
CONFERENCE ABSTRACT

Health systems centered on people and communities, a necessary movement in the Americas

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Even more after the COVID-19 pandemic, moving towards access and universal health coverage (Universal Health), in the context of the Health-related Sustainable Development Goals (SDG), should become a priority for the countries of the America. To make it a reality requires a paradigmatic shift from health systems designed around diseases to health systems designed - for people and with people, their families and communities based on the strategy of primary health care. The World Health Organization (WHO) has called for redoubling efforts to move towards a renewed approach to service delivery: Person-Centered and Integrated Health Services (PCIHS), conceived as a key element of health care systems. robust and resilient health. The PCIHS place people and communities, from the territories, not diseases, at the center of the work of public policies and health systems, and support people progressively achieve power to be protagonists in the generation of contexts for good living and thus stop being passive recipients of services reduced to disease. The evidence shows that health systems oriented to the needs of individuals and communities, structured in integrated networks that act in and from the territories, are more effective, cost less, improve participation and are better prepared to respond to crises sanitary. To achieve PCIHS it is necessary to transform the current predominant biomedical paradigm and produce reforms at all levels, also beyond the health sector, given the relevance of the social determinants of health. The Astana Declaration, the High Level Commission Report "Universal Health in the 21st Century: 40 Years of Alma-Ata" offer a framework for political commitment, a call for shared responsibility and a guide for collective action. America is a continent where deep social inequalities persist that explain large avoidable differences in health outcomes between different groups according to socioeconomic status, ethnicity, gender, and habitat, which has once again become evident in the COVID-19 pandemic. These same differences are at the base of social movements that have shaken several Latin American countries in recent times. These social and political crises, together with the lessons that the pandemic leaves us, force us to generate new transformations in the health systems, which point towards greater equity and a reorientation of health policies towards the needs of people and women. communities, recognizing that power in health must be progressively rooted at local levels and that effective action for well-being and "good living" is intersectoral, increasingly interdisciplinary and territorially based.