

WONCA News

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WONCA
World family doctors. Caring for people.

From the President – September 2019

[Español](#)

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It seems to me that the world is becoming a less safe place. Medical emergencies such as the re-emergence of ebola, wars, civil unrest, and political upheaval are all on the increase. In the middle of all of these challenges, family doctors are expected to – and do! – continue to provide first point of contact care for their patients. Some of their patients will be affected specifically by the upheaval going on around them. Others will continue to suffer from chronic illnesses and diseases which need ongoing monitoring and treatment. And still others will develop illnesses and diseases as in the normal course of events. In all cases, the family doctors will provide care, diagnosis and treatment within the context of whatever is going on in the community, in an ethical and professional way.

In all circumstances, family doctors act as front-line health professionals, providing care as requested, referring to other professionals as necessary and where they are available. But how do family doctors themselves cope in situations of medical crisis or political unrest? Who listens to their concerns or worries?

There is an unspoken expectation that family doctors will simply continue to look after their patients in whatever circumstances arise. Often, their clinics or practices do not have the relative safety that hospitals enjoy. Clinics are usually located in residential areas, to serve local communities. In situations of unrest, or worse, family doctors may find themselves in the 'front line' in more ways than one! It may be difficult even to access their places of work,

which leaves their patients without access to necessary health services.

While we, as family doctors, want to be available and accessible at all times to our patients, we must also be aware of the risks to ourselves. It is important for us to undertake our own risk assessments in situations where our security and safety are issues. Equally, as family doctors and trusted members of our communities, we should actively participate in locality planning which addresses security, environmental and other risks.

Risk reduction and preparedness, through active community participation, will help to alleviate concerns and ensure that a range of professionals are resilient to crises, should they arise. Working together, across professions and community groups, and having a plan in place, ensures that action can happen quickly to reduce risks for professionals and the communities in which they work, irrespective of the crisis situation they face.

If there is no formalized community preparedness or risk reduction initiative already in place, the family doctor, as a trusted professional within the community, is well placed to start and lead the initiative. Working together with local authorities, community organisations and other professional colleagues is a productive way to anticipate potential incidents or situations and to understand the ongoing dynamics within a community. Listening to colleagues' understanding of what is going on in a community can be very instructive: their experiences and those of community groups and local voluntary groups may be quite different from the experiences of the family doctor. Together, your professional colleagues and community organisations can build up knowledge of the community and be alert to changing dynamics either within the community or more generally.

The more we can do to prepare for adverse situations, whether it is a disaster or a locality based upheaval of some sort, the more likely it is that family doctors will be in a position to continue to offer the services required, and the more likely it is that patients will continue to

have access to those necessary services. I have enjoyed chairing the Hong Kong Jockey Club Disaster preparedness and Response Institute (HKJCDPRI) of the Hong Kong Academy of Medicine since 2014. I urge

family doctors everywhere to get involved in their local or national organisations.

Donald Li, WONCA President

From the CEO's desk: visits to China & Sydney

This month I want to report on two visits which I have undertaken recently. The first was to China, to undertake further practice accreditation visits. The second was to Sydney, for a conference planning meeting and site visit relating to WONCA World, Sydney 2022.

Practice Accreditation Visits in China

In an effort to enhance quality standards and improvement in the practice of Family Medicine, WONCA has developed a series of [Global Standards for Practice Accreditation](#), which Executive endorsed late in 2017. The standards can be accessed on the WONCA website and look at four key areas of practice:

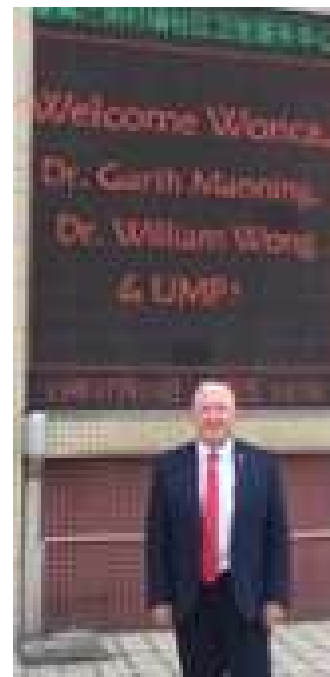
1. Practitioners – assessing the qualifications, experience and training of the doctors, nurses and other health professional staff in the practice who are providing primary health care services.
2. Patients – ensuring that the patients in the practice are being offered respectful and culturally appropriate 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 requirements and that there is safe and quality use and storage of medicines and vaccines.

In 2018 UMP Healthcare Holdings Ltd (UMP) approached WONCA to request accreditation visits to their newer clinics in Beijing and Shanghai and so, accompanied by Professor Rich Roberts, in April 2018 I undertook a visit to both Beijing and Shanghai. All eight clinics visited were endorsed for WONCA accreditation for a period of five years.



A further visit was undertaken in February 2019 (again by me and Professor Roberts) when a further three clinics were assessed for accreditation - the UMP Central Clinic in Central District Hong Kong; and two clinics in Shenzhen (Global Holdings Shekou GlobalCare Clinic in Shekou, Shenzhen and Global Holdings Chiho Medical Centre in Futian, Shenzhen). All three sites met the WONCA Global Standards for Practice Accreditation and were endorsed for WONCA accreditation.

During the February 2019 visit a number of government clinics requested the WONCA team to visit to assess for possible future accreditation. Three of those clinics - Panyu Qiaonan, Panyu Nancun and Panyu Zhongcun Community Health Service Centres (all in Guangzhou) – had subsequently applied for formal WONCA accreditation and so a visit was undertaken on 19th July, by myself and Professor William Wong (University of Hong



Kong), to carry out the formal assessments. In advance of the visit, all three sites produced extensive and very comprehensive documentation on how each clinic measured up to the WONCA global standards.

In addition, all centres compiled and circulated a PowerPoint presentation to provide advance briefing to the visitors, in addition to fully briefing the visitors at the start of each visit.

Based on our examination of documents provided, our visits to each of the three health centres, and our formal briefings and informal conversations with leaders and staff during our time in China we found that all three reviewed sites met current WONCA Global Standards for Practice Accreditation. Panyu Nancun Community Health Service Centre was accredited for three years whilst both Panyu Qiaonan and Pany Zhongcun were accredited for five years, to recognise and acknowledge the standards achieved to date, the quality of leadership and the plans for the future.

I also met with officials from Haizhu District Health Bureau in Guangzhou, who are keen to explore WONCA accreditation. Haizhu District is one of 11 urban districts in Guangzhou, situated on a discrete island in the middle of the Pearl River, with a population of 1.66 million. Two centres were also visited, which demonstrated clear evidence of quality, and hopefully these will apply for formal accreditation in due course.

Conference Planning Meetings Sydney

Early August saw me bound for Sydney, for meetings with members of the WONCA 2022 Host Organizing Committee and for a preliminary site visit to the venue for WONCA 2022. WONCA has moved to a two-year events cycle, which has made a significant difference to our ability to plan for conferences, as we can no longer wait for one event to complete before starting to plan the next. Thus although we are still over one year away from WONCA 2020 in Abu Dhabi (and I will be returning there for further visits and discussions in October)



it's essential to undertake at least preliminary planning for the world event after next.

The first world conference under the WONCA “brand” (although actually the 5th world conference) took place in Melbourne in 1972 so it's quite appropriate that WONCA should be returning to Australia on its 50th anniversary. The venue this time is Sydney, and I had the opportunity to visit the proposed venue for the conference – the [International Convention Centre \(ICC\) Sydney](#). This is an incredible facility, opened only in 2016 and situated right on the waterfront in Darling Harbour, with over 60 cafes and restaurants right on the doorstep.

There are several hotels nearby, including a Sofitel right beside the convention centre which will be the HQ hotel. Executive, Regional Council and World Council meetings will all take place within the ICC.

The Royal Australian College of GPs (RACGP) which will host the events, have



already put a tremendous amount of work into ensuring the best WONCA conference ever, and by combining it with their national conference they are hoping to make it a very well attended event.

My thanks to Zena Burgess, CEO of RACGP, and Paula Rowntree, Events Manager, for

their incredible hospitality and assistance during my time in Sydney. I look forward VERY much to a return visit!!

Garth Manning CEO

In my view... September 2019

Español [中文](#)

Donald Li, WONCA President writes:

Earlier this year, during the World Health Assembly, WONCA agreed to lead a piece of work on the importance of the Primary Care Team to achieve Universal Health Coverage. As family doctors we recognize the importance of working with qualified professional colleagues who provide essential interface and inputs to the delivery of a comprehensive primary care system.

We know that the membership of a primary care team differs from country to country, from town to town and teams even differ within the same neighbourhoods. There is no clear-cut prescription of what constitutes a primary care team. There is no mathematical (or magical) formula which stipulates what the components of an appropriate primary care team are.

Primary care teams are established based on economic viability, resource availability (both human and financial), epidemiological need, location, access and a wide range of other variables. There are many, many, variables as to what makes a 'good' primary care team. But one thing we are sure about is that delivering comprehensive person-centred primary care is best achieved by capitalising on the skills and expertise of a range of professionals who work collaboratively. We know that primary care delivered as a series of uncoordinated interventions, often through vertical programmes, does not provide either the continuity or the comprehensiveness of care which is necessary to achieve Universal Health Coverage.

The biggest challenge so far to leading this work is in identifying relevant global organisations with whom WONCA can collaborate to develop models of effective comprehensive primary care delivery. The

global organisations we looked for need to reflect the professional groups which make up the broad membership of primary care teams. We have had numerous suggestions of 'umbrella' global organisations which represent nurses, occupational therapists, midwives and other clinical and paramedic professions but few which represent those working specifically in a primary care setting.

In this respect family medicine professionals, working as they do in the primary care setting, are very well served: WONCA, as a global organisation representing family doctors across the world, is a unique organisation. The primary care 'sub sets' of other professions are less well served.

During a recent WONCA Africa region conference, Professor Shabir Moosa initiated a movement looking at the different models of primary care delivery across the continent. The initiative gained traction very quickly both within Africa and further afield, importantly among a range of primary care-specific professionals. The importance of working as a primary care team rather than as individual, separate, professionals was a very clear message from the outset. The group, still growing in number, is identified as AfroPHC (see afrophc@googlegroups.com, [webpage](#) and [link to join](#))

Some of the numerically larger primary care professionals (such as community health workers, clinical associates) do not have professional organisations through which to continue professional development, receive additional training, or collaborate with professional colleagues. That remains a challenge. But enthusiastic individuals from these groups have identified themselves and joined the AfroPHC group, and this will encourage professionals from across the continent to join. Many of the individuals from primary care professions who have signed up to AfroPHC are involved in interprofessional

education and collaborative practice initiatives (IPECP), in Africa, which bodes well for identifying good models for primary care teams.



Donald Li and Shabir Moosa

There is recognition that the continent of Africa contains some of the most disadvantaged and least developed countries. Health statistics, while variable across the countries of the region, are still frightening. As examples, in 2012 35.4% of total deaths in the region were from HIV/AIDS, lower respiratory disease, diarrhoeal diseases and malaria. In 2013 healthy life expectancy at birth was 51 years for females and 49 years for males. In 2015 under-five mortality per 1000 live births - a key MDG [1] target – had improved significantly to 81 (from 177 in 1990) but Africa still has the highest under-five mortality in the world, ranging downwards from 52 in Eastern Mediterranean region to 11 in Europe in 2015 [2]. With 10% of the world's population, Africa has 25% of the global burden of disease but only 3% of total global health workforce [3]. These figures make for a major challenge to turn around a history of successive vertical programming and disjointed care into effective, qualified, primary care teams delivering comprehensive primary care.

The well-documented disadvantages in Africa region have spawned numerous innovative approaches to delivering good quality comprehensive primary care. By cataloguing

these, bringing together the policies and practices and amassing data which reflects the changing health picture, other communities across the continent can aspire to – and achieve – better integrated primary care services. That way Universal Health Coverage is achievable.

There is a view in global health development that 'off the shelf' solutions cannot work: they are not sufficiently representative of the particular demographics, poverty levels, determinants of health, topography and health systems from country to country. That may well be the case. But if there is any chance of roll-out of good initiatives, it is more likely to be successful if fellow Africans can show the way, transfer skills and knowledge from their own country experience, and help to shape policy and practice for future primary care systems which are based on the collaborative working of primary care teams.

While everyone within the family of primary care wants to see effective, affordable, integrated person-centred primary care services globally, it is a fair assumption that if we can support the effort to get it right in Africa it will probably be achievable in most other places.

With the active engagement of WHO, both centrally and the committed team in WHO AFRO, WONCA can lead the way in developing collaborations with our primary care colleagues, to prove that delivering continuous, comprehensive primary care services through qualified primary care teams will result in the best outcomes for patients and communities.

If you want to follow the work of AfroPHC or contribute to its development, please follow the link and get involved.

References

- [1] Millennium Development Goals
- [2] Atlas of African Health Statistics 2016, WHO Regional Office for Africa, 2016
- [3] Aluttis, C., Bishaw, T., & Frank, M. W. (2014). global. *Global Health Action*, 7, 23611. [Available at <https://www.tandfonline.com/doi/10.3402/gha.v7.23611> accessed 24 August 2019]

Feature Stories

New global research agenda to advance PHC and achieve UHC

Primary care researchers have conducted studies to identify the gaps in global knowledge about what works in primary health care and prioritised a new research agenda that focuses on four key areas: organisation and models of care; quality, safety, and performance management, policy and governance, and financing of primary care systems.

The project was funded by the Bill & Melinda Gates Foundation to further the work of the Primary Health Care Performance Initiative, a partnership led by the Gates Foundation, the World Bank Group and the WHO, with Ariadne Labs and Results for Development.

A WONCA research team, led by Working Party on Research Chair, Felicity Goodyear-Smith, won two of the grants and therefore conducted two of the studies (on organisation and on financing of primary care). Other members of the research team include WONCA past presidents Amanda Howe, Chris van Weel and Michael Kidd.

The findings of the project are published in a special issue of BMJ Global Health, "[Strengthening Primary Health Care Through Research: Prioritized knowledge needs to achieve the promise of the Astana Declaration](#)," released online August 15.

The [WONCA study on organisation of primary health care in low and middle income countries \(LMICs\)](#) can be found online. The results were four priority research questions to inform decisions on implementing or improving primary health care organization models:

- What are the factors to be considered and negotiated for successful referral from primary to secondary care and back?
- How should care be horizontally integrated and coordinated among the multidisciplinary team?
- How can the public and private sectors work more collaboratively to improve and integrate coverage and prevent segmentation of the services?

- How can different stakeholders (e.g. policymakers, health system managers, health workforce organisations, academic institutions, and communities) support and assist the primary health care workforce and successful team functioning?

The free link to the WONCA financing primary health care in LMICs paper is [here](#).

The knowledge gaps potentially critical to improving PHC financing were distilled into the following four prioritised research needs:

- What is the most appropriate payment system to increase access and availability of quality primary health care?
- What are the mechanisms for effective persuasion of governments to invest in primary health care?
- What is the ideal proportion of the total health care budget to guarantee development of quality care?
- What are the factors and incentives to improve distribution of the primary care workforce for access equity?

Seven teams of researchers, many of them members of the WONCA Working Party on Research, developed implementation plans as to how these questions on organisation and financing might be implemented in their own countries. The funders, Ariadne Labs, are working towards creation of a global research consortium to carry out prioritised research that bridges the divide between health policymakers, implementers, and academic researchers. Initial member organisations of this consortium will be the six organisations that received support to conduct the research: the World Organization of Family Doctors (WONCA); the Family Medicine Education Network (Primafed) in sub-Saharan Africa (led by member of the WP-R Bob Mash); the American University of Beirut; the George Institute for Global Health; the George Washington University, and the International Centre for Diarrheal Disease Research, Bangladesh (icddr,b).
Felicity Goodyear-Smith
Chair WONCA Working Party on Research

PHC Measurement and Improvement Initiative of the WHO EMRO



Jinan Usta and Michael Kidd centre left and right respectively.

Prof Jinan Usta, president of WONCA East Mediterranean region reports:

The first consultation meeting of the Primary Health Care Measurement and Improvement Initiative of the WHO Eastern Mediterranean Region was held in Cairo WHO EMRO regional office. This is a sub initiative of the WHO/ World Bank/ Gates Foundation PHCPI initiative (Primary Health care for Universal Health coverage) that is being funded by Bill and Melinda Gates foundation and is being run in collaboration with Unicef regional office and WONCA EMR.

WONCA was represented by Prof Michael Kidd past WONCA president and currently a member of the advisory group and Director of the WHO collaborating centre on family medicine and primary care; Prof Jinan Usta, president of WONCA East Mediterranean region and a member of the advisory group; and Dr Mohammad Rasoul Tarwaneh, president of the Jordanian Society of Family Medicine and also a member of the advisory group.

Of the 22 countries of the WHO EMRO, 20 were represented, many by family physicians and WONCA members.

The three day meeting included presentations of the three pilot countries (Egypt, Pakistan and Jordan) who started the measurement phase of the program and discussions of lessons learned and how to proceed further. The importance of integrating various health programs and packages was highlighted as well as the importance of family practice/medicine in achieving this integration and PHC for UHC.

The plan is to spread the experience to 19 countries of the region. The second consultative meeting was scheduled for the first week of December where the 19 countries are expected to present the data collected on the primary health care indicators collected.

WHO EMRO is the first WHO region to take a whole of region approach to measuring and strengthening primary health care and is doing so through a family practice approach. It was great to see WONCA EMR being given equal billing on this initiative with WHO EMRO, UNICEF and the Bill and Melinda Gates Foundation (which is funding this initiative).

WONCA Groups

Working Party on Research 2019 Annual Report



Felicity Goodyear-Smith, Chair, WONCA Working Party on Research writes:

Structure & membership

The Chair is Prof Felicity Goodyear-Smith. The group membership is organised by entry into an excel spreadsheet and by membership of a Google Group (WONCA Research Assembly). The WP-R Executive consists of Chair, Regional representatives (Marvin Reid, North America: Bob Mash, Africa; Mehmet Akman, Europe; Ryuki Kasai, Asia Pacific; Raman Kumar, South Asia; Lydia Cabellero, Iberoamericana; Taghreed Farahat, Eastern Mediterranean), Young Doctor representative (Nagwa Nashat) and Chris van Weel as panel convenor. The Council include others active members, such as those involved in the Ariadne Research project (eg Bob Phillips, Amanda Howe, Michael Kidd, Andrew Bazemore), members who are key players in WONCA (eg Shabir Moosa, WONCA Africa President) and others actively involved in WP-R projects.

There were about 120 members listed at the time of the World meeting in Seoul, but many of these were inactive. Members were invited to submit their bios and details about why they wanted to remain on the WP-R. Non-responders were removed from the group following warning that this would take place. There are currently 86 members, most of whose bios are available on the website.

Ariadne project

The WONCA team held two grants: Identification of Research Gaps to Enable Better Primary Health Care Models of Care in Low- and Middle-Income Countries and Identification of Research Gaps to Enable Better Primary Health Care Financing in Low- and Middle-Income Countries. This was funded by the Gates Foundation through Ariadne Labs. This has led to a number of publications, workshops and conference presentations and now development of a PHC Global Research Consortium – see below.

Conference workshops and presentations of Ariadne project:

1. Presentation: Health Systems Global Satellite Session: Understanding and Addressing Knowledge Gaps in Improving Primary Health Care Systems and Delivery in LMICs from Governance through Quality: Findings from an Emerging Research Consortium at the 5th Global Symposium on Health Systems Research, Liverpool, UK, Nov 2019
2. Presentation of this project at the North American Primary Care Research Group, Chicago, USA Nov 2018 was awarded the AAAPC international prize and a plenary speaking slot: North American Primary Care Research Group (NAPCRG) 45th Annual Meeting. Identification of research gaps to enable better primary health care organisation & financing in low- & middle-income countries. Goodyear-Smith F, Bazemore A, Coffman M, Fortier R, Howe A, Kidd M, Phillips R, Rouleau K, Van Weel C Chicago, US. Oct 2018.
3. Workshop Identification of research gaps to enable better primary health care organisation & financing in low- & middle-income countries. Goodyear-Smith F, Howe A, Fortier R, Kidd M, Phillips R, Van Weel C. WONCA World Conference. Seoul, Oct 2018

Books

How to do Primary Care Research. Edited by Felicity Goodyear-Smith and Bob Mash. CRC Press, Taylor and Francis, London, UK. 330 pp, 2018.

International Comparisons of Primary Health Care Policy: experiences and methodology. In Primary care around the world: recommendations for international policy & development. Edited by Chris van Weel & Amanda Howe, CRC Press, Taylor and Francis Group, Oxford, UK, 2019

PHC Global Research Consortium

WONCA will have one of the six seats on the steering committee for this Research Consortium. These are awarded to the initial grantees of the Ariadne project. This will be Prof Felicity Goodyear-Smith as the lead for the two WONCA grants. WONCA and Primafamed were unsuccessful in their EOI to host the core. A concept note was developed after a meeting in Cape Town in Feb / Mar 2019 to seek funding from Gates Foundation and others. This is still under exploration and negotiation.

Scientific writing workshops

1. Workshop. Scientific writing. Goodyear-Smith F, Flegg K, Akman M. WONCA World. Seoul, South Korea. Oct 2018
2. Workshop. Scientific writing. Goodyear-Smith F, Flegg K. WONCA Asia Pacific. Kyoto, Japan. May 2019
3. Workshop. Scientific writing and publishing. Goodyear-Smith F, Flegg K, Akman M. WONCA Europe, Bratislava, Slovakia. June 2019
4. Writing & publishing workshop. Wallis K, Goodyear-Smith F. AAAPC conference, Adelaide. Jul 2019

Comparative PHC system workshops

The WWPR continues to run panels / workshops whereby different countries compare how their primary care is organised, using regional coordinators in the different WONCA regions. A template to prepare the slides is provided (panel project resources). These are led by Prof Chris van Weel. The

slides are being updated for 2019 to address the include details on access, training, financing and other potential strengths of PHC services.

- 1 Workshop. Developing PHC measures – is it possible to capture the values of PHC? Van Weel C, Goodyear-Smith F, Kassai R, Bazemore A. WONCA World Conference. Seoul, Oct 2018
- 2 International Forum: Is the work in progress on developing PHC measures capturing the values of PHC? Van Weel C, Etz R, Goodyear-Smith F, Kidd M, Olde Hartman T, Phillips B, Roland M, van Boven K. North American Primary Care Research Group (NAPCRG) 45th Annual Meeting. Chicago, US. Oct 2018 (working on publication)
- 3 Workshop. Profiling Profiles of Primary Health Care Policy Implementation around the World – from current experiences towards the next phase Van Weel C, Goodyear-Smith F, Kassai R, Bazemore A, Phillips B. WONCA World Conference. Seoul, Oct 2018
- 4 Workshop. Academic family medicine. Howe A, Kidd M, Van Weel C, Goodyear-Smith F, Wass V. WONCA World Conference. Seoul, Oct 2018
- 5 Workshop. Filling the evidence gap on outcomes from primary care development. Howe A, Goodyear-Smith F, Akman M. WONCA Europe, Bratislava, Jun 2019.
- 6 Iberoamericana panel. Caballero L, Franco, J, van Weel C. Focused on the region's input on the main axis of the Astana Declaration. Participating countries: Argentina, Colombia, Paraguay, Uruguay, Venezuela. Tijuana, May 2019

Website

The WP-R has been updated. It includes mission statement; how to join; the bios of current members (>80), and updated templates for the panel projects [available here](#).

SIG on Quaternary Prevention and Overmedicalization resource collection



WONCA SIG Quaternary Prevention
and Overmedicalization

[Español](#)

*Miguel Pizzanelli,
WONCA SIG on
Quaternary Prevention
and Overmedicalization
(QP&O) convenor writes:*



Dear colleagues
In Iberoamerica we have developed a tool to collect all the materials we are producing on the Quaternary Prevention / Overmedicalization concepts. Initially, it was developed to be used in one region. However, we think it is a versatile tool and we suggest it could be applied and used in all WONCA Regions.

We need your help to populate our database with:

- Communications in journals

- Web or web blogs communications
- Conference presentations
- Audio and video files
- Seminars' conclusions
- Training and courses
- Presentations from academic activities.

Examples of the materials uploaded during 2019 are available [here](#).

[Complete the form to provide input](#)

This database will help us to integrate activities in only one document. This work will help us to provide visibility to our activities and will be helpful to enrich the WONCA SIG QP&O annual report requirements.

e-mail: quaternaryprevention@gmail.com

Follow us on twitter: @QuatPrev

<https://prevencioncuaternaria.wordpress.com/blog/>

Member Organization news

New Director of the Besrouer Centre

[Français](#)

Dear colleagues,
On behalf of the College of Family Physicians of Canada (CFPC), it is my pleasure to announce the appointment of Dr. David Ponka to the role of Director of the Besrouer Centre as of September 4, 2019.

Dr. Ponka is well known to the Besrouer community and the CFPC family. He has served as the centre's research director and is currently the Chair of the Besrouer Centre Advisory Council.

A family doctor in Ottawa, Dr. Ponka is also an associate professor with the Faculty of Medicine at the University of Ottawa. Over the course of



his career he has gained extensive experience in caring for vulnerable and migrant populations in Canada and abroad, including having worked in Haiti, Chad and Panama. He continues work in Guyana where he supports the integration of research into the new discipline of family medicine. He has served as a medical adviser to Immigration, Refugees and Citizenship Canada and is a member of the World Health Organization Collaborating Centre for Knowledge Translation and Health Technology Assessment in Health Equity.

Dr Ponca's leadership will help the Besroure Centre achieve its mission of fostering collaboration to advance family medicine around the world through medical education and training, advocacy, and research.

A medical graduate of McGill University, Dr. Ponca proudly holds his CFP (EM) and FCGP Special Designations. He completed a master of science in international primary care at the University of London and is fluently bilingual in English and French.

Please join us in congratulating Dr. Ponca on his appointment and extending a warm welcome to him as a key member of the CFPC's leadership team.

Sincerely,
Eric Mange
Executive Director, Member and External Relations
College of Family Physicians of Canada



"Xie Xie Nong" 2019 Shanghai Family Doctor Skill Show



Members of our Cross Straits Association Society of General Practice have appeared in a Family Doctor Skills TV show. Dr Chan Dong Dong reports.

Shanghai is promoting family medicine and engaging the community in a very local way – inviting doctors to show their clinical skills and medical knowledge on TV.

Various kinds of challenges on TV, such as singing, dancing or talents shows, have 'gone viral' in the mainland China in recent years and watching these programs has become daily entertainment for many local families.

The TV program, namely "Xie Xie Nong 2019 Shanghai Family Doctor Skill Show", was broadcast on August 3, 2019 with the aims of promoting family medicine in the city and

showing recognition to some outstanding practitioners.

"Xie Xie Nong" means "Thank You" in an affectionate

tone in Shanghai dialect, signifying the close relationships between doctors and patients who are encouraged to go "hand in hand to build a healthy life", as the theme of the show says.

A total of 32 family doctors joined the TV challenge where they demonstrated their medical knowledge and clinical skills. WONCA president, Dr Donald Li, said he was pleased to be one of the special VIP guests on the show.

"Producing a TV program to promote family medicine is a very creative way of getting practitioners closer to the community. We support different cities and places use their own ways to promote family medicine, that can work best with their culture and the



interests of the local people” Dr Li said.

Other guests included Deputy Director of Primary Health Care Department of China National Health Commission, Zhu Hongming, and President of the Community Health Association of China, Chen Bowen.

Some of the 5,000 family doctors from Shanghai participated in the event that commenced on May 19, World Family Doctor

Day. Local residents selected the finalists of the TV show through online voting.

China has been promoting family medicine in recent years under its “Healthy China Strategy”. The TV show organisers said more and more Shanghai

residents consult their contracted family doctors, showing that the new service model of having family doctors play the role of “Health Gatekeeper” is being increasingly trusted by patients.

The event was co-sponsored by Shanghai Community Health Association, Shanghai Education TV Station and Shanghai Medical and Health Development Foundation.

EGPRN meets in Tampere



The 88th European General Practice Research Network (EGPRN) meeting was held in Tampere, Finland from 9-12 May 2019. The topic of the meeting was "Research on Multimorbidity in Primary Care".

A total of 319 participants from 31 countries attended the conference, which is a new participant record in EGPRN congress history. A national one-day congress was combined with the EGPRN congress and this turned out to be a success. There were 182 participants from Finland joining in the congress.

With at least one abstract coming from each of 28 countries, a total of 76 abstracts were selected out of 113 submissions. At least one third of the accepted papers focused on the theme of the meeting.

Four pre-congress workshops were organised and they were all fully booked. The topics of the workshops were “multimorbidity” (two workshops), “how to formulate a research question” and “writing for publication”.

EGPRN is famous for several collaborative research groups - seven groups had their meetings during the congress. All groups and their studies are led by active EGPRN members and most of them receive financial support from the organization.

The keynote speech was given by Prof Bruce Guthrie from the University of Edinburgh, on the topic “The challenges of multimorbidity for health services and researchers”. Bruce introduced the challenges that the health systems must respond to when facing the growing number of multimorbid patients. He presented the latest research on multimorbidity and pointed out the challenges regarding multimorbidity and polypharmacy interventions.

The local keynote was given by Prof Elise Kosunen from Tampere University on the topic “Multiprofessional primary health care and challenges of multimorbidity”. She presented the Finnish health care system from a historical perspective and reflected on the challenges of multimorbidity, in multidisciplinary Finnish primary care.

The atmosphere in the sessions was interactive and friendly, which provides a good setting for researchers to share their thoughts and ideas and to get constructive feedback. On Saturday we held the traditional special methodology session, which focused on among other things on the Hawthorne effect.

A very unique EGPRN poster session, where posters are presented by another participant and where authors just respond to the questions was held once again. In six sessions, 30 posters were presented. The best poster prize was awarded to the poster "Violence Towards Young General Practitioners in Croatia Remain in Silence - a pilot study" by authors Iva Jurčević, Marina Oljača Pribanić, and Durdica Lazic.

EGPRN is widely recognized as an organisation with a focus on research supporting young doctors to start their academic development. The EGPRN Fellowship Program is a great example of a successful and unique activity. First started in May 2017, the EGPRN Fellowship Program aims to provide young fellows the knowledge and skills to carry their own research projects. In Tampere meeting the latest achievement of this program – a new research protocol - was presented in a special session.

We hope that in the next EGPRN meeting, which will be held from 17- 20 October 2019, in Vigo, Spain, will again see many interesting studies, innovative projects and great ideas as in the Tampere meeting. The theme of the Vigo meeting will be “General Practice and the Community: research on health service, quality improvement and training”.

Tuomas Koskela and all the members of the PR and Communications Committee:

[>EGPRN website](#)

Conference news

WONCA Asia Pacific conference 2020 - call for abstracts



You are invited to submit abstracts and proposals for oral and poster presentations and for workshops that are in keeping with the themes of this, the WONCA Asia Pacific Regional Conference 2020, which is to be hosted jointly by The Royal New Zealand College of General Practitioners' and the New Zealand Rural General Practice Network.

The overarching theme for the conference is: "Family Medicine, leading the way towards an advanced world of equity, quality and

compassion"

The essence of this theme is captured in the Māori *whakatauki*: *Ko te pae tawhiti whāia kia tata, ko te pae tata whakamaua kia tina*

Which translates to "Seek distant horizons in pursuit of excellence".

During the conference we will explore the scientific and human contributions we can make to create a future that embraces

progress, while retaining the core values needed to move us towards the goal of equal health for all.

This conference will be an ideal opportunity to meet colleagues both from New Zealand, from around the region and beyond. You will learn, discuss, debate and importantly share your practical knowledge, experience and wisdom.

The conference will include the following sub themes:

- Clinical research that informs daily practice
- Ways to achieve a more equitable future with equal health outcomes for all
- All aspects of Quality Improvement

- The importance of compassion, of continuity of care and other core values of family practice
- Innovation in health care delivery, integration
- Benefits and potential harms of advances in technology
- Sustainability in all its forms
- Particular issues focusing on Rural Health

Key dates

- Call for abstracts - now open!
- Closing date for submission of abstracts - 31 October
- Notification of acceptance - by 13 December

[Submit your abstract now](#)

Island Generalist Medicine Symposium

Manabu Saito, Director of the Rural Generalist Program in Japan, writes on a symposium held at WONCA Kyoto 2019 (in conjunction with the Japan Primary Care Association)



Why Island Medicine?

Dr John Macleod, from the Hebridean Island of North Uist, sadly passed away in 2009, shortly after giving a keynote lecture on Island Health at the WONCA World Rural Health Conference, in Crete. John wanted to develop a WONCA Statement on Island Health, and we took his legacy to fulfil a wish by organizing a symposium on island generalist medicine, at the WONCA Asia Pacific region conference in 2019. Islands' network has started the process that John Macleod so wanted to deliver.

Islands have unique health problems and require equally imaginative solutions. Not only is isolation made worse by weather and limited transport links, but also by workforce recruitment and retention issues and a disproportionately ageing population. Solutions need to include developing a specially trained, broad-based health and social care workforce, the use of new technologies and communication strategies and establishing an academic and research

base to underpin future developments.

Objectives and the Overall Theme

The Island generalist medicine symposium had three objectives:

1. Share experiences, insights and lessons learned from clinical service provision, medical training and health systems development across a range of island medicine perspectives;
2. Develop and strengthen the professional network of island medical generalists;
3. Draft a framework for a Statement on Island Medicine to be delivered at the WONCA World of Rural Health Conference in Albuquerque, in October 2019.

Having the concept of increasing an island's strength and community resilience in the face of a sense of vulnerability, we discussed climate change and its impact on health. In addition, islands have a uniqueness and diversity inherent in their historical isolation, that breeds both their strength and vulnerability.

The following points came out of the symposium.

1. Training and vocational pathways to island medicine - the pipeline
2. The unique cultural contexts of island practice
3. Unique diseases experienced on islands
4. Challenges to manage disease burden based in small populations, shortage of

- doctors, and scarcity of resources.
5. Island medicine in poverty settings
 6. Impact of social determinants of health on island practice
 7. Climate change impact on island medicine

Experiences from Asia and the Pacific



Presenters from Japan, the Philippines, Tonga and the Torres Strait Islands shared unique experiences in their practices. Their stories presented similarities and differences in each of the settings, but they complemented each other. Commentators from Taiwan, China, Indonesia and Tonga added depths and insights. Coming together was profoundly supportive and fascinating as we pondered upon deeper questions such as the aspects unique to island medicine; the features

distinguishing between island medicine and rural/remote medicine; and incorporating geographical, historical and cultural aspects in the discussions of island medicine.

Next Steps

We are grateful for your participation and appreciate your contributions in the ongoing

discussions on island generalist medicine.

We gained a lot of insights and are full of ideas and thoughts as to how this could progress towards the Rural Health WONCA in Albuquerque later this year. In the spirit of island collaboration, we ask for your continued assistance for working towards a statement on Island Medicine at WONCA Rural in Albuquerque, New Mexico in October 2019.



WONCA World Rural Health Conference

Albuquerque, New Mexico, USA

Albuquerque Convention Center

October 12-15, 2019

Walk into the Rattlesnake Pit - WONCA Rural in Albuquerque

Whoever and wherever we are, we all have a problem providing health care for our rural communities. It may be access to basic health care, it may be government inaction, it may be the conditions that you work in, it may be preserving patient centred care and many

more issues. Whatever riles you, this is your opportunity to tell us about it and tell us what you have done to make a difference for your patients. It's an opportunity to open up a dialogue and start a discussion. You may just want to tell us about something special that

you are doing in your practice/clinic or a larger project that has an impact on whole communities.

Please consider taking up our invitation to present your passion at the “Rattlesnake Pit” session on the Assembly Day of the World Rural Health Conference in Albuquerque, October 12th.

We are looking for 10 inspiring presenters who will walk into the pit and enthuse us all.

Please look at the attached invitation and:

1. Tell us why you feel there is a particular reason why you should present at Rattlesnake Pit
2. Project /Presentation Title

3. Describe your project’s innovation with reference to how it helps, at the frontline, the health of rural people through a local, national or international initiative that addresses one of the following

- a. Rural community’s health needs
- b. Rural health facilities
- c. Rural health workforce

We want exemplars that you can share with others, we want your passion to inspire and enthuse the audience.

Go on! Be brave and walk into the pit! Take up the offer!

John Wynn-Jones

john@johnwj.com

Chair WONCA Working Party on Rural Practice

The IX EURIPA Forum welcomes you to the Azores!



In November, the IX EURIPA Forum will take place in the beautiful city of Ponta Delgada, located in the Atlantic island of São Miguel, Azores, Portugal.

With breathtaking landscapes as a natural background, this scientific event (organised by

the Portuguese Association of General and Family Medicine (APMGF) and the European Rural and Isolated Practitioners Association (EURIPA) - a WONCA Europe network - will be focused on family doctors training and the challenges of rural and isolated practice. The Forum aims to bring together rural and urban professionals, making use of the experience of some and the concerns of others. You can find further information on the event’s official [website](#).

Some of the most important topics to be discussed in São Miguel include acute and chronic pathologies, appointment organisation strategies, patient centred medicine in the rural context, the intricacies of rural communities, best clinical and social approaches to rural world challenges or the use of quaternary prevention by the rural/isolated doctor.

During the first day of the forum (November 7), a program of clinical visits will take place, allowing attendees to meet local family doctors and get acquainted with their everyday clinical/educational responsibilities and working conditions.

On the 7th, 8th and 9th of November, APMGF and EURIPA will be expecting you in Ponta Delgada, Azores...

[Website](#)

Featured Doctors

A/Prof Pramendra PRASAD

Nepal – Chair WONCA Working Party on e-Health



What work do you do currently?

I am working as an Associate Professor at Department of General Practice and Emergency Medicine in the B. P. Koirala Institute

of Health Sciences (BPKIHS) which is located in Eastern Part of Nepal. My job includes patient consultations and education, acute and emergency care provision, teaching-learning activities of undergraduates and post graduate students, research and mentorship. I am also the Medical Coordinator of the eHealth and Telemedicine Program which is part of the BPKIHS-HUG-RAFT Network.

What other interesting activities that you have been involved in?

I am trying to decrease health disparities, and training people who not only provide healthcare but also address the social determinants of health and vulnerability, and advocate for the communities they serve.

I am Honorary Secretary of the WONCA South Asia region executive committee and am also involved as an executive member of the WONCA Working Party on Mental Health and WONCA Special Interest Group on Emergency Medicine.

I am the Associate Editor of the Journal of Diabetes and Endocrine Association of Nepal as well as an editorial member of the Journal of General Practitioners and Emergency Medicine Association of Nepal.

I am on the Executive Board of Koshish Foundation which is non-profitable foundation

which works in community for health promotion and education in the form of health camps in most of the rural areas of most of the eastern part of the country, and health education and promotion for school and college students - such as training in first aid, health hygiene.

What are your hopes as chair of the Working Party (WP) on e-Health?

As chair, my hopes are to make people understand more about what eHealth and digital health is and how we can implement it in improving healthcare.

A digital revolution could support more integrated services, better safety, improved quality and access to care everywhere, promote health solutions and strengthen relationships with health carers.

The eHealth terminology refers to the use of information and communication technologies for healthcare systems aimed at increasing their efficiency, improving quality of life and unlocking innovation in the sector.

Digital applications might cover an extensive range of services, from electronic health records, wearable solutions, ePrescriptions and even clinical decision-support systems. These are only a few examples of the solutions that a connected continuum of care can provide. I believe this will allow healthcare settings to have a real chance at improving patients' quality of care, tailor healthcare to the needs of the individual and ensure that patients have the right to be involved in making decisions which directly impact their lives.

If policy-makers play their cards right, eHealth solutions can make a real difference in patients' experiences and ensure their safety.

The digitalization of the healthcare sector still has a long way to go. Although over 60 per cent of global citizens agree that patients should be able to manage their own data and that sharing health data can be beneficial. However wearable health tools are not commonly used, prescriptions are often not digital, and healthcare professionals continue to work with ageing IT systems that cannot exchange information effectively. Healthcare needs new heroes – innovators. Before technology makes a transformation, we need a transformation in healthcare culture.

It is also possible that in the upcoming years technologies will grow gradually, naturally adapting to everyday life, in an evolutionary, not a revolutionary manner, without disruptive changes. All in all, there may be different scenarios of digital transformation.

I hope that my role as chair of WP e-Health will foster other members in primary health care to adapt different eHealth/ digital health tools to improve primary health care especially in resource-poor countries. One way to achieve this is provision of workshops on eHealth and research. I would like to provide opportunities for our diverse WP members to be actively engaged in achieving our goal.

What are your interests as a doctor and also outside work?

I like to create safe learning environments that can engage newer generations of residents to be an excellent and quality driven general practitioners and can also become effective leaders of the healthcare team. I love learning and creating innovative ways of teaching and providing primary care and improving population health.

I love travelling and public speaking. WONCA activities have opened the doors to meeting family doctors from around the world and provide me the opportunity to learn and share the present about healthcare globally.

I play cricket and football and love cooking, dancing, and dining out with my wife (a physiologist working in same hospital where I do), my daughter, friends and family.

WONCA
WONCA SOUTH ASIA
REGIONAL CONFERENCE 2019
At Avari Hotel Lahore, Pakistan
22-23-24 November 2019

WORLD ORGANIZATION
OF FAMILY
DOCTORS

WONCA
SOUTH
ASIA

Pakistan Society of Family
Physicians (PSFP)

Dr Elena KLUSOVA

Spain / Russia - Fons Sips Achievement award winner



Elena Klusova was winner of the Fons Sips Achievement Award announced at the recent WONCA Europe conference in Bratislava. She

was born in Moscow, Russia and passed through 23 countries, finally settling in Spain - now on the island of Ibiza, Balearic Islands. She was interviewed by Pere Vilanova, Spanish Society of Family and Community Medicine (semFYC) - Periodismo y comunicación

What can you tell us about your involvement with the Vasco da Gama Movement?

My relationship with the movement of Young Family Physicians of the Vasco da Gama Movement, began in 2014. Ignacio Borque, the Spanish regional coordinator, published the Madrid Exchange proposal, in which Residents were asked to welcome foreign doctors. The goal was to introduce the international community of GPs to the lives of local doctors. This was my first contact, then I attended the second Balearic Meeting and I completely fell in love with Vasco da Gama Movement, the open hearts of the people and their willingness to give.

Now, five years later you are collecting the Fons Sips Achievement Award..

I think it is a bit of a symbolic prize, and there are so many people who deserve to win it before me! The beauty of this kind of recognition is that it comes directly from my colleagues, and that they have chosen me because they think I'm a sincere and honest person. That is very exciting.

Your speech at the closing ceremony of the WONCA Europe conference received a standing ovation!

I wanted to emphasise that when you come from another country, in my case from an ex-Soviet country, everything is more difficult. Also, I think that being a woman makes you professionally ending up running into this glass ceiling, with which they want you to stop improving. As a family doctor and as a woman, I've touched this glass ceiling with my own hands.

Soon you will not be a "Young Doctor". What next?

Interesting question ... I would like to continue my work within the WONCA organisation. I have a lot of energy and a lot of interest and curiosity for everything that surrounds me. I'm going to seek how to get involved in all kinds of projects, also on a creative perspective. I'm also thinking about a PhD.

Do you have any special message for Young Family Doctors?

I have many things to say! The first, as one who is passionate about the Vasco da Gama Movement, I am concerned that many use it as a travel agency. I think it's good not to stay on the surface of the movement, but to get involved, because there are many people dedicating many hours of their free time to make everything perfect. I find it so exciting to be able to get involved in research, workshops, intellectual exchange ... and both WONCA and VdGM offer you the whole world, and they do it for free!

The second thought is that a global revolution is necessary. All the colleagues that I know are exhausted with the disproportion of health care and patients they have to deal with. Professional stress is economically imprudent, humanly irresponsible and ethically unbearable. Our politicians have to rely more on health professionals, how can there be non-medical health ministers? Family doctors can bring health to politics.

Young Doctors' Movements news – September 2019



WONCA's Young Doctors' representative on World Executive, [Ana Nunes Barata \(Portugal\)](#), is coordinating regular news from our seven region Young Doctors' Movements.

A word from Ana Nunes Barata - YDM representative on WONCA Executive 2018-2020

The Young Doctors' Movements (YDMs) are WONCA's active network that engages youth and promotes intercultural knowledge exchange that helps to create new ideas, projects and initiatives that contribute for the development of Primary Care at the global level. WONCA's young doctors are defined as in their first five years' of practice as a family doctor OR in training as a family doctor. Each WONCA region has its own YDM that strives to develop its network and engage with the young doctors from every country it represents. You may find more information about the YDMs [here](#)



[>Join your region's Young Doctors' Movement](#)

This month's featured photo is of the Rajakumar Movement members in Kyoto this year



YDM Region News

Al-Razi Young Doctors' Movement East Mediterranean Region



Advocacy for Al-Razi group and the formation of Al-Razi Jordanian team.

To introduce Al-Razi group to young family medicine specialists and residents in Jordan, Dr Anas Almohtaseb sent an introductory message through WhatsApp to the main family medicine programs in Jordan (Ministry of Health, Jordan University, Jordan University for Science and Technology) encouraging those who are interested to participate in its activities and to be a member of Jordanian team.

We have currently at least 15 doctors who are in the group, seven of them are the team members:

- Anas Almohtaseb, FM specialist - MOH [team leader, pictured]
- Enas Ammar, FM specialist - MOH
- Malaak Farhan, FM specialist - NGO
- Dana Aldaghlise, year 4 resident - JU: University of Jordan
- Nora Alanzi, year 3 resident - MOH
- Ehab Jarrar, year 2 resident - MOH
- Mahmood Sqour, year 2 resident - Jordan University of Science and Technology



Participation in the annual Jordan Medical Association forum about specialisation and residency programs', held in Amman in 20 February 2019.

Dr Anas Almohtaseb presented a lecture entitled 'How to choose your medical specialty'. Dr Sumayya Al-Shokhaibi [Al-Razi Jordan supportive group], Dr Maalak Farhan and Dr Anas Almohtaseb participated in round table discussion with interested general practitioners about family medicine training, job opportunities, etc.



Participation in WONCA-EMR 6th regional conference in Beirut in 21-23 March 2019. The Jordan team was represented by Dr Anas Almohtaseb who presented, in collaboration, a workshop entitled 'Critical appraisal of randomised controlled trials'.

Anas Almohtaseb



The Rajakumar Movement

Asia Pacific region

The Rajakumar Movement actively participated in the WONCA Asia Pacific regional conference held from May 15-18, 2019, in Kyoto, Japan. About 30 young doctors from the various parts of the world attended the preconference. Dr Meng-Chih Lee, the president of the WONCA Asia Pacific Region delivered welcome remarks, and encouraged the young doctors "the future of medical community" to "become the leaders of primary care." Thereafter, representatives of the national organisations presented the updates on their respective young doctors' organisations. Dr Erfen



the chair of the Rajakumar Movement discussed briefly the future directions of the Rajakumar Movement: entrepreneurship skills for young doctors, research and journal track, and case discussion and sharing among young doctors in the Asia Pacific Region.

Two sessions were conducted during the preconference: the preparedness of young doctors in the fourth industrial revolution and the need for entrepreneurship among young doctors. Dr Emily Kirkpatrick, the vice-chair of the Rajakumar Movement for Oceania, gave an amazing and eye opening talk about the fourth industrial revolution. She mentioned the need for young doctors to adapt and utilise the technologies available in managing patients. Participants were then divided into smaller groups and a workshop was conducted where each group answered the following questions on interests, role models, use of technology in medical practice in their respective countries, and progress of the fourth revolution in patient care.

The second session was entitled, “The need for entrepreneurship among young doctors” was spearheaded by Dr Tesshu Kusaba, the president of Japan Primary Care Association. He said that, “entrepreneurship is like medicine, wherein you get to meet new people and listen to them.” He mentioned that like a doctor, an entrepreneur is “a learner, an educator and a manager.” He further mentioned three challenges of being both a doctor and an entrepreneur and possible solutions for each: tackle negative spiral decline in consultations by adapting and

focusing on the needs of the community; manage human resources by labor and motivational management skills; and the need for further education and research by collaborating and engaging with other professions. Afterwards, four participants: Dr Siti Shuhaizam, Dr Naoko Kobayashi, Dr Kentaro Asakura, and Dr Masahiro Nishimura shared their experiences as both doctors and entrepreneurs. The participants were then divided into smaller groups for a workshop and answered questions on entrepreneurship, skills of an entrepreneur, advantages and disadvantages of being an entrepreneur. After the preconference, the young doctors enjoyed a sumptuous meal and had a great time bonding. The young doctors from Japan prepared a game “primary care quiz contest” in which everyone actively participated.

For the main conference, the Rajakumar Movement further enhanced the entrepreneurship skills of young doctors by conducting a session-workshop on “Getting started with entrepreneurship.” This was part of the series of sessions that the Rajakumar Movement will be conducting for the WONCA conferences as follows: making a general business idea, marketing and sales, budgeting and finance, and human resources development.

The Rajakumar Movement is looking forward in WONCA Asia Pacific region Conference in 2020 in Auckland.

Mel Anthony E Acuavera

The Spice Route Movement

South Asia region

Sri Lanka

The GPs' Café: a place to gather, discuss and enjoy

The Spice Route Sri Lanka successfully initiated an innovative CME programme named as “The GPs' Café”. The prime objectives of the GPs' Café are encouraging knowledge sharing and fellowship. The first gathering of the café was held on 19th July 2019 at the College of General Practitioners of Sri Lanka. It was a well-attended event by the GPs representing all generations and the College council room was unexpectedly a full house. The GPs' Café also had a live stream to accommodate more participants who could not attend the programme physically.



Two young GPs shared their own patient scenarios and interacted with the audience on history taking, examination and differential diagnosis. The café filled with coffee smell and lively discussions regarding the management plans of the patients. It was a novel experience to the enthusiastic GPs attended, which was well received by all.

With positive feedback and suggestions for improvements, the Spice Route has decided to conduct "The GPs' Café" monthly in future



Rupak Bhandari: new Spice Route Nepal Chair

Dr Rupak Bhandari has been appointed as the Chair of the Spice Route Nepal. The immediate past chair of the Spice Route Nepal, Dr Santosh Kumar Dhungana, announced the new appointment in July 2019.

Dr Rupak Bhandari is an Assistant Professor in Department of General Practice and Emergency Medicine of BP Koirala Institute of Health Sciences, Dharan, Nepal and was the Secretary of the Spice Route Nepal in last few years. Rupak hopes to appoint his committee soon and collaborate with the other South Asian countries to go forward as a more active YDM.

We wish him all the best in carrying the Nepali Spice Route flag forward!



The Spice Route India in action at the FMPC 2019

The FMPC 2019 was conducted by the Academy of Family Physicians of India from 2nd to 4th of August 2019. The event was conducted at the Indian Institute of Science, Bangalore.

The event kicked off with a whole day of Young Physicians Conclave on the 2nd of August. The Conclave looked into a good blend of academic needs of the Young Family Doctors in training and those out in practice as well. The event for the 1st time hosted a career fest as well where prospective employers came in and spoke about the growing opportunities for Family Medicine in India and they answered queries from the audience pertaining to the job opportunities. The event was attended by 250 participants and was an instant success among the crowds.

The next two days of the conference had Dr Idris Shariff, the present Spice Route National Chair for India, and Dr Kyle Hoedebecke, the previous chair of WONCA Polaris who joined in via video conference, showcasing a few YDM projects at the conference one being "SoMe in Medical Practice a Young Doctors Movement Perspective" and the other being "Antimicrobial Stewardship- a Global MOOC by Young Doctors Movements".

The conference provided some essential details on further education opportunities via the MRCGP INT South Asia exam which was a session conducted by the South Asia Board and the faculty which also ran packed house at the event.

YDM Pre-conference at the WONCA South Asia Regional Conference 2019

The Spice Route is organising the YDM pre-conference in parallel to the WONCA South Asia region conference 2019. All young doctors are invited to Lahore, Pakistan to attend this event to be held on 22nd of November 2019.



Sankha Randenikumara (pictured right)

Vasco da Gama Movement

Europe region



Greetings from VdGM, The European Young Doctors Movement! [See our 2018-19 Annual Report](#)

Last month's news included a report of the VdGM Preconference and conference activities, [June 2019 Bratislava](#). Continuing the story: **Congratulations to all award winners:**

The Hippocrates Award: Neelam Parmar (UK), who has done an exchange in Portugal shadowing Dr Cristiano Figueiredo.

Carosino Exchange Awards: Giulia Schiavi from Italy, who has done her exchange in the UK shadowing Dr Holly Tyson.

Junior Researcher Award: Fabian Dupont whose project titled "A competency based/ blended learning teaching approach" was found to be very innovative and well-designed.

The VdGM Fund - WONCA Europe Conference Bursaries: This year we were happy to support two young colleagues: Margarida Aroso (Portugal) and Shirin Kyzy (Kyrgyzstan).

Fons Sips Outstanding Achievement Award was created in honour of the contributions of one of VdGM's founding fathers, Alphons Jacobus Ignatius Sips to the establishment of the VdGM. We are thrilled to announce Dr Elena Klusova is the deserving recipient of the 2019 award. See this month's [featured doctor article](#) for more about Elena.

Before Forum in Torino we are calling for: Being Young, Staying Young Award
For the Vasco da Gama Movement youth is not about age, it's about attitude. Youth is about the passion with which you approach your work and the spirit that you imbue to those around you. This award is designed to

recognise and thank senior colleagues who have made significant contributions to our network over many years and continue to inspire and support us.

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

Report and VdGM response to Astana Declaration

To know more about our mission and vision, our successes and challenges last year, our tasks, plans and hopes and also VdGM response to Astana Declaration please see our [2018-2019 Annual Report](#).

Future events

[Forum in Torino](#)

September 27-29, the first capital of Italy invites future and young family doctors from all over Europe to share science, spirit of innovation, friendship, joy, young energy and passion for family medicine in Torino, Italy. Prior to the Forum, there will be a conference exchange. The Torino Forum will be linked to the already famous EQUIP Summer School and the pre-forum Symposia will be offered.

[VdGM Vigo Conference Exchange](#)

Linked to the 89th EGPRN Meeting

October 13-20, 2019 we are delighted to invite all the European young and future family physicians to participate in our VdGM conference exchange in Vigo, Spain. Our guests will attend the Galician practices on October 14 and 16, and will be invited to participate in the 89th EGPRN meeting.

See you soon in Torino!

Katarzyna Nessler (President) and Elena Klusova (Events Officer) on behalf of the VdGM Executive

WONCA CONFERENCES

WONCA Conferences 2019

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 15-18, 2020	World Rural Health Conference	Dhaka, BANGLADESH	Save the dates
April 23-26, 2020	WONCA Asia Pacific region conference	Auckland, NEW ZEALAND	www.woncanz2020.com/
April 27 – May 2, 2020	VIII Cumbre y Congreso Iberoamericana de Medicina Familiar	San Juan, PUERTO RICO	http://cimfwonca.org/eventos/proximos-regionales/
June 24-27, 2020	WONCA Europe region conference	Berlin, GERMANY	www.woncaeurope2020.org
November 26-29, 2020	WONCA World conference	Abu Dhabi, UAE	http://wonca2020.com

Member Organization Events 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**

- 01 Oct **conference**

2019 Nanterre, Paris, France

17 Oct **EGPRN meeting**

- 20 Oct Vigo, Spain

2019

18 Oct **1st Omani Family Medicine Conference**

- 19 Oct Muscat, Oman

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**

- 02 Nov **médecine familiale**

2019 Vancouver, Canada

07 Nov **EURIPA Rural Health Forum**

- 09 Nov Azores Islands, Portugal

2019

16 Nov **North American Primary Care Research**

- 20 Nov **Group (NAPCRG) annual conference**

2019 Toronto, Canada

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

WONCA endorsed events

16 Nov **NAPCRG Annual Meeting**

- 20 Nov Toronto, ON, Canada

2019

