## Three decades of primary health care: reviewing the past and defining the future

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The year 2008 marks the 60th anniversary of the World Health Organization and the 30th anniversary of the Alma-Ata Declaration advocating primary health care as the main strategy for achieving health for all by the year 2000. At the turn of the century, it was clear that the health for all target was not fully achieved. Despite a 34% reduction in global infant death rates between 1975 to 1995, huge improvements in immunization coverage for children less than one year old (from 20% to 80%) between 1980 and 1990, and improvement in population access to safe water and sanitation, health for all fell short of resolving health inequities.1 New medicines and vaccines were developed, but prices were out of reach of poor countries and delivery systems were often inadequate. The HIV epidemic in the 1990s reversed 30 years of gains in life expectancy, particularly in sub-Saharan Africa. Global health inequities persist – infant mortality and skilled birth attendances vary with income quintiles. Catastrophic healthrelated expenditure and subsequent impoverishment show the failure of health financing policies to build safety nets for poor populations. There are many other examples of unacceptable and avoidable disparities, among and between countries, which will need to be overcome.2 Failing to achieve health for all is equated by some with the failure of primary health care itself.3 The concept itself, its remaining potential, and its vital roles<sup>4</sup> are all undermined by this simplistic equation. The principle of community participation and the use of appropriate technology have proved to be effective strategies in combating some diseases. For example, the eradication of guinea worm in

African countries was accomplished without new drugs or vaccines, but through grassroots public health interventions on the modest budget of about US\$ 225 million for a 20-year campaign.<sup>5</sup>

Constraints in health systems, especially in resource poor settings, often prevent lasting improvements in the health of the population. These constraints range from physical and financial barriers to services, to a persistent lack of appropriately skilled and motivated health workers resulting in poor quality of care, to weak planning and management, and deficits in intersectoral actions and partnerships.<sup>6</sup>

To revitalize the functioning of primary health care in the context of globalization, there is a need to review past experiences and redefine future roles to meet the complexity of today's health challenges. To contribute to this effort, the annual Prince Mahidol Award Conference (available at: http://www.pmaconference.org) will discuss the theme of "Three Decades of Primary Health Care: Reviewing the Past and Defining the Future". The conference will be held from 30 January to 1 February 2008 in Bangkok, Thailand.

The conference serves as a neutral and participatory global forum to discuss significant global health issues and is co-hosted by WHO, the World Bank and the Royal Thai Government. Interested partners can use this annual forum to debate specific global health agenda items, provided that they are open to different views and critiques. The organizing committee felt that it was essential to hold an annual conference in order to anticipate and respond to both rapidly emerging topics and the constant change in the global health agenda.

This conference is the third in a series of primary health care conferences (Buenos Aires in August 2007, Beijing in November 2007, Bangkok in January 2008, and others planned in Africa and Kazakhstan) to commemorate the 30th anniversary of the Alma-Ata Declaration.

The conference invites the international community; public health leaders, civil society, governments, private sector and academia, to contribute to the global debate on primary health care and discuss lessons learnt. We will measure its success by the degree of active participation and deliberations, frank assessment and evidence-based recommendations that it generates. This conference is expected to produce tangible recommendations on how primary health care should address current and emerging challenges in public health.

## References

- Chan M. The contribution of primary health care to the Millennium Development Goals. Opening address of: International Conference on Health for Development, Buenos Aires, Argentina, 16 August 2007. Available at: http://www.who. int/dg/speeches/2007/20070816\_argentina/en/ print html
- Review of the health inequalities infant mortality PSA target. United Kingdom: Department of Health; 2007.
- Renewing primary health care in the Americas. PAHO: 2007.
- Declaration of Alma-Ata. In: International Conference on Primary Health Care, Alma-Ata, USSR, 6–12 September 1978. WHO; 1978.
- Barry M. The tail end of Guinea worm global eradication without a drug or a vaccine, New Engl J Med 2007;356:2561-2564.
- Travis P, Bennett S, Haines A, Pang T, Bhutta Z, Hyder A, et al. Overcoming health systems constraints to achieve the MDG. *Lancet* 2004; 364:900-6. PMID:15351199 doi:10.1016/ S0140-6736(04)16987-0

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