

PuttTaking stock of evidence on primary care access as a necessary first step towards shifting to primary health care as a public health goal

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Primary care (PC) refers to a model of care that aims to improve population health and dismantle health inequities in society by ensuring equal access to care (Bourgueil et al. 2009). According to the World Health Organization (WHO online), the model is characterized by five core functions: (1) first contact accessibility, serving as a strategic and accessible entry point for health services; (2) continuity, promoting the development of long-term personal relationships between health care providers and patients; (3) comprehensiveness, providing a diverse range of promotive, protective, preventive, curative, rehabilitative, and palliative services; (4) coordination, organizing services and care across levels of the health system and over time; and (5) people-centred care, ensuring people have the education and support needed to make decisions and participate in their own care. However, PC is not a one-size-fits-all model, rather a multitude of approaches exists, each presenting substantial benefits and trade-offs with regard to questions of effectiveness, efficiency, equity and feasibility (Kringos et al. 2015). As a result, policy makers are faced with the challenge of defining a PC path that works best within their country's specific context of public health needs and health system characteristics. As the dramatic experience of the pandemic demonstrated, PC services in many countries are not where they should be in terms of availability and accessibility of care. This manifested in severe disruptions in access to essential services in many parts of the world due to insufficient PC resources and infrastructure, and a lack of preparedness in the area of digitalized medicine. Against this backdrop, the present study examines the state-of-the-art on evidence related to one key and crucial dimension of PC performance –namely, the accessibility of first-point or first-contact services which represents the strategic entry point for patients to access care within the health system. In doing so, we identify common themes in the literature concerning challenges and opportunities for PC strengthening, as well as reflect on new directions for future policy and research.