

# Geneva Declaration 2021

## On Self-Care, Inter-Care and Well-Being in Pandemic Times

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*Emerging from the 13<sup>th</sup> Geneva Conference on Person Centered Medicine organized as a virtual event on 5-7 April 2021 by the International College of Person-Centered Medicine (ICPCM) in collaboration with the World Medical Association, the International Council of Nurses, and the Pan-American Health Organization.*

### Considering:

1. That person centered medicine (PCM) focuses on the health, needs and values of the whole person in their context. People-centered healthcare extends the concept to individuals, families, communities and society as a whole, thus shaping the health of a person through shared determinants and social interconnectedness, making both concepts complementary.
2. That health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity as affirmed in the WHO Constitution. This cannot be achieved by governments, the healthcare system and healthcare professionals without the full involvement of all in the community as proclaimed in the Alma Ata Declaration: (*Integral care of all by all*), and in the ICPCM Montevideo Declaration 2020 (*Persons-centered integral health care*). Consideration of other general social sectors is fundamental in order to attend to the social determinants of health and the UN Sustainable Development Goals.
3. That the dignity and responsibility of each person implies that individuals have the right to health and the duty to participate individually and collectively in the planning and implementation of self-care and care for each other in various contexts including health promotion, disease prevention, health restoration and palliative care.
4. That promotion of PCM, self-care and inter-care can effectively improve the quality of life of individuals and the wellbeing of communities. While Self-Care implies the cultivation of healthy lifestyles, avoidance of risk, maintenance of mental well-being, strengthening of health literacy, and the rational and responsible use of professional healthcare professionals, products and services; Inter-care extends the concept to the interconnectedness of the self with others by way of their capacity to care for each other related to patients, families, the health and social care workforce, the wider community and the environment at large, connecting to the collective wisdom of ancient cultures.
5. That self-care and inter-care within a health framework that involves the government and all stakeholders, can benefit from multisector support on training and properly evaluated procedures, medication and technology.
6. That the progressive monetization and dehumanization of society's institutions including those actors and organizations that constitute the medical infrastructure is undesirable and counters the public interest. Medicine as a field has been commercialized and prioritizes a biomedical individual disease focused approach to the exclusion of other approaches, including a whole person-centered approach that seeks to promote and preserve the health of persons and the general public in a humanistic and equitable manner.
7. That the response to the COVID-19 pandemic has highlighted an imbalance between how funding is prioritized for medical-industrial complexes (technology) to the detriment of public health infrastructure (services), leading to widespread burn-out in healthcare providers and the erosion of trust. This demonstrates the need for well-integrated, balanced and resilient healthcare systems with humanistically-oriented, scientifically informed and competent governments, able to adapt the public health systems to evolving needs and to hold the health industry to account in promoting effective self-care and inter-care policies.
8. That the pandemic exacerbated health inequity caused by socio-economic and ethnic disparities. This calls for the wider implementation of people-centered care that is culturally informed and promotes solidarity, equity and social justice.

9. That the actual broadening of epidemiological concerns highlighted by the pandemic encompasses non-communicable and communicable diseases, multi-morbidity, mental health challenges, their interactions and syndemic complexity, all of which reinforces the importance of championing comprehensive, integrated and people-centered healthcare.

10. That the International College of Person-Centered Medicine, through its Geneva Conference and International Congress Declarations - and those of the Latin American Network of Person-Centered Medicine in collaboration with the Pan-American Health Organization- has proposed person-centered paradigmatic health concepts and procedures, articulating science and humanism to address broad health challenges including the current pandemic.

### **We call for**

1. Health policies, services and actions that include person- and people-centered self-care and inter-care practices aimed at promoting individual and collective well-being.

2. Educating people about health and its determinants and providing them with reliable and unbiased information and training to promote self-care and inter-care encompassing a wide range of person-centered activities. This includes enhancing people's awareness of the *Seven Pillars of Self-Care* and the emergent concept of inter-care.

3. Examining the relationship between people's health and their environment and the need to support them through well thought-out economic and social development policies that incorporate person-centered self-care and inter-care policies and practices.

4. Broadly engaging all societal institutions to affirm healthcare as a human right and to uphold humanism in medicine. This involves the accountability of governments, health systems, health care professionals, health industry and the community at large in order to conduct and attain fully ethical health care.

5. The rededication of health systems and public health infrastructure to address the social determinants of health and to attain the Sustainable Development Goals promoting health equity. These are fundamental requirements to activate self-care and inter-care, and to promote well-being, particularly when facing pandemics and other disasters.

6. Building public health and educational structures to effectively promote social trust, social justice and social equity to support both the mental and physical health and well-being of informed, self-aware and empowered communities.

7. Empowering people to become active in the development and monitoring of the proposed innovative health services and policies as well as creative protagonists of their own health. The latter would involve awakening individual and community self-awareness, self-reliance and inter-care solidarity that may enhance the quality of life for all in a way that is congruent with personal and community goals and values.

8. Promoting cooperative international leadership to coordinate cohesive global responses to pandemics and to address the underlying causes of failure in many countries to strengthen their health systems and policies, and to attend to the needs of the general population with dedicated efforts to support marginalized communities. This should lead to the activation of mechanisms that promote and accelerate universal access to vaccines and other effective public health measures.

9. Examining and documenting through pertinent workgroups the fundamental relationships between self-care, inter-care, well-being and person-centered integral healthcare in response to the challenges of the Covid-19 pandemic.

10. Committing the International College of Person-Centered Medicine to upholding and fulfilling the above recommendations in collaboration with like-minded groups and institutions.