

# Strengthening primary health-care leadership: responding to a global need



The need for whole-system leadership to advance primary health care (PHC) has never been more urgent. In this Comment, we make the case for cultivating PHC leadership capacity worldwide and share early lessons from a first-of-its-kind effort to do so (panel).

Societies worldwide face complex health challenges from ageing populations, epidemiological transitions, and the triple burden of disease (ie, communicable diseases, non-communicable diseases, and injuries). These challenges are further compounded by the lasting effects of COVID-19, climate change, ongoing conflicts, and a shifting geopolitical landscape that is reshaping global health priorities and cooperation.

PHC, articulated in the Declaration of Alma-Ata<sup>1</sup> and reaffirmed in the Declaration of Astana,<sup>2</sup> is widely recognised as the way to achieve universal health coverage and the Sustainable Development Goals.<sup>3</sup> Accelerating the radical reorientation of health systems to PHC requires leaders who can navigate complexity and drive systemic change in a rapidly changing world. However, PHC-enabling leadership capacity remains generally scarce, with many countries struggling to translate the PHC vision into action despite recognising PHC as the foundation of strong health systems.

WHO member states and other stakeholders have explicitly called for practical guidance on PHC transformations.<sup>4</sup> These calls to action have informed the development of the PHC operational framework,<sup>5</sup> PHC

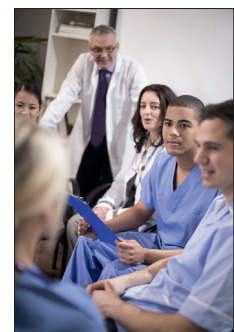
measurement framework and indicators,<sup>6</sup> and initiatives such as the PHC implementation solutions initiative<sup>7</sup> and the PHC country case study compendium.<sup>8</sup> The implementation of these efforts has highlighted the need for PHC-focused leadership training and cross-regional exchanges of practical knowledge, which is central to WHO's new general programme of work for 2025–28.

The Strengthening Primary Health Care Leadership: Global Capacity Building Course (hereafter, PHC Leadership Course) was launched in the autumn of 2024 to build technical and strategic leadership skills for advancing PHC reforms. Hosted on WHO Academy's flexible digital learning platform and designed collaboratively across WHO technical teams and regional offices, the 12-week course combines asynchronous content with live regional sessions to foster engagement with global experts and peers. With more than 100 participants from 77 countries, the course reflects the Academy's commitment to competency-based learning that meets country-specific needs and strengthens the global health workforce. With the foundation of the PHC operational framework,<sup>5</sup> the course aims to equip leaders with practical tools to overcome implementation barriers for PHC-oriented health system reforms, use PHC strategic and operational levers, and drive change.

Beyond technical content, the course emphasises leadership's human dimensions—focusing on relational engagement, compassionate leadership, and sensitivity to cultural and contextual factors, including respect for community values and beliefs and awareness of the political economy of PHC-oriented reforms to prepare participants to navigate change with strategic insight.

The inaugural version of the course was aptly named the Pathfinder edition as it purposefully engaged participants in providing feedback on the content and learning process for further refinement. Recruitment was equitable and accessible through an open call disseminated via WHO's network and partner organisations. Applicants self-nominated and shared their leadership challenges and aspirations.

Demand for the course was great, with more than 2700 applications from 155 countries across all WHO regions. Most applicants were from the African region,



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For the PHC Leadership Course see <https://www.who.int/teams/primary-health-care/evidence-and-innovation/strengthening-primary-health-care-leadership-global-capacity-building-course>

## Panel: Key messages

- Effective leadership to support whole-system learning is urgently needed to advance primary health care (PHC) as the foundational approach for achieving universal health coverage and the Sustainable Development Goals
- WHO's PHC Leadership Course responds to a substantial global demand, evidenced by more than 2700 applications from 155 countries, to equip leaders with both the technical knowledge and implementation skills to drive PHC-oriented reforms
- Establishing an enabling presence of PHC leaders requires collaborative efforts across WHO, WHO member states, development partners, academic institutions, and civil society organisations to further bolster capacity-building opportunities worldwide

the Eastern Mediterranean region, and the South-East Asia region. Participants included policy makers, ministry officials, health system executives, academics, and primary care providers. International organisations were also well represented.

Applicants' motivations centred on leadership development, addressing health system challenges, and building practical capabilities. They sought to strengthen their ability to lead PHC-oriented reforms while overcoming obstacles such as access barriers, implementation gaps, and resource constraints.

However, the Pathfinder edition had limitations. English language-only delivery affected communication in regions where other languages predominate. Virtual engagement, although practical, limited the relationship-building opportunities of in-person encounters. Balancing content breadth and depth was challenging, with some topics such as human resources and financing receiving insufficient attention. Content related to conflict settings was also scarce. Although participant feedback and implementation-project outcomes provide immediate insights into the course's relevance and applicability, further longitudinal research is essential to understand its lasting effects on leadership behaviours and system-wide change.

Despite the course's success, sustained efforts are needed to develop the leadership required to realise PHC's potential to save 60 million lives and increase life expectancy by up to 3.7 years by 2030 worldwide.<sup>9</sup>

Efforts are underway to expand PHC leadership capacity through country and subregional versions of the course that are adapted to local priorities, as well as shorter capacity-building programmes and hybrid learning opportunities. WHO Academy is also working to translate the course content into all six UN languages. These adaptations aim to ensure that content remains accessible to leaders at all levels.

The large demand for PHC leadership training cannot be met by WHO alone. Developing the next generation of PHC leaders requires collaboration among member states, development partners, academic institutions, and civil society organisations. Although efforts should focus on mid-level to senior-level professionals, who are positioned to influence policy, allocate resources, and drive health system reform, it is equally important not to overlook young people who bring fresh ideas, energy, and a long-term perspective that is essential to building more equitable and resilient PHC-oriented health systems.

By working together, we can enable all countries to secure the leaders required to make PHC the foundation of their health systems. A shared commitment and coalition building for development of PHC leadership will allow countries to move beyond short-term interventions and build resilient, people-centred health systems to secure equitable access to quality care and produce improved health outcomes. For PHC to fulfil its potential, we should invest in its leaders. Join us in creating a movement that will provide the foundations for health for all.

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