

Book Reviews

Primary Health Care: Concepts and Challenges in a Changing World — Alma-Ata Revisited

E. Tarimo and E.G. Webster

Geneva: World Health Organization — Division of Analysis, Research & Assessment, 1997, 118 pp. (Current Concerns Paper 97.1, Order #1930090)

Reviewed by Heather F. Clarke

Over 20 years ago, in 1978, the Alma-Ata conference defined and gave international recognition to the concept of primary health care (PHC). This approach embodies explicit principles, including: universal accessibility and coverage on the basis of need, community and individual involvement and self-reliance, intersectoral action for health, and appropriate technology and cost-effectiveness. It has major implications for the entire health-care system and for its interactions with broader economic and social development structures.

Chapter 1 of *Primary Health Care: Concepts and Challenges in a Changing World — Alma-Ata Revisited* summarizes the main features of the PHC approach and the implications of this approach for health-care systems. Of particular note are required changes related to redistribution of existing resources and to attitudes/misinterpretations. Six misinterpretations of PHC are addressed. Perhaps the most common of these is the misinterpretation of PHC as the first level of contact between individuals/communities and the health-care system — that is, primary care.

The next five chapters provide a critical review of the progress, or lack thereof, towards implementation of the specific recommendations of the Alma-Ata conference. Major obstacles to implementation are discussed with respect to: strategic approaches, health systems, program elements, human resources, and international support. Canada is praised for its progress in mobilizing health action and public debates. However, neither Canada nor any other country is praised for the outcomes. There have been few successes in advancing the PHC approach or in advancing towards the goal of health for all. Successes are mainly to be found in accepting the concept of PHC — promoting more equitable distribution of health resources and re-orienting services — but this has been more evident in developing countries than developed ones. Epidemiologically, childhood diseases such as poliomyelitis, measles, tetanus, and pertussis have decreased due to the rapid expansion of immunization. However, few developing countries have been able to maintain a high level of childhood vaccination without external support.

Failures relate primarily to a lack of the political commitment required to embrace PHC and a lack of coordination of activities, resources, priority-setting, and systems research. It is distressing to learn that social, ethnic, gender, and occupational inequities in health and health care have decreased little and sometimes have even increased. This finding is not restricted to developing countries.

Chapter 7 addresses important issues for the year 2000 and beyond. These are: partnership with a view to a social contract and a code of ethics, special efforts to reach the underprivileged in pursuit of equity, renewed attempts to improve the quality and effectiveness of health services, and rethinking of priorities.

What does this have to do with nursing? A great deal. The Canadian Nurses Association and many provincial and territorial nursing associations take the position that the Canadian health-care system should be founded on the principles of PHC and the *Canada Health Act*. Nurses believe that PHC is an essential approach, with significant roles for nurses. Nurses influence policy at many levels and provide leadership in health-care reform. They facilitate change in the social context of health. In a health promotion approach, they develop partnerships with others and contribute to new models of health care in practice, education, and research (Registered Nurses Association of British Columbia [RNABC], 1998a).

In their summary, Tarimo and Webster note: "[re]search and development is essential to improve the quality of priority setting processes" (p. 89). These are roles for nurses that have been recognized nationally (RNABC, 1998b).

Primary Health Care: Concepts and Challenges in a Changing World — Alma-Ata Revisited is a clear, concise, and well-referenced volume. It is a valuable resource for nurses in the areas of practice, education, research, policy, and management.

References

- Registered Nurses Association of British Columbia. (1998a). *Primary health care: A nursing perspective*. Publication #49. Vancouver: Author.
- Registered Nurses Association of British Columbia. (1998b). *National Think Tank on Primary Health Care and Nursing*. Publication #344. Vancouver: Author.

Heather F. Clarke, RN, PhD, is Director of Policy and Communications, Registered Nurses Association of British Columbia, Vancouver.

Primary Health Care in Urban Communities

Beverly McElmurry, Cynthia Tyska, and Randy Spreen Parker

Sudbury, MA: Jones & Bartlett and National League of Nursing, 1999, 266 pp.

ISBN 0-7637-1010-5

Reviewed by Sheila M. Gallagher

Primary health care can integrate the activities of the medical, educational and economic sectors with those of individuals and communities. By strengthening local initiative and stimulating educational reform and greater communication and cooperation between health professionals and lay people, primary health care will not only allow better use of resources but ensure that community needs are met. (World Health Organization, 1985, p. 1)

This book details the collaborative efforts of health-care workers, community members, and university personnel in community-based primary health care (PHC) initiatives in Chicago, Illinois. The range of projects described illustrates the chameleon-like character of effective PHC initiatives. These initiatives embody PHC principles in a way that is acceptable and useful to local communities. The operational and philosophical link between PHC and community development is evident in these discussions.

Chapters 1 and 2 provide an introductory framework for the Chicago initiatives. A discussion on the role of public and private partnerships in health care in PHC strikes a familiar chord in light of current Canadian discussions. Chapters 3, 4, 5, and 7 highlight community health advocates (CHA) and nurse teams, CHA training, and reflections on the role of the CHA — with the work of Paulo Freire as a recurring theme. Chapter 6 provides theoretical, practical, and critical discussions on PHC evaluation and is thus an important resource for anyone undertaking a PHC project. Freire's (1973) discussions on literacy and popular education and Kretzman and McKnight's (1993) work on community capacity building inform Chapters 8, 9, and 10. Chapter 11 describes a PHC-inspired academic community health centre located in a medically underserved area where health-care professionals in training receive a true education. Chapters 12 and 14 discuss multicultural projects. Chapter 13, 15, and 16 highlight children's services and education/curriculum design. Chapters 17 and 18 explore contemporary community health, including innovative community-centred outcome measures and transformational leadership. Planners and evaluators should take note.

The initiatives presented in this book are examples of nursing in action. They can be beneficial for all health-care professionals but particularly for nurses, as they are celebrations of the practice and art of nursing.

Front-line health-care professionals, students, and educators will benefit from the breadth of the descriptions of PHC projects — projects that exemplify nursing innovation.

Additional strengths of *Primary Health Care in Urban Communities* include the format of the chapters and of the book itself. The chapters feature sections on research methodology; the generalizability of lessons learned from individual projects; and successes and challenges in planning, administering, and evaluating projects. These sections provide pearls of wisdom relative to these three stages in any PHC initiative. Increasing demand on health-care initiatives to demonstrate outcomes and to maximize efficacy and efficiency highlights the value of the lessons learned from the Chicago PHC projects.

The final chapter of the book, which mirrors the format of the preceding chapters, provides an analysis of the lessons learned from the various initiatives. This analysis offers conceptual insight on a macro level for researchers, educators, and policy-makers.

References

- Freire, P. (1973). *Education for critical consciousness*. New York: Seabury Press.
- Kretzman, J., & McKnight, J. (1993). *Building communities from the inside out: A path towards finding and mobilizing a community's assets*. Chicago: ACTA Publications.
- World Health Organization. (1985). *Primary health care in industrialized countries*. Copenhagen: Author.

Sheila M. Gallagher, RN, NP, PhD, is Child and Adolescent Health Leader, Northeast Community Health Centre, Edmonton, Alberta.

***Promoting Health:
The Primary Health Care Approach (2nd edition)***

Andrea Wass

Toronto: Harcourt Saunders, 2000, 297 pp.

ISBN 0-7295-3425-1

Reviewed by Beverly D. Leipert

Health promotion workers increasingly find themselves operating in a political context that supports economic rationalism, "new right" thinking, and decreased government commitment to the principles of primary health care. Andrea Wass has written a valuable book on PHC and health promotion principles and practice. Intended primarily for nurses but of value to other health promotion workers as well, this book, now in its second edition, presents historical, theoretical, and practical information designed to empower health-care workers and advance health promotion in these politically challenging times. Although *Promoting Health* focuses on PHC in Australia, all of its 10 chapters have been updated and expanded to address international perspectives as well.

Chapter 1 examines the principles of PHC from a historical perspective and describes the new public health movement. Here, the author reviews barriers to the implementation of PHC approaches, such as political and economic restructuring and interconnections, and highlights national and World Health Organization commitments to PHC. This chapter also uniquely examines what PHC is *not* as well as what it *is*. The second half of the chapter looks at Australian health policy in some depth and critically examines the extent to which this policy incorporates PHC principles.

The second chapter presents key concepts and values in health promotion and raises issues and questions that health workers face as they contemplate and use health promotion ideas and approaches. Definitions of health, community health, family health, health promotion, and other concepts are discussed, and issues attendant to such health promotion concepts as client participation, power, and responsibility are addressed. Interesting and controversial health promotion projects, such as the Australian program "Life: Be in It With a Cat," are critically discussed.

The next two chapters of *Promoting Health* examine needs assessment and evaluation. Wass contends that these two areas have a great deal in common, as both require research skills as the basis of their

processes. Chapter 3 examines major issues in community assessment, such as the types of research skills, data sources, and health indicators that are used to determine needs. In Chapter 4 the author approaches the evaluation of health promotion programs from participatory and empowerment perspectives.

Chapters 5 to 9 explore a number of strategies useful in health promotion work — using the mass media, employing community development approaches, working for healthy public policy, working with groups, and using education as a health promotion strategy. Throughout these chapters, the author presents examples, advice, and tips to assist the reader in implementing each health promotion strategy.

Chapter 10 considers how to put health promotion approaches and strategies together to produce an effective health promotion practice for individuals or teams. In her conclusion, Wass provides suggestions to further develop skills and expertise in health promotion and primary health care. The book has five appendices: the *Alma-Ata Declaration*, the *Ottawa Charter*, the *Jakarta Declaration*, an annotated bibliography, and some Internet sites.

Promoting Health: The Primary Health Care Approach is a practical resource for nurses and other health promotion workers. It will also be of interest to students of health promotion in nursing, community health, and other education programs. Articulation of historical highlights of the health promotion movement and of its commitment to the principles of social justice, equity, community participation, intersectoral action, and sustainable, balanced health-care systems provides a solid foundation for students of PHC in general and health promotion in particular. Although the book focuses on health promotion as it pertains to Australia, the international audience may not necessarily consider this a limitation. Many of Wass's examples and discussions do seek to articulate health promotion principles for a wider audience. The combination of historical, theoretical, and practical information in one volume, and the empowerment approach evident throughout the book, make this a comprehensive, accessible, and timely resource for health promotion students and practitioners in these times of political retrenchment.

Beverly D. Leipert, RN, PhD (cand.), is Assistant Professor, Nursing Program, University of Northern British Columbia, Prince George, and a Killam Scholar, University of Alberta.