2021 Lima Declaration
Mutual and integral health care aimed at the well-being of all persons

Resulting from the 7th Latin American Day of Person-Centered Medicine held as a virtual event from Lima, Peru, from December 16 to 18, 2021. Organized by the Latin American Network of Person-Centered Medicine (RLMCP), the International College of Person-Centered Medicine (ICPCM), the Subregional Program for South America of the Pan American Health Organization (PAHO/WHO), and the Andean Health Organization, under the auspices of the Latin American Association of National Academies of Medicine, the Peruvian and Uruguayan Associations of Person-Centered Medicine, the National University of San Marcos and the Cayetano Heredia Peruvian University.

Considering

1. That modern medicine has been distorted into a commercial and reductionist approach that centralizes its interest in organs and diseases, with the risk of generating fragmentation, dehumanization and inequity in clinical care, neglecting people in their roles as patients, family members or health professionals. In response to this trend, a global programmatic movement has emerged that seeks to affirm the total person as the center of health, consistent with pre-Columbian medicine with its approaches to good living and health as a harmonious balance between the internal, social and ecological worlds. The wisdom of such ancient cultures was articulated in the constitution of the WHO in 1946 establishing health as a state of complete physical, mental and social well-being. Recommendations have also emerged on universal health as a human right and responsibility and not a commodity.

2. That the Declaration of Alma-Ata (1978), ratified in Astana (2018), aspires to the implementation of Primary Health Care (PHC) as a fundamental, inclusive, effective and equitable health strategy leading to access and coverage health universals. Community-centered health services and PHC have formed the basis of WHO’s health policies since 2008. Added to this are the Sustainable Development Goals proclaimed by the United Nations in 2015.

3. That person-centered medicine (PCM) involves a medicine of the person (of their entire health), for the person (aimed at promoting the well-being and flourishing of all people); by the person (health professionals) and with the person (respectfully accompanying and empowering those who seek health care). The MCP postulates a medicine informed by scientific evidence and the resources, values and experiences of the people involved. The International College and the Latin American Network of PCM are thus contributing to the strengthening of the philosophical and strategic bases for the consideration of the person as the axis and protagonist of their health.

4. That it is pertinent to analyze the global and Latin American experiences of the current Covid-19 pandemic, exposing the fragility of health systems, the frequent political decision-making with little scientific foundation, the dehumanization of health care, the lack of support to the health team and neglect of the ancestral wisdom present in the community.

We recommend

1. Add an ecological dimension to the concept of health due to its impact on the well-being and complete sense of identity of people, and attention to climate change, epidemics such as obesity and sedentary lifestyle, and the COVID-19 pandemic.

2. Optimize empowerment towards intercare (mutual care), self-care, environmental care and the empowerment of communities and social organizations regarding their health.

3. Promote positive health, mental health, social well-being and equity as crosscutting aspects in all health actions.

4. Invest in health resources such as improving virtual teaching by supporting face-to-face teaching, promoting the personal development and well-being of students and health professionals, generalizing fair and stable employment contracts for health personnel, and ensuring effective access and equitable access to technology and key resources such as vaccines and essential medicines.

5. Facilitate collaboration between health and social science professionals, local authorities, relevant sectors (education, economy, urban planning, etc.) and people in the community as active participants in the organization of health policies and systems. These must meet the postulates of medicine and health centered on people, the social determinants of health, and the Sustainable Development Goals to promote equity, solidarity and quality at all levels, paying special attention to people more vulnerable.

6. Endorse determined and persistent efforts for the promotion of health and well-being, prevention, rehabilitation, early detection, treatment and control of high-risk communicable diseases and chronic non-communicable diseases, through integrated and focused health services. in people.

7. Strengthen leadership and international cooperation that articulate efforts for a global, supportive and cohesive response to the health and social welfare needs of all the world’s populations, including those overwhelmed by massive migrations and displacements.

8. To commit to the fulfillment and evaluation of these recommendations all the organizing and sponsoring institutions of this event, particularly the Latin American Network and the International College of Person-Centered Medicine, the Sub-Regional Program for South America of the Pan American Health Organization (PAHO/WHO) and the Andean Health Organization.