

Cali Statement

The Ministers participating in the VII Ibero-American Summit of Family Medicine, held in Cali, Colombia, with the aim of reflecting on the role of Family Medicine in Health Systems based on Primary Care, and specifically on the care of complex situations of people, families and communities as the centre of these Systems:

Aware of the importance of health and family and community medicine for the guarantee of universal health coverage within the framework of the Sustainable Development Goals, and the importance of taking a regional assessment of the commitments implementation of the declaration of Alma-Ata.

Recognizing that the Alma Ata declaration constitutes a milestone in the history of the Global Health Conferences, with the purpose of establishing Primary Health Care as the fundamental strategy to stop health inequities and guarantee health rights worldwide.

Considering the results of the First Meeting of the High Level Commission "Universal Health in the 21st Century: 40 years after Alma-Ata" with the theme "Achieving Universal Health: Challenges and Strategic Alliances for Advocacy, Social Dialogue and the intersectorial participation".

Recognizing that Health and Family Medicine are essential in the care of people's health during their entire life course, as well as the care of families and communities, guaranteeing health services with a focus on rights, intercultural and gender which consider the biological, psychological, economic, social and cultural factors.

Considering what is recorded in the Letters of San Jose of Costa Rica (2016), Quito - Ecuador and other Letters generated in the previous Summits.

Aware of demographic changes, the epidemiological transition, natural disasters, the increase of mental health problems, changes in climate, consumption and life habits, demographics and the epidemiological transition, among other phenomena that determine the health of the population of the countries; as well as the challenges in terms of policies, plans and programs for comprehensive health care with a focus on family and community health.

Considering that in September 2017, the Regional Strategy on Human Resources for Universal Access to Health and Universal Health Coverage was approved by the member countries, within the Pan American Sanitary Conference (document CSP29/10) given the challenges persistent, especially in terms of staff availability and distribution, planning, governance, articulation between sectors and training, according to the needs of the health system in relation to universal access to health and coverage universal health.

We agree to:

1. Promote public health policies for the strengthening of mental health, family and community medicine approaches within the framework of Primary Health Care, according to the guidelines and norms of each country, as well as education and training programs.

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2. Strengthen collaboration among the participating countries, for the exchange of experiences and for the availability of human resources with competencies in health, mental health and family and community medicine.
 3. Join forces among the participating countries to generate strategies that respond in a timely manner to the health needs of individuals, families, communities, the migrant population and vulnerable situations.
 4. Promote policies for the management of knowledge in family and community medicine to increase the availability of scientific evidence of this medical specialty, and its economic impact on health systems, strengthening programs of specialization in family medicine.
 5. Strengthen the skills and role of family physicians in health teams, to increase resolutivity at the primary level of care, ensure continuous and comprehensive care, invigorate intersectoral coordination and community participation.
 6. Set up a technical cooperation network between the Ministries of Health of the participating countries, with the support of the Pan American Health Organization, in the field of family medicine and primary care, to develop at least the following thematic areas: Research in the territory; Economic impact of family medicine on health systems; mental health; Quaternary prevention, disaster relief, and migrant health.
 7. Request the Ibero-American General Secretariat to include this network in the registry of Ibero-American networks, in order to involve the other Ibero-American countries and mobilize technical and financial resources for the development of the network's activities.
 8. Use and take advantage of the results of these technical cooperation actions and knowledge exchange, for the strengthening of public health policies and health systems in our countries.

Signed in the city of Cali, Colombia, March 14, 2018

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