019

09 May **88th EGPRN Meeting**
- 12 May Tampere, Finland
2019

09 May **39th semFYC conference**
- 11 May Malaga, Spain
2019

10 Jun **Toronto International Program :
Strengthening FM & Primary Care**
- 21 Jun University of Toronto, Canada
2019

26 Jul **RNZCGP Conference for General Practice
and Quality Symposium**
- 28 Jul Dunedin, New Zealand
2019

10 Sep **The Network: Towards Unity for Health**
- 13 Sep Darwin, Australia
2019

24 Sep **AAFP Family Medicine Experience**
- 28 Sep Philadelphia, USA
2019

29 Sep **European Forum for Primary Care
conference**
- 01 Oct Nanterre, Paris, France
2019

17 Oct **EGPRN meeting**
- 20 Oct Vigo, Spain
2019

23 Oct **Rural Medicine Australia 2019**
- 26 Oct Gold Coast, Queensland, Australia
2019

24 Oct **RCGP annual primary care conference**
- 26 Oct Liverpool, United Kingdom
2019

24 Oct **RACGP GP19**
- 26 Oct Adelaide, Australia
2019

30 Oct **Family Medicine Forum / Forum en
médecine familiale**
- 02 Nov Vancouver, Canada
2019

For more information on Member Organization events go to
www.globalfamilydoctor.com/Conferences/MemberOrganizationEvents.aspx



WONCA World Rural Health Conference
Albuquerque, New Mexico, USA
Albuquerque Convention Center
October 12-15, 2019