



## The pandemic of chronic diseases – another challenge for equitable PHC

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### Burden of Disease (DALY Disability-adjusted life years)

	Global DALYs	SSA DALYs	Cameroon DALYs
HIV/AIDS	84'457'784	63'962'104	1'434
Tuberculosis	34'735'908	9'266'350	680
Diabetes	16'194'381	1'114'952	107
Hypertension	7'646'994	586'467	15
ALL CAUSES	1'490'125'643	361'376'478	7'615
Proportion of the four diseases among all causes (%)	9.5%	20.7%	29.3%

### The 30th anniversary of the Alma Ata movement on PHC

- ❑ Is there something to celebrate?
- ❑ I am hesitant about this.
- ❑ I remember Liverpool 1994:
- ❑ There are two threats to PHC:
  1. the AIDS epidemic and
  2. Reaganism/Thatcherism.
- ❑ Today? There is still and even worse the AIDS epidemic and there is the neo-liberal thrust.

### A paradigm shift

- ❑ *It is only very recently that public health and epidemiologic is shifting*
- ❑ *“away from the health concerns of the 20th century when acute diseases, quite easily treatable, and mainly by doctors, were the primary focus in every country”*
- ❑ *towards chronic conditions that currently account for more than half of the global disease burden and will be the primary challenge for 21st century health care systems.*

Pruitt, 2005 (BMJ)

### The essence of the chronic care model

- ❑ *-- is the interaction between an informed, activated patient and a prepared, proactive practice team. Indeed, such a team is nearly always needed to enable patients to become adequately informed and activated.*

### THE QUOTE

- ❑ *“Yet the healthcare literature and the experience of many efforts to improve chronic care indicate that nurses, not doctors, are the key to implementing the chronic care model in a patient centred care team”.*
- Bodenheimer & Mc Gregor, 2005: Nurses as leaders in chronic care (BMJ)

### The central role of nurses...

#### □ ... in implementing components of the chronic care model

- *In a study, patients attending a diabetes clinic with a nurse, compared with those getting the usual care, had lower mortality and a lower incidence of adverse clinical events after a median follow up of seven years.*

### Health worker shortage, HRH crisis: some figures

- 1.6 per 1000 – nurse density in Cameroon
- 10.8 per 1000 – nurse density in Switzerland
- 52% of health workers intended to migrate and to leave Cameroon
  - (for comparison: Ghana 62%)
- 50% - Nurses represent roughly 50% of all health workers in a health system
  - (doctors: ca. 15%).

### Civil society's report for the Commission on Social Determinants of Health

- *Further, the Commission needs to recognise and articulate the impact of global factors that impinge upon the enjoyment of the right to health in all nations across the globe.*
- *These factors would include:*
  - *Those Related to Health Care and Services*
  - *On health workers: The impact of the global migration of health workers from countries in greater need to countries with greater resources on the health, and mitigating policies to reduce global health inequities arising from such flows*

### Five core competencies

- Patient-centred care
- Partnering
- Quality improvement
- Information and Communication technology
- Public Health Perspective
  - From: "Preparing a workforce for the 21st century: the challenge of chronic conditions (Pruitt, 2005, WHO 2005)

### Chronic diseases and the renaissance of PHC

- We can make this happen,
- when health systems shift
- → away from the acute care paradigm towards a chronic care paradigm,
- → away from specialist care towards comprehensive primary care,
- → away from a physician-centred workforce towards a patient-centred and multi-professional health workforce.

### MAMM, Tanzania


- "Mpango Wa Maendeleo Wa Afya Ya Msingi, PRIMARY HEALTH SERVICES DEVELOPMENT PROGRAMME (PHSDP) 2007 – 2017

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**Essential reading**

- Civil society report for the Commission on Social Determinants of Health
- Closing the gap in a generation - health equity through action on the social determinants of health
- "A renaissance in primary health care", and the Lancet papers of that issue
- People's Health Movement, Global Health Watch 2005-2006. An alternative world health report, ed. M. People's Health Movement, Global Equity Gauge Alliance. 2005, London: Zed Books.

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The screenshot shows the homepage of the Global Health Watch website. The header features the title "Global Health Watch" and the tagline "Mobilising civil society around an alternative World Health Report". The date "September 13, 2008" is displayed in the top right. A navigation menu on the left includes links for Home, About GHW, GHW 2005-6, Get involved, Case Studies, Newsletter, Collaborators, Contact Us, Advocacy, GHW 2007-08, Other Health Watchers, and Media Centre. The main content area highlights a "NEW!" call for case studies for GHW 2007-2008, mentioning the "Global Health Watch and Global Health Action Global Health Action available in Spanish, French, Arabic". It also offers to order a copy of the Global Health Watch book. A sidebar on the right contains a "LET'S INVOLVE" section, a "CONTACT DETAILS" section with an email address, and a "Contact us in Spanish, French and Arabic versions of our website" link. The footer contains a paragraph about the Global Health Watch's mission to broaden and strengthen the global community of health advocates.

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The screenshot shows the "Geneva Health Forum 2008 Online News" website. The header includes the title "Geneva Health Forum 2008 Online News" and the subtitle "Strengthening Health Systems and the Global Health Workforce". The date "September 23, 2008" is visible. The navigation menu includes Home, About, Organization, Health Update, Newsletters, Health for Tomorrow, Research & Policy, Global Health TV, Jack Torbett, Forum 2008, Forum 2008, About May Day, and Home. The main content area features several news items: "Primary healthcare and social determinants of health", "Social Determinants of Health: What is Next?", "Primary Healthcare Revisited in a Multistakeholder Landscape", and "Primary Healthcare Revisited: Beyond Declarations". The footer contains the text "Division of International & Humanitarian Medicine – Department of Community Medicine and Primary Care" and the HUG logo.