Primary health care (PHC) is being recognized worldwide, and particularly in Latin America, as a fundamental strategy for the advancement of health standards and universal access to health. Its background, as health care for persons and community, goes back to ancient Eastern and Western civilizations, including the pre-Hispanic cultures of the Americas such as the Inca, the Maya and the Aztec.

In the 20th century, PHC was strengthened with the Declaration of Alma Ata in 1978, but its implementation was interfered with by a number of factors. However, it is possible to identify some progress in various countries.

Part of the advances of Alma Ata’s proposals have been promoted by the Millennium Development Goals approved by the United Nations in 2000; and more recently by the Sustainable Development Goals (SDG) and the 2030 Agenda approved by the United Nations in 2015.

An opportunity for a reaffirmation of commitment to the Alma Ata proposals was offered by the International Conference of Astana in October 2018, where the contribution of PAHO and its director Carissa Etienne was warmly acknowledged. In Astana, the importance of a holistic framework, quality of care, scientific strength, and connections with the SDGs and universal access to and coverage of health were also emphasized.

Valuable has also been the Latin American process cultivating the perspective of Person Centered Medicine (PCM) during the last five years with the participation of the Latin American Academies of Medicine, leading local universities, and the International Congress of PCM in Buenos Aires in 2014, all of them leading to the establishment of the Latin American PCM Network and the Peruvian PCM Association.

**Recommendations and Action Plan**

1. Reaffirming the Declaration of Alma Ata, health should be recognized as a fundamental right and also as a duty of all individuals and communities. Therefore, in the case of Peru, it must be formally incorporated into the Constitution of the Republic.
2. The recognition of the value of the reconceptualization of PHC as Persons-centered Integral Health Care, in which persons are posited as the center of the concept of integral health and as the goal of health actions, has been a fundamental formulation of the First Peruvian Meeting on PCM.

3. Such reconceptualization of PHC as persons-centered integral health care, contributes to the strengthening of its philosophical base, clarifies its fundamental purpose, highlights quality of care and social commitment, and facilitates its implementation, measurement and evaluation. For these reasons, it should constitute a guiding axis for the country's policies and actions to improve health and well-being.

4. Latin America should promote primary care and universal coverage and access to health consistent with their traditions and knowledge base, within the context of a holistic and inclusive worldview where everything that exists (individual internal world, social community and environment) is intertwined and in harmonic balance denotative of health in its various spheres.

5. For the implementation, strengthening and optimization of this new conceptualization, it is urgent to promote in Latin America:
   a. The training of health professionals aware of the principles of comprehensive health care focused on people, competent in the implementation of the tasks required, and motivated for and committed to their fundamental objectives;
   b. Attention to the social determinants of health and to correct effectively existing inequities;
   c. The development of scientific research studies on Persons-centered Integral Health Care, including its conceptual refinement, its practical and generalized implementation, and its continuous evaluation;
   d. Inter-sectorial work coordinated among the different spheres of government and open to all representative bodies of society.

6. Fluid communication should be maintained with groups that share perspectives and commitments at local, Latin American and broad international levels.

7. Promote the efficient use of available resources allocated according to real needs and distributed equitably.

8. Demand an ethical commitment from all actors in the development of comprehensive health care.

9. Convene medical professionals and those of the different health disciplines, particularly young professionals, to participate actively in this process both in their individual and institutional work.

10. Express the commitment of the Peruvian PCM Association and the Latin American PCM Network to work for the implementation and advancement of this new conceptualization, in collaboration with the co-sponsoring entities and all relevant agents, starting in Latin America, including people, communities, health professionals, health systems, governments and non-governmental and inter-governmental institutions.