

WONCA News

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World family doctors. Caring for people

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From the President: July 2020



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By the time you read this column most of you will know that we have had to take the decision to postpone our World Council and conference planned for Abu Dhabi in November, to be hosted by the Emirates Medical Association. It was a difficult decision for many reasons, not least because the extenuating circumstances in which we all find ourselves are not accounted for in our organisation's Bylaws. That is not a complaint – indeed, it would have been surprising if the weird and frightening situation across the world today could have been imagined over the years, during the various iterations and revisions of our Bylaws.

The decision to postpone was taken after seeking and listening to advice from our 'elders', some of whom have been involved in WONCA for 50 years and more! We also took legal advice from our resident doctor/lawyer Prof Rich Roberts. And we had numerous discussions with the Abu Dhabi Host Organising Committee (HOC) and the Professional Conference Organiser (PCO). As the discussion continued over some weeks, our colleagues in Abu Dhabi took the view that they could not guarantee safety of those who would want to attend the Council and conference in November. A question asked of our Executive in May showed that only two members felt they would be able to participate in person, due to their own country / state travel restrictions and quarantine arrangements. As I will describe later, this posed a separate problem!

With time creeping towards a date when

people have to make decisions about international travel, we then looked at the possibility of holding the World Council meeting and conference virtually. The PCO came up with really impressive systems for holding virtual meetings and, despite the absence of face to face chats and renewals of friendships, some on Executive were keen to proceed with a virtual event.

Most people will never have heard of Roberts Rules of Order. No relation to our own Rich Roberts! But the book is used by WONCA (Council and Executive) and many other organisations as their parliamentary procedures manual. The manual (we are currently using the 11th edition) provides procedures and structure on issues such as meetings, voting, quorum arrangements, conflicts of interest and much, much, more.

Based on Roberts Rules of Order, we could have called an Extraordinary Meeting of Council. But we still faced the problem of only those eligible Member Organisations, represented in person at the Extraordinary Meeting of Council, being entitled to vote. Given the difficulty of people travelling and participating in person, this would have presented a serious challenge for reaching the required quorum. There was no flexibility. Any change or suspension to that rule would be a decision to be taken by Council – which brought us back to square one. If Council cannot meet in person, how can Council vote to suspend a rule?

As events progressed and second waves of the pandemic began to erupt, the decision about postponement or holding the World Council and conference became increasingly urgent. With most members of Executive having previously indicated that they would not be able to participate in person, it was crucial to consult with our Member Organisations – the members of Council – in the decision-making process.

At the same time as we wrote to Member Organisations, the Royal Australian College of GPs, which is scheduled to host the World Council and conference in 2022 contacted the WONCA Secretariat to suggest that they would be content to defer hosting the '2022'

World Council and conference until the following year. This was a relief, as the alternative would have been to hold a World Council and conference in two successive years – a massive undertaking.

It was really heartening and very important for us to receive speedy feedback from the Member Organisations that they were happy to postpone this year's planned World Council and conference until 2021.

Everyone working in family medicine is acutely conscious not just of the challenges of detecting and treating patients with COVID19 but with the backlog of 'normal' illnesses and diseases which may have gone undetected and untreated due to patients being wary of consulting their family doctors while the risk of contracting COVID was high. To suggest that there will be a tidal wave of demand for family medicine services after the initial phase of the pandemic is over is not an understatement.

Many of our Member Organisations thanked us for consulting with them and for keeping them in the picture of where our discussions were going. Quite a few commented how much they appreciated being consulted and offered examples of their own displaced arrangements for in-person meetings which had to be cancelled or postponed. See the

CEO's column for the outcome of deliberations and news of other cancellations and postponements.

WONCA is an organisation of organisations. Our strengths stem from our members, those national colleges and academies which support the 500,000+ individual family doctors and GPs globally. We do not take that support for granted. The Member Organisations in each region vote to select their own region president, who, among other responsibilities, represent the region on Executive. The President, President-Elect, three Members at Large and the Young Doctor representative are elected directly by the full Council onto Executive: they will each remain in their posts until the next meeting of World Council and are honoured to do so.

Our constituents are our members; in the regions and globally. We do not just welcome their participation in the decision-making process: we depend on it. Especially in such unprecedented times, we warmly thank our Member Organisations for their continued support and collegiality. Your Executive does not take momentous decisions lightly.

Please stay safe and be kind to each other.
Donald Li

From the CEO's desk: July 2020

Greetings again. COVID-19 still rages in many parts of the world, and family doctors continue to work on the front line of this dreadful pandemic. You are all very much in our thoughts and prayers at this difficult time.

WONCA World in Abu Dhabi (and Sydney)

The main news this month concerns confirmation of the postponement of our World Council and conference in Abu Dhabi. I wrote last month that considerable time and effort had gone into looking at a variety of options, forced on us by the COVID-19 pandemic. Many of our preferred options were either not allowed under current WONCA Bylaws or else ran the risk of not achieving a quorum in

council, thereby rendering any decisions made invalid.

We had narrowed options down to two main ones, which were then put to Executive and circulated to our Member Organizations (MOs) for consultation. We were really pleased to receive many responses from MOs, and gratified that so many of them expressed their appreciation at being fully informed and consulted. The net outcome was that the vast majority of MOs felt that postponement was the best option, and this was endorsed by Executive at its latest teleconference. A letter has gone out to all MOs informing them of this decision and a copy can be found on the [WONCA website](#).

The postponement is for 12 clear months, with new dates, at the time of writing, for Council

being 21st to 23rd November 2021 and conference from 25th to 28th November 2021. Venue remains unchanged at Abu Dhabi National Exhibition Centre (ADNEC).

Directly linked to this, we have also agreed with the HOC for Sydney 2022 that it will also be postponed by up to 12 months, so instead of October 2022 the events will now take place in the last quarter of 2023, with dates to be confirmed.

The current WONCA Executive will (subject to regional ratifications) continue in office until November 2021. A new Executive will be voted into office at that time and serve until October/November 2023. Finally, the conference provisionally scheduled for 2024 will now move to 2025.

These have been very difficult decisions to have to make in these extraordinary times, but we are especially grateful to MOs for providing us with their views and for their support, and for the great cooperation and flexibility of the HOCs for both Abu Dhabi and Sydney - Emirates Medical Association and Royal Australian College of GPs.

[Some FAQs from HOC for Abu Dhabi](#)

WONCA Events

WONCA conferences are such a great experience, with the opportunity to meet with colleagues from around the globe. 2020 really has been a wipe-out where WONCA conferences have been concerned, though we take some small consolation that – at the time of writing in any case – WONCA Europe will go ahead in Berlin from 17th to 19th December 2020. [More information here.](#)

Sadly WONCA APR, in Auckland (New Zealand) in November, is likely to remain out of bounds for most due to New Zealand's very strict quarantine rules. At best, some colleagues from Australia might also be able to attend.

We do, however, look forward to more WONCA events in 2021:

- WONCA Asia Pacific Region in Yangon, Myanmar, from 9th to 12th April 2021
- WONCA Europe in Amsterdam, from 7th to 10th July 2021
- World Rural Health Conference in Kampala, Uganda, from 5th to 7th August 2021

And in 2022 we can look forward to

- WONCA Europe in London from 1st to 4th June 2022
- WONCA Rural Health Conference in Ireland, dates to be confirmed.

WONCA Webinars

As a way of keeping in contact with our members, and as a partial substitute for our conferences, WONCA ran a series of webinars through April and May this year, which were very well received. We have been taking a short break, but we hope to come back with a second series of webinars in the last quarter of the year. We will be meeting with the leaders of our Working Parties and Special Interest Groups towards the end of July and hope to draw up a programme of new webinars which we will promote to you as soon as we can.

[See WONCA webinars here.](#)

That's it for this month, but stay safe and well, everyone.



Dr Garth Manning
CEO

WONCA Announcements

Postponement of World Conference and Council to 2021

A letter to WONCA member organizations about the postponement of the coming WONCA Abu Dhabi World conference and Council meeting

Dear colleagues

We write to inform you of the decision taken at a WONCA Executive Board teleconference on Thursday 25th June, regarding the Abu Dhabi Council and conference.

After consulting widely within Executive and with Member Organizations (the vast majority of whom supported postponement), and taking account of the views of the Abu Dhabi Host Organizing Committee, Executive has endorsed the decision to POSTPONE the Abu Dhabi Council and conference until November 2021. Council will now take place from 21st to 23rd November 2021, and conference from 25th to 28th November 2021, at the same venue (ADNEC – Abu Dhabi National Exhibition Centre).

After discussion with the HOC for Sydney 2022, Executive also endorsed the recommendation to POSTPONE the Sydney Council and conference until late 2023 (dates to be confirmed).

Regional presidents and other officers are the remit of region councils. Nevertheless Executive strongly recommends that regions follow the same process and timeline as World WONCA, with regional officers remaining in position until the full meeting of World Council in November 2021. We request that regional Councils inform us of their decision once confirmed.

These have been very difficult decisions to have to make in these extraordinary times, but we are especially grateful to MOs for providing us with their views and for their support, and for the great cooperation and flexibility of the HOCs for both Abu Dhabi and Sydney.

[Some FAQs about arrangements](#)

With our best regards
Dr Donald Li, WONCA President
Dr Garth Manning, Chief Executive Officer

RFP : WONCA seeks Association Management Services

Background

The World Organization of Family Doctors (WONCA) is an international non-for-profit association. Its members consist of member organizations and direct members.

WONCA will relocate its current Secretariat to Brussels in autumn 2020. With the relocation, some of the operations carried out by the

Secretariat will be outsourced to an Association Management Company (AMC). The aim is to guarantee continuity of services, facilitate the work of the Secretariat, and enable growth of the association.

Objectives of the assignment

WONCA is seeking to contract a reputable and experienced AMC, which will work with the

Secretariat, to perform the following operations:

1. Membership management:

- Maintaining an up-to-date database of members
- Maintaining up-to-date contact lists
- Processing and follow-up of applications and renewals
- Support in daily communications with members
- Collecting membership dues
- Reporting and recommendations
- Management of booth at conferences
- Attendance to the World Conference and Council meeting

2. Financial knowledge and management:

- Coordination of and communication with bank accounts (in Belgium and abroad)
 - Preparation of payments
 - Book-keeping
 - Monthly accounting reports, comparison of actual expenditure to budget and reconciliation
 - Management of budget, summary reports and annual statements
 - Managing of taxation
 - Preparation for auditing
 - Close collaboration with Honorary Treasurer, Financial Committee and CEO
- Attendance of a representative of the AMC to all in-person and some online meetings of the executive committee will also be requested.

Additional information for on-demand services

AMCs are invited to provide information for the following on-demand services, with the understanding that these are optional, are not part of the core services described in the section “Objectives of the Assignment”, and may not be needed at all:

1. Strategic planning:

- Fund-raising and identification of funding opportunities (e.g., grants) for the development of international projects in support of family medicine
- Elaboration, analysis and presentation of options for developing membership, building loyalty and strengthening links between association and members

- Identifying and planning of new revenue streams
- Identifying commercial partners and maintaining relationships
- Examine and review activities of comparable organisations

2. Technical support for communications:

- Branding
- Promotional material for campaigns, design for print and electronic documents, video editing
- Booth design

Procedure

AMCs intending on submitting a proposal should also include:

- proof of competence of the company (e.g., formal documents, previous projects), with at least three examples of collaborations that are substantially similar to the requested services by WONCA
- the estimated manhours per month for the provision of services

All inquiries should be sent to communications@wonca.net. Additional information can be provided upon signing of a non-disclosure agreement.

Proposals must be submitted by 17.00 CEST on Wednesday, 15 July 2020 to the following two addresses: communications@wonca.net and ceo@wonca.net.

WONCA anticipates selecting at least two AMCs to have more in-depth discussions with and will make the final choice by August 2020.

Kindly note that the lowest offer will not necessarily be accepted. The quality of bid, understanding of the task, and proof of competence of the company will also be factored in the final decision.

WONCA reserves the right to accept or reject any proposal and to annul the selection process and reject all proposals at any time prior to selection, without incurring any liability to the bidding AMCs.

[Download pdf version of this document](#)

WONCA WHO Liaison

Statement of support for WHO

WONCA has released the following statement (endorsed by WONCA Executive) outlining its support for WHO in the current coronavirus pandemic:

The COVID-19 Pandemic constitutes a serious public health crisis, affecting all countries in the world. WONCA recognizes the World Health Organization's critical and leading role during the pandemic, working across six regions, delivering essential equipment, providing technical guidance and education, and mobilizing resources while emphasizing health for all.

WONCA will continue to partner with WHO in its efforts to improve health through providing comprehensive care for people of all ages and encouraging Universal Health Coverage through strong Primary Health Care; and will continue to collaborate in technical papers, educational resources, and policy support.

In addition, WONCA has signed on to letters in support for WHO as a member of the [Global Coalition for Circulatory Health](#) and as a global member of the [Civic Society Engagement Mechanism for UHC 2030](#).

Feature Stories

Guest Feature by John Wynn-Jones: the pursuit of beauty



Dr John Wynn-Jones is well known in WONCA circles and immediate past chair of the WONCA Working Party on Rural Practice. During the COVID-19 crisis he has been writing a daily 'Rural Miscellany' email with poems and resource ideas to help and divert us in this difficult time. After the popularity of his guest columns in May (on "[The Four Seasons](#)") and June (on "[Two paintings and two doctors](#)"), he agreed to entertain us again this month on "the pursuit of beauty"

"Think of all the beauty still left around you and be happy."

Anne Frank

"Clouds come floating into my life, no longer to carry rain or usher storm, but to add color to my sunset sky."

Rabindranath Tagore

"Beauty is only skin deep, but ugly goes clean to the bone"

Dorothy Parker

"Everything has beauty, but not everyone sees it."

Confucius

I have concentrated on four aspects of beauty: Classical Beauty, Inner Beauty, Beauty and Race and Beauty in Nature. Ever since people have been writing poetry, the pursuit of beauty has been one of the main preoccupations. I have chosen four themes but there are many, many more and I may well come back to this topic again soon.

There are also many definitions of beauty, but I decided to go with this one that I found on Google: "True beauty is the state of being authentic and sincere in a way that extends love to yourself and others. It feels real, safe, alive, playful, flowing, authentic, life-giving. And this doesn't mean that beauty never has anything to do with our clothes or hair or bodies or faces".



Photo: Botticelli's ideal model. Her name was Simonetta Vespucci. Apparently he was entrapped by her beauty. She was the epitome of renaissance beauty and her image keeps on appearing in Botticelli's paintings

The first person to use the phrase "beauty is in the eye of the beholder" was Margaret Wolfe Hungerford, who included the phrase in her book 'Molly Bawn' (1878). It is another way of saying that beauty is subjective. I hope that you will agree with me that it's much more complex than just being in "the eye of the beholder".

Classical Beauty

John Keats (1795-1821)

Keats was an English Romantic poet. He was one of the main figures of Romantic poetry, along with Wordsworth, Byron and Shelley. His origins were humble. His father, an ostler (managed horses) in East London, died when Keats was eight years old, and his mother died when he was 14 from Tuberculosis.

He was first apprenticed to a local surgeon and then entered Guys Hospital as a medical student and dresser. He received his apothecary's licence in 1816, but his time was taken up more and more by his writing. His first poem was published later that year in the "Examiner Magazine". His poetic career was very short due to his untimely death from Tuberculosis at 24.

Extract from Endymion Book 1: John Keats

A thing of beauty is a joy for ever:
Its loveliness increases; it will never
Pass into nothingness;
but still will keep
A bower quiet for us,
and a sleep
Full of sweet dreams,
and health, and quiet breathing.



Therefore, on every morrow, are we wreathing
A flowery band to bind us to the earth,
Spite of despondence, of the inhuman dearth
Of noble natures, of the gloomy days,
Of all the unhealthy and o'er-darkened ways
Made for our searching: yes, in spite of all,
Some shape of beauty moves away the pall
From our dark spirits. Such the sun, the moon,

Trees old and young, sprouting a shady boon
For simple sheep; and such are daffodils
With the green world they live in; and clear rills
That for themselves a cooling covert make
'Gainst the hot season; the mid forest brake,
Rich with a sprinkling of fair musk-rose
blooms:

And such too is the grandeur of the dooms
We have imagined for the mighty dead;
All lovely tales that we have heard or read:
An endless fountain of immortal drink,
Pouring unto us from the heaven's brink.



This extract comes from the first verse of his book. Endymion and it's is the first line 'A Thing of Beauty is a Joy Forever', that has been immortalised ever since. He tells us that without beautiful things, the world is a grim, dark, despondent place and full of misery. It is beauty, ultimately, that makes the world go round. 'Some shape of beauty', Keats writes, 'moves away the pall'.

The “Thing of Beauty is a Joy Forever” is based on the tale of the shepherd Endymion, whose beauty was of such joy to the goddess Selene that she asked Zeus to make him immortal so that she can visit him every night.

[Listen to Tom O’Bedlam read Endymion: “A Thing of Beauty…”](#)

Inner Beauty

Emily Dickinson (1830-1886)

Dickinson was born in Amherst, Massachusetts, into a prominent family with strong ties to its community. After studying at the Amherst Academy for seven years in her youth, she briefly attended the Mount Holyoke Female Seminary before returning to her family’s house in Amherst.

Evidence suggests that Dickinson lived much of her life in isolation. Considered an eccentric, she was known for her reluctance to greet guests or, later in life, to even leave her bedroom. Dickinson never married, and most friendships between her and others depended entirely upon correspondence



I died for beauty, but was scarce

I died for beauty, but was scarce
Adjusted in the tomb,
When one who died for truth was lain
In an adjoining room.

He questioned softly why I failed?
“For beauty,” I replied.
“And I for truth,—the two are one;
We brethren are,” he said.

And so, as kinsmen met a night,

We talked between the rooms,
Until the moss had reached our lips,
And covered up our names.

This is one of Emily Dickinson’s well-known poems. This poem is loosely based on John Keats’ “Ode on a Grecian Urn” where Keats states “Beauty is Truth, Truth is Beauty”. She is referring to inner beauty in this poem. The speaker is dead, and she tells us that she died for that beauty. A man who died for truth is then laid to rest next to her. Dickinson states that both inner beauty and truth are rare and how we sometimes sacrifice ourselves and our lives to keep our morality. Being fake is easy but being true to ourselves and to those around us is difficult, as is being a kind, gentle, and overall good human being. Truth and morality are nearly the same and are “best friends”.

[Listen to the poem](#)

Beauty and Race

Margaret Burroughs (1915-2010)

Also known as Margaret Taylor Burroughs, was an American visual artist, writer, poet, educator, and arts organizer. She co-founded the Ebony Museum of Chicago, now the DuSable Museum of African American History. An active member of the African-American community, she also helped to establish the South Side Community Art Center, whose opening on May 1, 1941 was dedicated by the First Lady of the United States Eleanor Roosevelt. A long-time educator, she spent most of her career at DuSable High School. Taylor-Burroughs was a prolific writer, with her efforts directed toward the exploration of the Black experience and to children, especially to their appreciation of their cultural identity and to their introduction and growing awareness of art. She is also credited with the founding of Chicago’s Lake Meadows Art Fair in the early 1950s.

The Beauty of Black

When we look at ourselves
We see ourselves through eyes
Which have been schooled
To see comely only the opaque,
Comely to us skin that is fair,
Comely to us eyes that are light,
Comely to us hair that is straight,
Comely to us lips that are thin,
Our gods and goddesses

Glow in opalescent whiteness
And daily we worship at this shrine.
Ugly to us our satin black skin,
Ugly to us our fulsome lips,
Ugly to us our midnight eyes,
Ugly to us our crisping hair
Thus we have rejected our image.
But this is not as it should be
We black people must be born again.
Know that the black people like other races
Have their own distinct beauty,
Know that the Stygian night too is beautiful.

This is a powerful poem about our views of beauty which are defined by the prejudices and perceptions around us. Our ideals of beauty are programmed by our past, our upbringing and the influences coming at us from the consumerist world around us. That Stygian (dark) Night is also beautiful.

[Listen to the Poem](#)

Take a look at this powerful spoken word recitation "[A Brown Girl's Guide To Beauty](#)" by Aranya Johar.

Beauty in Nature

Arti Chopra

Born in Jammu in the beautiful state of Jammu and Kashmir, she attended college education in Delhi and became a primary teacher. She started writing poetry as a hobby while posted to different places in India, but took it up more seriously, when she had more time on her hands while posted to Turkey.



The scenic beauty of Kashmir and Turkey have been her underlying motivation to write about the beauties of nature. Nothing moves her more than nature in all its glory and her poetry seeks to crystallize her admiration in words.

Beauty in Nature

There's a poem in every flower,
a sonnet in every tree,
a tale in every lifetime
it's just for you to see...

there's a lyric in every brook
as it rushes over rocks,
there's an ode in every nuance,
as loves wonder unlocks,

there's rhythm in every sound,
every beating of a heart,
there's poetry in every union
and every couple who are apart

and just as there is wonder
in every new life created
there is sadness and regret,
for the unsaid and unfeted

just listen for the music
that your ears cannot hear,
just strain yourself for the melody
that's so far and yet so near

the wonder of the creator,
the magic of the divine
is there to feel, for all of us,
to soon be yours and mine

Fukuda Chiyo-ni (1703-1775)

A Japanese poet of the Edo period, Fukuda Chiyo-ni is widely regarded as one of the greatest poets of haiku. Some of Chiyo's best works include 'The Morning Glory', 'Putting up my hair', and 'Again the women'.

One of his Haiku's to finish

spring rain——
all things on earth
become beautiful

Working Party News

International Primary Health Care and COVID-19 Study

Prof Felicity Goodyear-Smith reports on the recent research that has been done through WONCA networks. The research team is Felicity Goodyear-Smith, Karen Kinder, Robert Phillips, Andrew Bazemore, Cristina Mannie, and Stefan Strydom

Aim:

This multinational survey aimed to understand characteristics and strategies employed by different countries to deal with COVID-19 from a PHC perspective to determine:

- Factors most associated with national mortality rates during the pandemic period to date
- Lessons to better address both current and future pandemics

Preliminary Results

(1035 responses, 111 nations):

What factors correlated most with lower death rates?

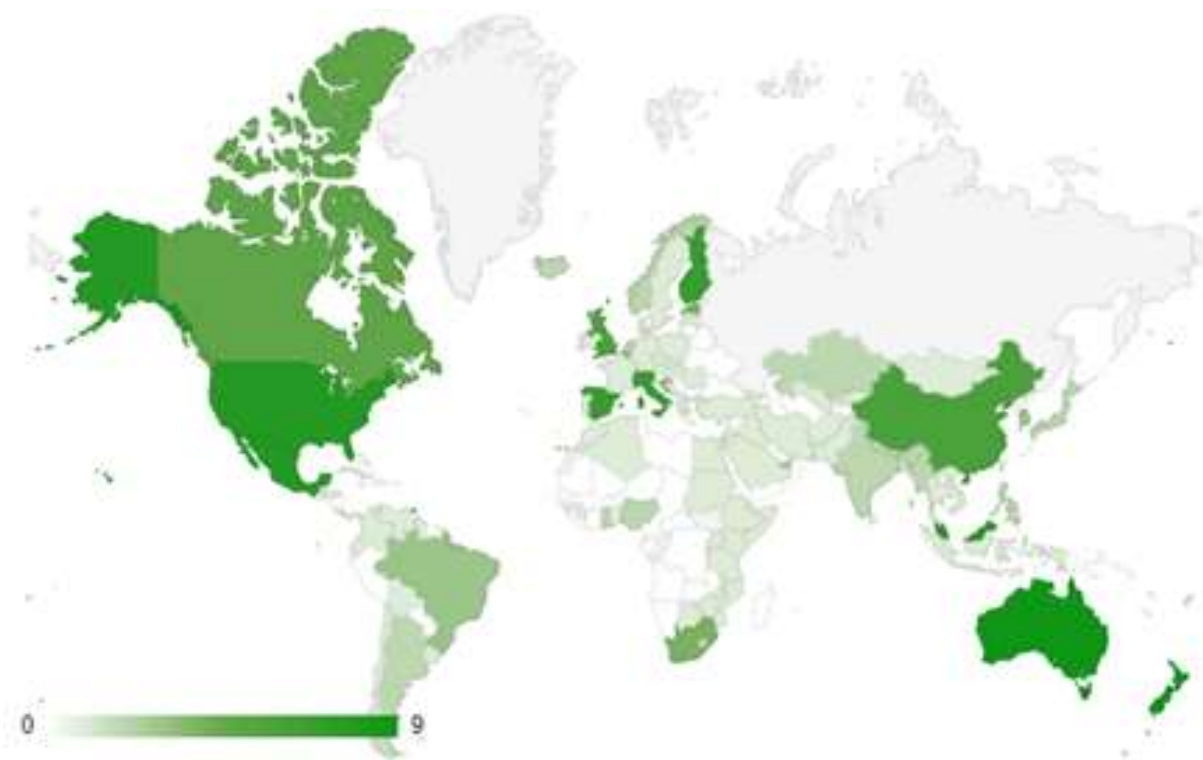
- Testing: Lower death rates were observed in countries where participants indicated that the following testing practices were employed:
 - o Having readily available testing at the time of first COVID death
 - o Testing all incoming travelers
 - o Testing symptomatic persons
 - o Testing those exposed to COVID positive individuals
- Movement Restrictions: Lower death rates were observed in where participants indicated that the following testing practices were employed:
 - o Physical distancing
 - o Event closures
 - o Closure of all but essential services
 - o Isolation based on contact tracing
 - o Self-Isolation in households
 - o Quarantine for suspected cases

Strong PHC System and Death Rates: Existing strong PHC systems were not correlated with death rates. This may be attributed to:

- Uncoordinated responses between public health and PC personnel
- Lack of PPE and testing for community-based workers
- Irrelevance of PHC if potential carriers were stopped at the border (most relevant to small island nations)
- PC not being engaged

Methods:

1131 surveys were collected from PHC clinicians (73.0%), researchers (16.9%), and policymakers (10.0%) across the world. The survey was distributed in both English and Spanish via PHC networks and snowballing. Participants were asked a series of questions that addressed the nature of their PHC system, how it responded to the pandemic, the use of health information technology in their country, if their country had a pandemic plan, and various strategies utilized to respond to the virus. Countries that had 10 or more surveys are referred to as the “top 21 countries”.



Data for Each Country:

For each country, the maximum death rate on a 7-day moving average served as the response variable in the survey. Map shows the distribution of respondents.

Analyses:

Univariate, bivariate, regression model analyses, and thematic analysis were employed to arrive at the preliminary results.

Current Public Health and Primary Care Responses:

- Hygiene Measures: hand washing and wearing PPE
- Limit person-to-person contact: physical distancing, ban mass gatherings, primary care provided remotely, self-isolation, and shutdown
- Identify Cases: testing, contact tracing, and surveillance

Current Approaches to Address the Pandemic:

Most countries utilized a combination of the following strategies:

- Blocking entry to country: border control, testing and or quarantining new arrivals
- Reducing the spread within the country: employing a variety of public health and primary care measures
- Managing severe cases to reduce deaths: hospitalization, oxygenation, ventilation, and intensive care

“Primary health care perceptions of COVID-19 responses on rate of death: an international study”, Felicity Goodyear-Smith, Karen Kinder, Andrew Bazemore Robert Phillips, Stefan Strydom, Cristina Mannie, under consideration for publication, 2020. For further information, please contact Andrew Bazemore at abazemore@theabfm.org

WP on Mental Health

Prof Chris Dowrick, Chair of the WONCA Working Party on Mental Health, writes on some resources in the time of COVID-19 in his latest newsletter to colleagues:

Dear colleagues,

As Europe emerges from the worst of the pandemic, our thoughts turn to those of you in the Americas who are bearing the greatest burden now, and to those of you in Africa who are preparing as best you can for the future.

Mental health has never been a more pressing concern for us in primary care, as we have to deal with the combined impacts of the infection itself, of quarantine and social isolation, and the inevitable severe economic downturn that follows.

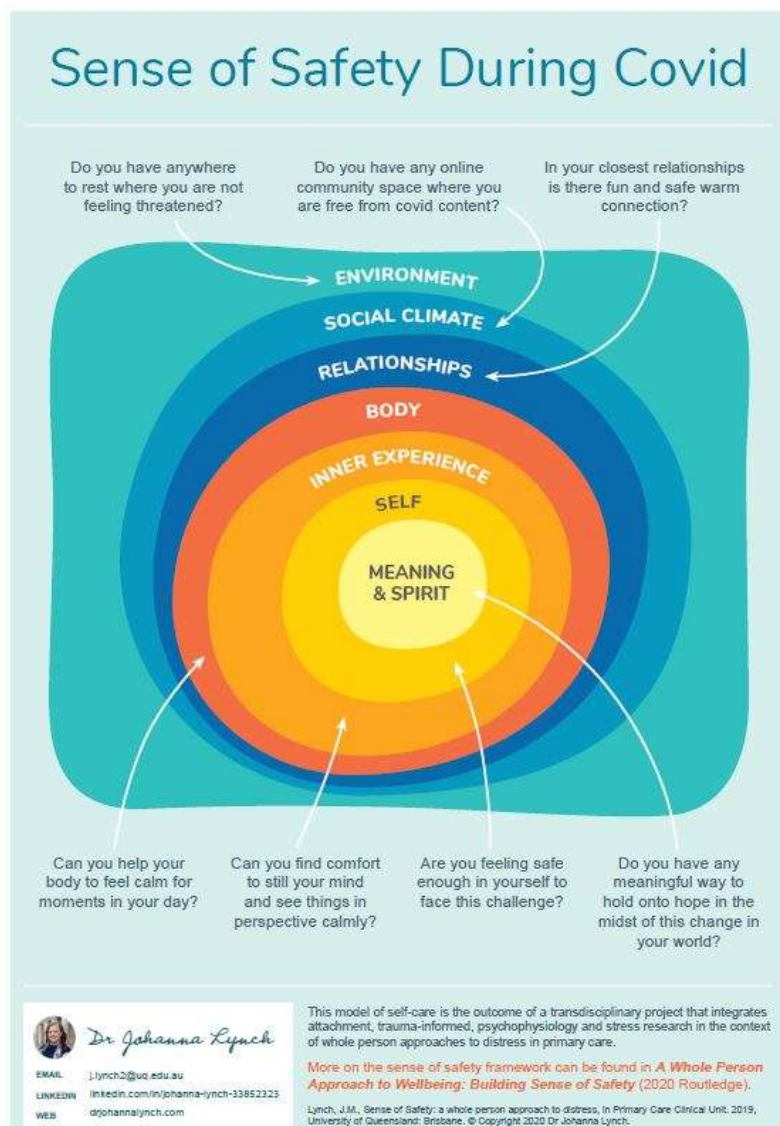
Here are three things to help us:

- A beautiful graphic (pictured), created by Johanna Lynch, GP from Brisbane Australia, based on her new concept 'sense of safety'.
- [A paper from the BMJ](#), by Mohammad Razai and colleagues, on how to reduce the psychological effects of social isolation.
- The WHO Mental Health and Substance Use team has launched a [mental health and psychosocial support platform](#) to help the people cope better with stress related to COVID-19. This has three sections: a questionnaire to assess your current stress levels; guidance on exercises to relieve stress and promote resilience; and contact of resources (most useful for Eastern Mediterranean region)

I am also delighted to attach a [report from Abdullah al-Khatami](#) on primary mental health care in Saudi Arabia during the pandemic, a great example of what family doctors are able to achieve during these difficult times.

Best wishes to you all,

Chris



Database of "Rural Miscellany" -John Wynn-Jones

Dr John Wynn-Jones, Immediate Past Chair WONCA Working Party on Rural Practice has been writing a regular "rural miscellany" email since March. This has been to provide resources on COVID-19 but also to give us a touch of poetry as a diversion in these difficult times. His body of work is now available on one website for your enjoyment. Read more below:



Dear All

I have been collecting information that I believe is valuable to rural doctors around the world since March. The accumulated database is now very large and it has not only become of treasure chest of news, resources, scientific papers and comment but it gives a very useful overview of the tragic roller-coaster that we have all been part of for the last five months.

This has been a remarkable and sometime exhausting journey for me as I have tracked this horrific event.

I became aware early on that other resources provide factual information but this is also a very human crisis, where compassion, kindness and community must play an equally important place in our thoughts and actions. This is why I added the poetry. Many colleagues tell me that they take some time out during the day to take their minds off Covid-19 by reading the poems.

I have been working as part of a team with the University of Queensland to establish a searchable database from what we have already collected and what we aim to continue to gather in the weeks and months ahead. I am so grateful to Bruce, Belinda, Amie and Tiana for the support their support and hard work. We are all part of the same team!

Please take a look at the website. It will have some flaws and we need you to tell us about them on ruralwonca@uq.edu.au or fill in the form on the website. We need your help to make this work.

➤ [visit website here](#)

Please put it in your favourites, tell other databases to add it, tell your colleagues about it and get it out there!

Thank you everyone for your help and support and from the team, "Take care and stay safe"

Dr John Wynn-Jones

*All nature has a feeling: woods, fields, brooks
Are life eternal: and in silence they
Speak happiness beyond the reach of books;
There's nothing mortal in them; their decay
Is the green life of change; to pass away
And come again in blooms revived.
Its birth was heaven, eternal it its stay,
And with the sun and moon shall still abide
Beneath their day and night and heaven wide.
John Clare 1793-1864*

Education for Primary Care feature free access article

Prof Val Wass, Chair WONCA Working Party on Education writes on the latest open access items in *Education for Primary Care*.

We are pleased to announce that the Issue 31:3 is now [available on line](#)

We thank Taylor and Francis for free access for the next two months to an article from Felicity Goodyear-Smith's team on moving the undergraduate curriculum on line in response to Covid-19 .

Provision of e-learning programmes to replace undergraduate medical students' clinical general practice attachments during COVID-19 stand-down

[> item available online](#)

This issue also highlights EURACT's launch of research into [adapting family medicine training to Covid-19](#)



Advertisement

Keypoints NCD educational material

KEYpoints: Online educational material on non-communicable diseases now available

Often the first point-of-contact of patients with noncommunicable diseases (NCDs), family doctors are tasked with implementing optimum management of NCDs, including detecting, screening and treating these diseases.(1)

However, keeping up with the rapid pace of knowledge development in this (and every other) area of medicine is a considerable challenge for many clinicians. Moreover, family doctors face multiple other challenges when managing patients with chronic disease, including miscommunication with specialists; dealing with patients' beliefs, demands and medication-taking behavior; and providing medication advice, including management of complex drug regimens and side effects. (2)

Developed to address these multiple needs, KEYpoints is an online physician education program aimed at elevating family doctors' knowledge and skills in managing NCDs, particularly in the areas of cardiovascular risk (including hypertension and diabetes), mental health (including depression and anxiety),



chronic pain (including arthritis) and ageing (including erectile dysfunction and lower urinary tract symptoms). Each online module also addresses communication skills for shared decision-making between family doctors, other healthcare professionals and patients. KEYpoints modules are endorsed by WONCA and accredited for CPD points in Malaysia, the Philippines and Singapore.

KEYpoints is a collaboration of WONCA and leading healthcare communications company [MIMS](#).

[Register for KEYpoints here](#)

References

1. World Health Organization. Noncommunicable diseases. Available at: <https://www.who.int/news-room/fact-sheets/detail/noncommunicable-diseases>. Accessed 7 August 2019.
2. Sellappans R, et al. *BMJ Open* 2015;5:e007817.

Resources

semFYC videos on COVID-19 and Mental Health

After its success in Spain, the Spanish Society of Family and Community Medicine (semFYC) has translated a series of videos that analyse the main features of COVID-19 pandemic and its effects on global Mental Health.

The semFYC Working Group on Mental Health from the Program on Preventive and Health Promotion Activities (PAPP'S) has produced a series of videos in which the Working Group's Chair, Dr Jorge Tyson, explains the different issues of pandemics and the way they affect human's mental health.



Overall, semFYC has produced six videos which were launched during the first weeks of the COVID-19 pandemic, which were especially hard in Spain. These videos were shared on semFYC social networks and websites, achieving a great success among the scientific community.

All the videos from semFYC can be seen on the YouTube COVID-19 playlist, and all have English subtitles.

➤ [View the series](#)

1. What are the aspects of this pandemic?

In the [first video](#), Dr Tyson explains the biological, psychological and social aspects of a pandemic, and he links them to the idea of globalization.



2. What measures can we adopt regarding Mental Health?

The [second video](#) is aimed at prevention measures regarding Mental Health when facing the COVID-19 health crisis. The Working Group points out three measures to be taken:

- Get good information (from trusted media, with scientific evidence) and share reliable news.
- Good hygiene and self-care.
- Respect differences, as people have different reactions when facing stressing and uncertain situations.

3. Eight Specific characteristics of this pandemic

In this [third video](#), Dr Tyson explains several features which make this COVID 19 pandemic different from other pandemics in human history, especially relating to its global effects due to “emotional globalization”.

4. What will we need once the pandemic is over?

In the [fourth video](#), the Working Group on Mental Health wonders, “what will be needed in Primary Care once the pandemic is over?”, and it states that family doctors and health care professionals in the first level of care need more emotional and psychological resources to deal with mourning.

5. What types of mourning processes will we encounter?

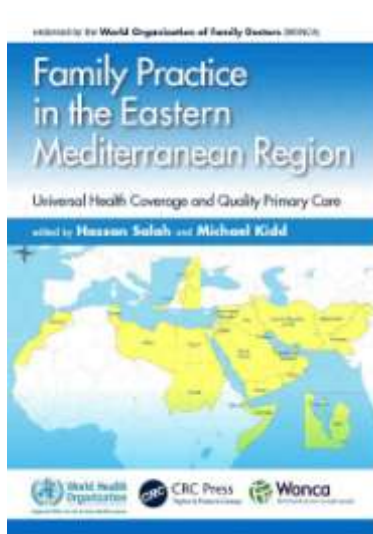
Continuing with this idea of mourning, the following two videos analyze what types of grieving will be found in primary care (such as over economic losses, travel plans, or even relationships within our families after the lockdown).

[Fifth video.](#)

6. How will patient's mourning be communicated?

In the [final video](#), the Working Group explains why the primary care system is the best health setting when facing a pandemic and, also, it talks about the importance of professional training, team work, and it makes a claim for more investment in the primary Care workforce worldwide.

Online Book: Family Practice in the EMR



Family Practice in the Eastern Mediterranean Region - Universal Health Coverage and Quality Primary Care

The WONCA and WHO joint book on family practice, Edited by Hassan Selah • Michael Kidd, is available now on the following WHO website and the Arabic version will be published in late August.

This joint publication from the World Health Organization (WHO) and the World Organization of Family Doctors (WONCA) is the first book to provide an in-depth analysis of the state of family practice in the 22 countries spread over North Africa, the Middle East and Western Asia, i.e. the Eastern Mediterranean Region (EMR). It shares perspectives and advice from global and regional leaders on

how family practice can be introduced and strengthened in high-, middle- and low-income countries.

Key Features:

- The first book on family practice and primary health care in the Eastern Mediterranean Region
- Practical lessons learned from the implementation of the family practice model, from within and outside the region
- Dedicated regional chapters cover topics appropriate and specific to the implementation of family practice in each country in the EMR
- Sharing important insights from the work taking place across the region, this book will be invaluable to policy makers, health professionals, health educators, students and researchers in public health, and the wider public

The editors:

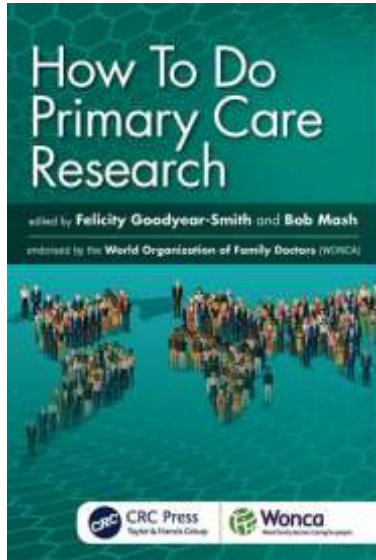
Hassan Selah is a medical doctor and Regional Advisor Primary Health Care and leads the team on Integrated Service Delivery at WHO Regional Office for the Eastern Mediterranean.

Michael Kidd is a family doctor, past president of the World Organization of Family Doctors (WONCA)

[Download Book](#)

Book review: How to do Primary Care Research

WONCA's Working Party on Research through Felicity Goodyear-Smith and Bob Mash have produced a book on "How to do Primary Care Research". A review of this book has been published and can be found [online here](#).



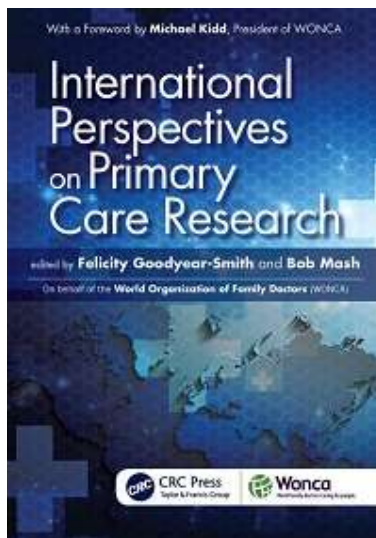
[How to do Primary Care Research](#)

Felicity Goodyear-Smith, Robert Mash
First Published 2019. 330 pages

This practical 'How To' guide talks the reader step-by-step through designing, conducting and disseminating primary care research, a growing discipline internationally. The vast majority of health care issues are experienced by people in community settings, who are not adequately represented by hospital-based research. There is therefore a great need to upskill family physicians and other primary care workers and academics to conduct community-based research to inform best practice. Aimed at emerging researchers, including those in developing countries, this book also addresses cutting edge and newly developing research methods, which will be of equal interest to more experienced researchers.

Felicity and Bob produced another research-oriented book in 2016 "International perspectives on Primary Care Research" . More

information below.



[International Perspectives on Primary Care Research.](#)

Felicity Goodyear-Smith, Bob Mash on behalf of WONCA.
2016. 255 Pages.

This book examines how the evidence base from primary care research can strengthen health care services and delivery, tackle the growing burden of disease, improve quality and safety, and increase a person-centred focus to health care. Demonstrating the inter-professional nature of the discipline, the book also features a section on cross-nation organisations and primary care networks supporting research. National perspectives are offered from researchers in 20 countries that form part of the World Organization of Family Doctors, providing case histories from research-rich to resource-poor nations that illustrate the range of research development and capacity building.

Featured Doctors

Prof Mehmet AKMAN : Turkey - WP on Research Chair-elect

Mehmet Akman MD MPH is the chair-elect of the [WONCA Working Party on Research](#)

Can you tell us about your current work?

I work in a University setting (Marmara University School of Medicine, Istanbul, Turkey), providing primary health care and teaching both undergraduate and postgraduate students. As a full time professor, I have a good balance between teaching, clinical work and research.

In 2010 I was involved in the establishment of the [Turkish Family Medicine Foundation](#) (TAHEV) which aims to realise activities for strengthening primary care in Turkey, and networking with international primary care organisations. I am still working as a member of board of trustees.

I have been a direct individual member of WONCA for many years and under the umbrella of WONCA, I serve as the European representative and an executive member of the WONCA Working Party on Research. I will be taking over in due course, from Felicity Goodyear-Smith as the next chair of the Working Party.

What are your research interests?

My passion is research in primary care, and the organisation of it to yield the best health outcomes within a particular health care setting. After being involved in multi-country projects (eg PHAMEU and QUALICOPC), health systems research became more appealing for me. Given the different conditions and practices of health care provision in different countries, culturally acceptable best practices and their feasibility becomes a very complex issue. I do believe only way to recognise and adapt best practices will be by networking and collaborating internationally.

I am also involved in many international research and education activities namely, PRIMORE (European PRImary care Multi-prOfessional Researcher network project), expert consultant for WHO Azerbaijan, associate editor of Primary Healthcare Research and Development journal (<https://www.cambridge.org/core/journals/primary-health-care-research-and-development>).

Currently I'm executive board member of two research centers (RC) namely, [Marmara Hypertension and Atherosclerosis RC](#) and [Marmara Family Medicine Research and Education RC](#).

What other interesting activities that you have been involved in?

As a teacher of primary care, I am a member of EURACT and interested in the impact of education on attitudes and behavior of professionals. I use reflective techniques and art, drama particularly, to help my students to understand themselves and their patients better. Therefore forum theatre, health



sociology and medical humanities in broad are focus of my interest.

I have been an active member of European Forum for Primary Care (EFPC) for many years including as an advisory board member between 2013-2019.

What is general practice like in Turkey?

We have no gatekeeping system, so patients can go directly to specialists. Most patients have a GP, however only about one out of three ambulatory care encounters take place in primary care settings. Despite this, GPs have high number of patients on their list and usually only one other health worker (a nurse or midwife) in their team. GPs are responsible for all preventive and therapeutic health services for the population they serve.

After health reforms took place between 2003-10, the structure of primary care in Turkey changed, and family medicine schemes were introduced all over the country. Currently Turkish primary care is gradually improving its quality of care. However shortcomings such as less than 10% of GPs working in primary care having been vocationally trained, prevent having better quality outcomes in the short term.

Your private interests?

I like travelling: the exploration of new cultures and people are enjoyable for me. Therefore I prefer less touristy places and I then document day to day life with my camera. I enjoy photography and writing the stories of people with light captured by my lens.

Besides acting, movies and plays are my out of work interests. I run a cinema club with my medical students and residents where we have opportunity to discuss selected directors and films. My students enjoy this a lot I guess, because they have even continued it via WhatsApp during Corona times.



Dr Sanaa MERIMI : Morocco - Family doctor

What work do you do now?

I am a general practitioner and have been practicing in the private sector for the last 20 years. I have dedicated 15 years of my practice to developing a new community health approach.

Since 2012, I have been a “maître de stage”, (training supervisor), and as such, I take medical students in my clinic, introducing them private general practice. I collaborate with the medical faculty of Rabat introducing new innovative courses in communication and supervised training for medical students in health centres.

I have also been involved in post graduate medical training, since 2013, working on programs that aim to develop the capacities of young doctors working in the private sector: patient communication, social responsibility, health education, management.

I am interested in initiating research about and with the general practitioners in Morocco.

Other interesting things you have done?

For 11 years I have worked on the “Maison de Santé Albansam” (Health Care Home) - an adaptation of the “family medicine clinic concept” to include health promotion and population health activities. I'm dedicating the next three years to promote this new non profit private practice in the health system specially for low income communities.



I am the founder of a “L’initiative Vers l’Unité Pour la Santé (VUPS)” which is a Towards Unity for Health (TUFH) initiative in Morocco. It is a network, promoting the linking of all the parts of the health system. I launched the first VUPS initiative during the Covid period and the theme was the positioning of the private general practitioner in the anti-Covid response. This brought together various stakeholders: the population, academics, managers, health professionals.

What is it like to be a family doctor in Morocco?

It’s a little bit difficult, because there is no specific curriculum for family medicine, although a medical curriculum reform is taking place in Morocco to include family medicine as a specialisation. It seems that it will take more than a lifetime. However, a strong training program for GPs centred on the needs of patients and communities can balance out the delay of the reform. For twenty years now we have been looking at concepts and practical models.

Your interests at work and privately?

My interests at work are to develop critical thinking in daily medical practice and not only in a scientific setting. Privately, I appreciate writing and enjoying time with my family.

WONCA CONFERENCES

WONCA Conferences 2020

December 17-19 2020	WONCA Europe region conference	Berlin, GERMANY	www.familydoctoreurope2020.org
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WONCA Direct Members enjoy *lower* conference registration fees.

To join WONCA go to: <http://www.globalfamilydoctor.com/AboutWONCA/Membership1.aspx>

WONCA Conferences 2021 and 2022

July 7-10 2021	WONCA Europe region conference	Amsterdam, NETHERLANDS	https://woncaeurope2021.org/
August 5-7, 2021	World Rural Health conference	Kampala, UGANDA	Save the dates
November 25-28, 2021	WONCA World conference	Abu Dhabi, UAE	www.wonca2021.com
June 1-4, 2022	WONCA Europe region conference	London, UK	www.woncaeurope2022.org
2023 dates to be confirmed	WONCA World conference	Sydney, AUSTRALIA	www.racgp.org.au/wonca-2022/home

Revised Important dates – WONCA World conference Abu Dhabi, now 2021

Abstract Submissions Open (Workshops/Symposia) July 5, 2020

Online Registration Open (Early Bird) July 5, 2020

Abstract Submissions Open (Oral/Poster) July 5, 2020

Submission Close (Workshops/Symposia) January 10, 2021

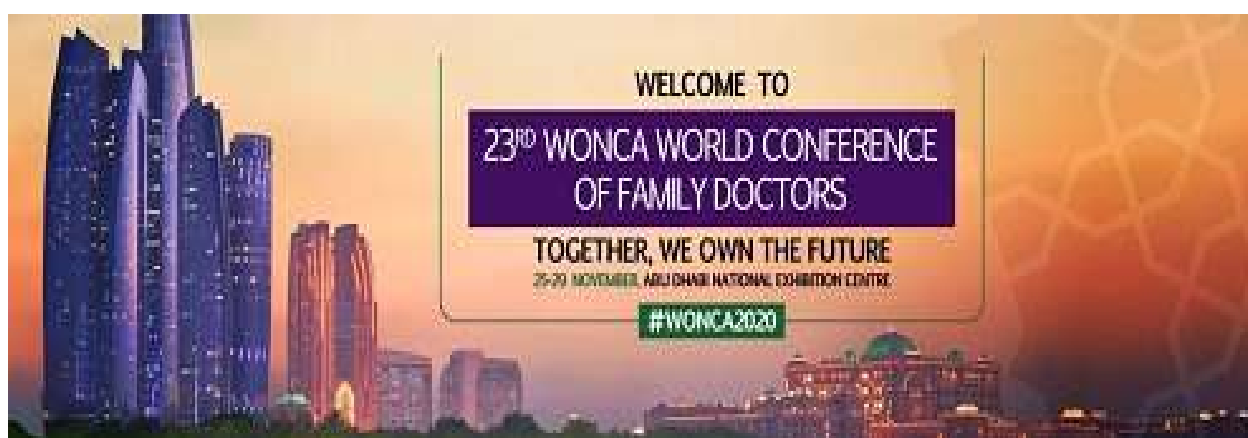
Author Notifications (Workshops/Symposia) March 7, 2021

Online Accommodation Open March 18, 2021

World Council November 21-23, 2021

World Conference November 25-28, 2021

➤ [website](#)



Announced for 2022



Member Organization Events

For more information on Member Organization events go to www.globalfamilydoctor.com/Conferences/MemberOrganizationEvents.aspx

12 Sep
- 13 Sep
2020

Hong Kong Primary Care Conference 2020
Digital Conference

13 Oct
- 17 Oct
2020

AAFP Family Medicine Experience
Chicago, USA

15 Oct
- 17 Oct
2020

RACGP GP20
Perth, Australia

04 Nov
- 07 Nov
2020

**Family Medicine Forum / Forum en
médecine familiale**
Winnipeg, Canada

04 Nov
- 07 Nov
2020

RNZCGP Annual conference
Auckland, NZ

20 Nov
- 24 Nov
2020

**North American Primary Care Research
Group (NAPCRG) annual conference**
San Francisco USA

17 Dec
- 19 Dec
2020

**European Conference for Family Doctors
and DEGAM Annual Congress**
Berlin, Germany

11 Feb
- 13 Feb
2021

RCGP annual primary care conference
Glasgow, United Kingdom