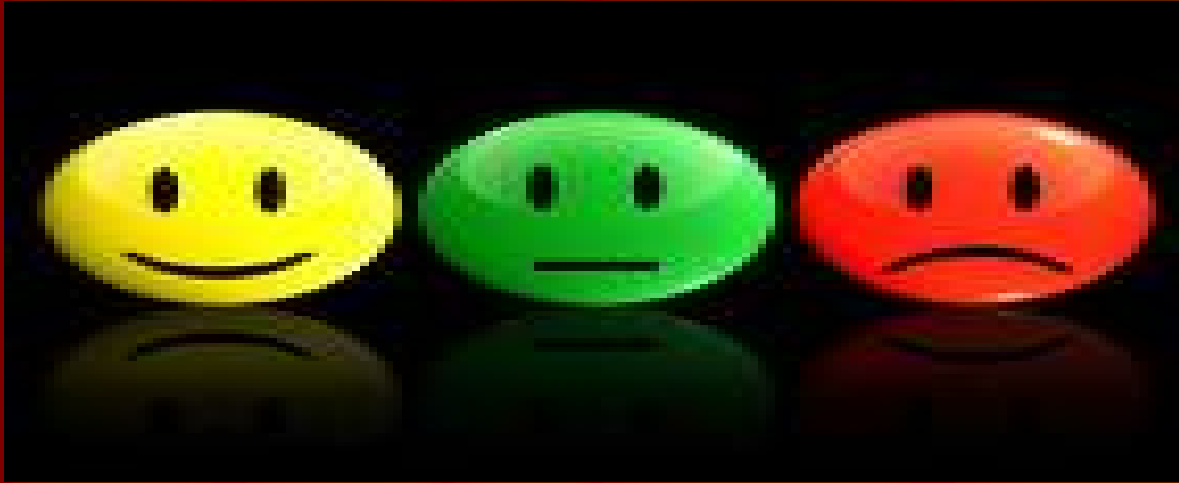


IPHU Short Training Course
Day 1: 22 March 08
Cairo International Scout
Center



Day 1 Feedbacks



9

6

3

Feedbacks on day's content

- Comprehensive;
- Important, valuable & new information (on HS in different countries);
- Good methodology;
- Excellent content;
- Good understanding of PHM;
- PHM principles & vision are similar to those I use in my work;
- Interesting;
- Too general;
- Could be facilitated differently;
- Could be better if reformulated;
- Some things lost in translation

Feedbacks on day's feelings

- Feeling good and sad;
- Happy;
- Ok;
- Good; glad about different backgrounds;
- Relaxed;
- Tired;
- Positive;
- Happy at times and bored at others;
- Neutral.

Day 1 Summary

- Welcome & Orientation
- Overview on IPHU and its relation to PHM
- Overview of the event's programme
- Personal introductions: getting to know each other
- Housekeeping, tasks & announcements: groups (reporting & evaluation, class committee, country groups, ..)

Day 1 Summary

- Panel Discussion on PHM:

(by Drs. Maria Hamlin Zuniga, Hani Seraj, David Legge, Ghassan Issa)

- **Historical overview.** Primary Health Care conference, Alma Ata declaration.
- **PHM's birth** (18 months of mobilization and intensive work: background papers, meetings, workshops...).
- **The 1st Assembly**---charter development: output of a democratic and inclusive process.
- Use of existing local resources without the need of large private institutions to organize the event (GK).
- Mortality rates, insurance. Examples of health policies.

Day 1 Summary

- **PHM Alternative Agenda:**

- Health as a social, economical & political issue, a fundamental human right.
- Comprehensive primary Health care: comprehensive approach, community- empowerment approach...
- Building a world wide, inclusive movement.

- **Tools:**

- Global Health Watch (MedAct& PHM). An alternative health report that is diverse, participatory, inclusive...
- Right to Health Campaign. (Assessment tool for violation to health...).
- Hold the WHO to its principles (active participation in WHA, engaging with WHO activities & monitoring, social determinants to health...).

Day 1 Summary

- **PHM:**
 - Sees itself as a global actor for health.
 - Striving for Health for All through “comprehensive health care” .
- **PHM in India** (Journey from Kolkata to Bhopal). Publications, activities, public hearings, campaigns, social forum ...
- **PHM in Latin America.** Reflection on the need for local movements in addition to global one/s. + Reference to the difference between primary health centers and community based health care. In Latin America, IPC before PHM there. Health being the way u relate to ur environment. Work with indigenous people.
- Primary health care: another commitment.

Day 1 Summary

Dr. Sabri from WHO

● Health Systems

→ *Definition.* Combination of resources, organizations, finances

→ Dynamic and changes over time.

● HS goals:

→ Improve health

→ Reduce health inequalities

→ Responsive to users' needs

→ Secure financial contribution

Day 1 Summary

- **HS in EMR**

- ⇒ *Common features*

- ⇒ Major issues & challenges

Changing role of governments (less commitment to health issues), efforts to protect reforms), active & passive privatization, weak HS governance, weak management of public/ private mix, weak decentralization of service delivery, response to globalization, interest in social determinants to health.

- ⇒ **Waves of Policy Reform**

- ⇒ **Directions to improve HS Performance**

- ⇒ **Conclusion on HS & Recommendations** (need to strengthen MoH, needs for training and investing in health education, developing analytical tools, strengthen information support to HS...).

HS in Arab Countries

- Health Care system in Egypt; Lebanon; Yemen; Jordan; Syria; Tunisia; Palestine
- Country group work:
 1. What are the elements of the charter which would be particularly useful in our work?
 2. What elements of the charter need to be reworked or changed?

...also

- Plenary discussion of charter;
- Dinner 😊 & opening ceremony!!!

