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PRIMARY HEALTH CARE

Economic, demographic, sociocultural and technological changes in the Western Pacific Region are heightening public health challenges that countries face, including a growing burden from noncommunicable diseases and population ageing. Primary health care remains focused on a disease-based approach that increasingly cannot accommodate the current needs of the Region's people or the challenges the future will bring.

Building a health system that is ready for the future requires a shift in primary health care from disease-based to continuous interaction with individuals, promoting the highest level of health and well-being throughout the life course. A new model for primary health care is needed to ensure financial sustainability of the health system and use resources more effectively to achieve optimum health outcomes. This new approach must respond to the changing health needs and expectations of populations and increase population participation in health, thereby ensuring satisfaction and building trust in primary health care. The reimagined and strengthened model of primary health care proposed is vital for building strong and resilient health systems in the Region.

The Regional Committee for the Western Pacific is requested to consider for endorsement the draft *Regional Framework on the Future of Primary Health Care in the Western Pacific*.

1. CURRENT SITUATION

The Western Pacific Region has a dynamic population, with countries and areas undergoing economic, social and epidemiological transitions. These are resulting in changing health needs, with a greater burden of chronic and noncommunicable conditions, as well as the impacts of population ageing. Noncommunicable diseases now represent four of the five leading causes of mortality in the Region, while the proportion of people aged 65 and above is expected to double by 2050 compared to 2020. These troubling trends are well outlined in *For the Future: Towards the Healthiest and Safest Region*, the vision for WHO work with Member States and partners to make the Western Pacific the world's healthiest and safest region. Realizing this vision requires a new approach to primary health care (PHC) that intervenes early in the care continuum and focuses on keeping people healthy.

The ongoing coronavirus disease (COVID-19) pandemic has demonstrated the central role of PHC in building resilient systems that can respond to external shocks. The pandemic has negatively impacted essential health services and stalled country progress towards the Sustainable Development Goals. At the same time, however, the pandemic has led to innovations and highlighted new ways to organize services, expand and sustain access to quality care, as well as a whole-of-government approach to health.

Primary care provides an important platform and integration point for Member States to deliver comprehensive health services and promote well-being for populations along the life course. A reimagined PHC envisions a future in which populations can interact continuously with the health system to maintain the highest possible quality of health, rather than the current selective and disease-based approach.

At the high-level panel discussion on PHC at the October 2021 session of the Regional Committee for the Western Pacific, Member States affirmed the need for strong PHC systems, with three main points. First, reimagining PHC for the future requires intervening as early as possible in the health continuum to ensure the financial sustainability of the health system. Second, leveraging the opportunities and lessons of the COVID-19 pandemic response is important to drive this transformation towards stronger PHC. Third, new ways of organizing, financing and delivering PHC services, driven by the community, are required.

The panel discussion among Member States concluded with a mandate to WHO in the Region to develop a draft regional framework. The draft *Regional Framework on the Future of Primary Health Care in the Western Pacific* sets a vision of the future of PHC, outlining key strategic actions that should

be taken to build on the principles of PHC highlighted in the [Declaration of Alma-Ata](#) in 1978 and reaffirmed in the [Declaration of Astana](#) in 2018.

The draft Regional Framework also provides important linkages with other regional frameworks, such as the [Regional Action Plan on Healthy Ageing in the Western Pacific](#) and the [Regional Framework on Nurturing Resilient and Healthy Future Generations in the Western Pacific](#), as well as new frameworks on reaching the unreached, noncommunicable diseases and mental health, which are also being considered for endorsement by the Regional Committee this year.

2. ISSUES

2.1 Building a health system to address evolving needs and sustain gains

Changing demographic patterns with resultant changes in health and disease burden are leading to shifts and greater complexity in population health needs. Noncommunicable diseases comprise four of the five leading causes of mortality across the Western Pacific Region. Countries and areas in the Region have made considerable progress in reducing the burden of infectious disease and maternal and child health conditions. But these gains must be sustained while further efforts target those who remain unreached. Responding to these changing population needs requires going beyond addressing ill health to help individuals maintain well-being and achieve the highest possible quality of life for the longest time possible. This calls for a redesign of PHC services, building on previous successes and drawing from innovations to better respond to the needs of today and the future. An expanded and diversified workforce will also be required to deliver primary care to accommodate changes anticipated in people's health needs in the future.

2.2 Creating a sustainable health system with strong financial protection

Economic uncertainty will persist in many countries in the Western Pacific Region even after the COVID-19 pandemic. Across [Asia and the Pacific](#), gross domestic product is expected to grow by 4.9% in 2022 and 5.2% in 2023, which is lower than initial forecasts and less than 2021 levels. Less growth combined with increased debt burden could have a negative impact on government revenues and health financing in the medium term. A weak PHC system would result in decreased preparedness and resilience, resulting in more disease outbreaks – even pandemics – with detrimental effects on economies and societies within and across the Region. At the same time, health-care costs have risen due to: more people receiving unnecessary medical services; unregulated markets, especially where the private sector is large; and the increasing burden of chronic conditions, which has worsened financial

hardship across the Region. The proportion of the population experiencing financial hardship in accessing health services doubled between 2000 and 2019. Stronger PHC is needed to ensure the sustainability of health systems, which will require an increase in financing, along with more effective use of resources. More effective PHC financing will involve mitigating the financial impact of health seeking on populations, while ensuring greater accountability for results.

2.3 Preparing for increasing and changing population expectations

Over the coming decade, population literacy and economic status are expected to grow across the Region. This will raise people's expectations of better services and their desire to have greater input into health care, along with more purchasing power. Evidence indicates that people have lost trust in primary care, resulting in bypassing to higher-level services or forgone health care. This stems from a mix of factors, including suboptimal care experience, poor attitude of health-care workers, and lack of essential commodities and medicines. Responding to these issues will require strategies to empower populations to play a greater role in self-care and maintaining their health, as well as increased participation in health policy and decision-making.

2.4 Ensuring services reach everyone where they live and work

Access to essential health services close to where people live and work remains highly inequitable, within and across countries. Segments of the population still face barriers to health services due to their economic status, location, ethnicity, immigration status or disability. In 2017, less than half of the people in the world were covered by [essential health services](#). The COVID-19 pandemic has further exacerbated the degree of vulnerability among populations, including in middle- and high-income countries. Implementing PHC that is universally accessible must include targeted approaches to design services that reach those who would otherwise be left behind. This should include both supply-side initiatives that target the workforce and service organization, as well as demand-side interventions that engage communities to facilitate access.

3. ACTIONS PROPOSED

The Regional Committee for the Western Pacific is requested to consider for endorsement the draft *Regional Framework on the Future of Primary Health Care in the Western Pacific*.