



**INTERNATIONAL CONFERENCE ON  
PRIMARY HEALTH CARE**

**CALL TO ACTION**

SEPTEMBER, 2023



# ICPHC 2023

## INTERNATIONAL CONFERENCE ON PRIMARY HEALTH CARE CALL TO ACTION

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From September 5-7, 2023, the International Conference on Primary Health Care in Addis Ababa convened more than 600 Primary Health Care leaders, champions and advocates from approximately 50 countries.. The Conference call to action is for bold investments in Primary Health Care to fulfill Astana commitments and to achieve Universal Health Coverage by 2030. Primary Health Care is the foundation for achieving Universal Health Coverage.

The delegates of the International Conference on Primary Health Care 2023:

- **GUIDED BY** the Declaration of Alma Ata in 1978, when the global health community made the bold political commitment to identify Primary Health Care as the key to attaining Health for All;
- **REAFFIRMING** the 2018 Global Conference on Primary Health Care in Astana, where we marked progress, and governments, professional organizations, academia and global health and development organizations renewed their political commitment to Primary Health Care primary health care;
- **DEEPLY CONCERNED** that at the midpoint of the Sustainable Development Goals, the world is progressing at one quarter of the rate needed to reach our health-related targets by 2030;
- **AWARE THAT** the United Nations General Assembly will host a High Level Meeting on Universal Health Coverage
- **OBSERVING WITH CONCERN** that the COVID-19 pandemic revealed that countries at all levels of the economic spectrum struggled to deliver essential health services equitably and to every household due to shortages in health workers, supplies and facilities;
- **EMPHASIZING** that the choices we make now determine how national health systems will perform in a crisis;
- **FURTHER RECOGNISING** that strong national systems delivering Primary Health Care to every individual with trained, supported and supplied health workers contribute to outbreak prevention and detection, healthy communities that can withstand shocks and stronger global health security;
- **CONVINCED** that the Primary Health Care approach brings health care closer to communities and, if implemented successfully, it can help deliver at least 90% of the health care people need throughout their lives;
- **RECOGNISING** the evidence that countries that make a radical commitment to community-based Primary Health Care achieve years longer life expectancy than others at the same or even higher income levels;
- **DETERMINED** that income is not destiny, that policy choices matter and that we must invest wisely for resilience, based on data and evidence of where the most benefit will be achieved;
- **FULLY BELIEVING** that Primary Health Care must be grounded in equity, bringing accessible, affordable health services to where people live, play and work; connecting them to the national health system and engaging communities to participate in their own health care;
- **DETERMINED** to collaborate and align support of professional associations, civil society, bilateral and multilateral institutions, and international organizations with countries' priorities for Primary Health Care;

Hereby **RESOLVE** that it is time for political commitment, vision and leadership to choose to invest in health, as an integral part of social and economic development, a building block for peace and a fundamental human right.

The delegates of this International Conference on Primary Health Care hereby **CALL FOR THE FOLLOWING ACTIONS and COMMITMENTS** by governments, international organizations, bilateral and multilateral partners, professional associations, civil society, private sector and communities:

## **MAKING BOLD POLITICAL CHOICES FOR HEALTH to**

- **COMMIT TO** Primary Health Care at the highest level of government through executive endorsement and coordination across ministries of finance, health, education and others;
- **RADICALLY REORIENT** health systems towards high quality Primary Health Care to improve health outcomes, protect against threats and improve life expectancy for all people;
- **ENSURE** optimal allocation of health budgets for Primary Health Care, based on data, evidence and results, as part of this radical reorientation
- **FULLY INVEST** in human capital: a multidisciplinary health workforce that is trained, supported, salaried, supervised, protected and fully integrated into national health systems;
- **ORIENT** Primary Health Care to the needs of people of all ages and to everyone, inclusive of gender, economic or social status, ability, creed, language or geographic location;
- **ENSURE** access to essential medicines, diagnostics, technologies and innovative tools;
- **INVEST** in and **HARMONIZE** inclusive knowledge systems from facility to national levels and ensure knowledge informs policy and leads to change that realize people's right to health.
- **ENSURE** donor financing moves beyond health area silos and offers flexible investments that support country goals of integrated people-centered PHC for UHC.
- **PRIORITIZE** peace and security. Short- and long-term conflicts have the potential to damage long term investments and gains.

## **BUILD SUSTAINABLE PRIMARY HEALTH CARE to**

- **MAKE** primary health care investable, measurable and visible
- **ENGAGE and CO-CREATE** Primary Health Care with communities so that services are tailored to local needs and inclusive across all populations;
- **FULLY INTEGRATE and INVEST** in the integrated health workforce to deliver primary health care, including community health workers, using competency based education, aligning tasks and roles, remunerating, supervising, protecting, supplying and facilitating referral to health facilities;
- **INTEGRATE** service delivery across prevention, promotion, diagnosis and treatment for greater people-centeredness and efficiencies;
- **ENSURE INCLUSIVENESS** of primary health care across the life course. Services need to be responsive and welcoming to all people including those with disabilities, adolescents, people of all genders and others that have experienced exclusion from health care;
- **BUILD** primary health care resiliency to respond to shocks, applying learnings from COVID-19, other health emergencies, and situations of conflict, fragility and violence
- **LEVERAGE** innovative tools, including digital tools and systems, to increase access to and efficiencies of primary health care
- **ENSURE GENDER-RESPONSIVE APPROACHES** to Primary Health Care design, workforce, financing and monitoring.

## EMPOWER INDIVIDUALS and COMMUNITIES

- **RESPECT** the power of communities, who should be fully engaged in their own health to survive and thrive every day;
- **RECOGNIZE** communities as a building block of the health system, not only as service delivery targets but as stakeholders.
- **SUPPORT** the Primary Health Care workforce, many of whom are women, removing barriers to fully realizing their capacity, protecting them from violence and harassment and recognizing their career and leadership potential;
- **ENSURE** that evidence, monitoring and evaluation includes experience and knowledge from communities and that the health systems data and analysis is shared back with communities;
- **ENGAGE** young people, powerful change agents, to promote and engage with their own health and that of their community, both as an act of justice and compassion, and of wisdom and vision;
- **FOSTER and HARNESS** an active learning agenda to drive policy and implementation for Primary Health Care, co-created with communities, health workers, policy-makers and researchers;

## ALIGN STAKEHOLDER SUPPORT with national plans, strategies and policies

- **ONE TEAM-ONE PLAN-ONE SYSTEM** should guide all collaboration and alignment of support to countries' priorities for Primary Health Care;
- **RECOGNISE** that the private sector also plays an important role in the delivery of Primary Health Care, and align activities and plans between government and the private sector;
- **ENGAGE** the private sector to contribute corporate social responsibility resources for sustainable primary health care;
- **HARMONIZE** humanitarian, development and peace strategies for health to align workforce, resources and systems toward the singular ambition of Health for All through Primary Health Care;
- **INCUBATE, CAPTURE and IMPLEMENT** innovative approaches to Primary Health Care by leveraging digital health, service delivery and financing mechanisms including blended financing and demand-side financing mechanisms.



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RESILIENT PRIMARY HEALTH CARE: THE FOUNDATION OF  
UNIVERSAL HEALTH COVERAGE IN THE ERA OF SUSTAINABLE  
DEVELOPMENT GOALS