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"Passionate for Primary Health Care" Dr. Mirta Roses Periago, PAHO

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Dr. Mirta Roses Periago, Director, PAHO

Dr. Mirta Roses Periago, Director of PAHO, the Pan American Health Organisation told us: *"I am passionately in favor of Primary Health Care because I believe we need to have in place well-functioning health systems!"*

Q: *Commenting on two opposite vision of PHC, a session moderator commented that Alma Ata's definition of PHC was that of ESSENTIAL health care for all, but many have redefined PHC as "PRIMITIVE health care". Would you care to comment?*

Dr Mirta Roses Periago: I am passionately in favor of Primary Health Care because I believe we need to have in place well-functioning health systems that are:

- Able to protect the population under any circumstances;
- Resistant and resilient in the face of crises;
- Capable of reacting rapidly and developing urgent strategies;
- Skilled at rebuilding themselves as necessary to respond to current and future challenges arising from demographic and epidemiological changes.

Only such health systems will lead us to achieve health gains that are sustainable and have reasonable costs, while ensuring equitable access to health care. Because of that, I do not think there is any primitiveness in the PHC approach –nor there should be, for that matter. On the contrary, it is a crucial instrument to help all countries achieve the goal of providing Health for All, no matter their economic development stage.

Q: *Addressing a plenary at the Geneva Health Forum, you outline the essential role of the State if health system are to be well functioning, equitable and financially sustainable, are you supportive of the international movement for a universal health and social security system which the Brazilians are seeking to bring about with the government-civil society and trade union conference later this year[1]?*

Dr Mirta Roses Periago: For decades I have promoted the building of health systems that ensure universal and equitable access to health care benefits, as well as the role that must be played by the State –as the expression of society as a whole– on that endeavor. So, I am happy when I see people embracing such ideas. Having said that, we must be aware that there is no single way to apply the PHC approach and all what it implies. Each country historical, political, epidemiological and socioeconomic factors could and should influence its specific policy mix, as long as it responds to the values and core principles that inform the PCH strategy.

Q: Do you consider PHC as part of the struggle against poverty, and what are your thoughts on the World Alliance for Patient Safety's Challenge: Safe water, clean care, safe blood, safe injection, essential technologies?

Dr Mirta Roses Periago: The PHC strategy is vital in the fight against poverty, and it is not possible to succeed in the latter without following the basic tenets of the former. Let us remember that equity, solidarity and the right to highest attainable health are the core values of the PHC approach; while its guiding principles are the responsiveness to people's health needs, social justice, quality-oriented services, government accountability, sustainability, participation and intersectoriality. To achieve the Millennium Development Goals, the most ambitious endeavor ever pursued against poverty, it is necessary to follow said values and principles, as well as having adequate investment in health systems, as the 61st World Health Assembly warned recently.

As per the World Alliance for Patient Safety, I am very keen on all its pursuits –loving in particular the emphasis on citizens' participation and on articulated efforts between private and public actors to further what should always be our foremost concern: patients' safety and well-being. We have been working hard promoting those objectives you mentioned and providing technical cooperation to advance them, and that is also the reason we felt so honored at the Pan American Health Organization for the opportunity to host the recent launching of the second Global Patient Safety Challenge –the initiative "Safe Surgery Saves Lives".

Q: You say that "the PHC approach has been influential in (...) realizing the potential for citizen participation in health-related decision making" Well, don't you think that we would improve the realisation of universal health system by allowing for full participation of patients right now?

Dr Mirta Roses Periago: I agree that actively promoting the participation of patients is an underpinning of any success in health care. We have seen time and again that the participation of all sectors of the civil society, and certainly patients are at the forefront, improves the outcomes of health care. Every year, when participating in our Vaccination Week of the Americas –which is now happily spreading to other Regions– I cannot help but marvel at the power of health care initiatives to arouse the interest of patients, volunteers, non-governmental organizations, professional associations and many other groups, to conquer challenges that would be otherwise insurmountable.

Q: Disability is a sub issue in the WHO, coming under accidents and injuries – yet everyone including yourself agree that the world population living longer, disease and pathologies of aging are becoming very important even where infectious diseases are predominant. Clearly, this means that the world population of people living with a disability – today at about 650 million, is going to sharply increase.

Some of us are campaigning for a full department status for disability in the WHO, would you agree?

Dr Mirta Roses Periago: Certainly the numbers of people living with a disability are high and set to rise. So, no matter the specific form of organization chosen, which takes into account many factors and limitations, it is very important to ensure that our response to those needs is strengthened and has the necessary flexibility to be scaled up as necessary. This is an issue that the WHO is pretty aware of and I am sure that all efforts necessary to address it will be made.

Q: A last related question: Don't you think the world health milieu should stop ignoring physiotherapy? The first Professor in charge of physiotherapy in primary health care [2] commented: what is the point of living very old if you are bed ridden and numb with pills? This means good profits for the pill industry but a poor end of life for millions [3]...

Dr Mirta Roses Periago: I think there is a growing awareness of physiotherapy's important role in ensuring patients' well-being among health professionals, and a clear understanding that in the quest for proper health care all areas of expertise have a role to play and that them all must be

properly taken into account when providing care and designing health systems. During the last 20 years we have been advocating in the region for the community based rehabilitation approach integrated with PHC, which has created a strong network with physiotherapists, orthopedics, prosthetics, sports medicine, alternative-traditional and natural therapies and so on, as well as incorporated rehabilitation and physiotherapist facilities in many PHC-community health centers, starting with the expansion of local services initiated by Cuba.

[1] **World Conference on the Development of the Universal Health and Social Security Systems** – conference organized out of the National Health Council of Brazil, with Armando di Negri as focal point and the PHM. The conference initially planned for December 2008 has been postponed until November 2009.

[2] Manikandan Ellangovin in Gono Bishwabidyalay, the People's University, founder of the PHM, People's Health Movement.

[3] As someone who survived 85% paralysis from a bad polio vaccine in early childhood and who recovered excellent walking capacities by aged 13 thanks to daily very intensive physiotherapy – and only got a wheel chair at age 53 after leg breaks, I have proposed a new movement "***Physiotherapy as PHC for All to Bankrupt Pill Pushers***"...