The Division of Pacific Technical Support serves a unique role by addressing concerns and providing support that enhances the work of both the Regional Office for the Western Pacific and the country offices in the Pacific. Over the past year, the Division has provided key support to Pacific islands countries and areas in a variety of ways—from helping to build and strengthen the pool of qualified health professionals and providing Pacific-specific approaches to pressing public health issues to streamlining the management of all WHO programmes and activities in the Pacific. The Division made important contributions to the Ninth Meeting of Ministers of Health for the Pacific Island Countries in Honiara, Solomon Islands, from 28 June to 1 July 2011, ensuring that the meeting reflected the true Pacific style of engagement.

The Division is made up of three programmatic teams: Combating Communicable Diseases and Health Security and Emergencies; Health Sector Development; and Building Healthy Communities and Populations.

The new team structure has opened communication channels among different programmes within and among the 21 countries and areas in the Pacific. Budget management in the Division is decentralized—designed to reduce delays in operational decisions—leading to improved responsiveness to country issues. While the Division was established less than two years ago, it has enjoyed considerable success, including its close collaboration with the Secretariat of the Pacific Community (SPC) and the Pacific Islands Forum Secretariat that resulted in a declaration of a Noncommunicable Disease (NCD) Crisis at the Pacific Islands Forum Leaders meeting in September 2011.

With additional staff and strengthened management, the Division has focused its support to countries in four areas: agenda setting; norms and standards development and communications; country capacity strengthening for implementation; and monitoring and evaluation.

**Agenda Setting**

*The Ninth Meeting of Ministers of Health for the Pacific Island Countries.* This biennial meeting was co-organized by the Division and SPC. For the first time, the meeting included an open forum allowing ministers to introduce and discuss topics outside the fixed agenda. Topics discussed included NCDs, national health policies and strategic plans, and maternal and child health. The ministers identified 10 additional areas for discussion, ranging from mental health and human resources for health to disaster risk management and health-care financing and leadership. Technical papers on these additional topics were developed and strategies were discussed and agreed upon.

**NCD Crisis.** One of the key outputs of the meeting of ministers of health was the Honiara Communiqué delivered to the Pacific Islands Forum Leaders meeting in Auckland, New Zealand, in September 2011 requesting action on a declaration of a Pacific NCD crisis. That declaration in turn helped inform the meeting that led to the United Nations landmark *Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases* later that month in New York.

**Norms and standards**

Over the past year, the Division supported Fiji in producing the first Health Systems in Transition (HiT) series, documenting the history and development of health systems in Fiji, health system reforms and the way forward. In
addition, national laboratory quality standards and laboratory legislation were developed in Fiji. The Division also supported Fiji, Kiribati, Samoa and Vanuatu in developing up-to-date food legislation in line with Codex Alimentarius and with a common Pacific approach. Standard operating procedures for medicines procurement and supply management were developed in Fiji. Development of standards and practices for the health professions, treatment guidelines, and laboratory and pharmaceutical quality management systems also were supported. The Division supported the development of national tuberculosis guidelines for Fiji, Nauru, Solomon Islands and Vanuatu.

**Country capacity strengthening for implementation**

*Building Healthy Communities and Populations.* Strengthening primary health care services for NCDs using the Package of Essential NCD (PEN) services has been initiated in Fiji, Kiribati, the Federated States of Micronesia, Tonga, Samoa, Solomon Islands and Vanuatu as part of the health sector response to mitigate the impact of the NCD crisis. This effort involves health facility assessments, community mobilization, and the development of tools for best practices, training and supervision for the delivery of integrated services at the grassroots level.

Support for multisectoral national and state food summits was provided in Tonga and the State of Chuuk in the Federated States of Micronesia. Risk-based food inspection training was provided in the Federated States of Micronesia, Palau, Solomon Islands and Vanuatu. In addition a “Healthy Islands Through Sports” meeting was organized in collaboration with SPC and the Australian Sports Commission for the Pacific island countries to garner better partnership between health and sports for NCD prevention.

Cook Islands, Kiribati, the Marshall Islands, the Federated States of Micronesia, Niue, Nauru, Palau, Solomon Islands, Tonga, Tuvalu and Vanuatu are being assisted with climate change and health vulnerability assessments and the development of national climate change and health action plans. Timely emergency response was provided, with WHO as the health cluster lead, for the droughts in Tokelau and Tuvalu and floods in Fiji.

*Combating Communicable Diseases and Health Security and Emergencies.* Started in 2010, the Pacific Syndromic Surveillance System has been enthusiastically adopted by all 21 Pacific island countries and areas, including Papua New Guinea. They report to WHO on a weekly basis for dissemination through e-mail with indicator- and event-based summaries. The report shows trends over time for each country and area, making it possible to quickly recognize outbreaks.

For many Pacific island countries and areas, the system represents the first time that they have had a functional outbreak early warning mechanism. As a result, reported outbreaks have increased sevenfold since the introduction of the system.

Training was conducted for mid-level managers of the Expanded Programme on Immunization in 10 countries, and Fiji was supported for training on the introduction of new vaccines. Solomon Islands developed plans for cholera vaccinations in high-risk provinces. Kiribati and Solomon Islands, both eligible for GAVI Alliance support, were assisted in the development of proposals for funding and preparation of annual progress reports. Support also was provided to 13 Pacific island countries and areas for applications and implementation of grants from the Global Fund to Fight AIDS, Tuberculosis and Malaria.

Support to fight three neglected tropical diseases—leprosy, lymphatic filariasis and
The work of WHO in the Western Pacific Region

The work of WHO in the Western Pacific Region has been strengthened. Among the 15 countries in the Pacific programme of elimination of lymphatic filariasis, eight are close to the elimination goal: American Samoa, Cook Islands, the Marshall Islands, the Federated States of Micronesia, Niue, Palau, Tonga and Vanuatu. Fiji, French Polynesia, Kiribati, Samoa and Tuvalu are actively implementing mass drug administrations. With support from WHO and the United States Centers for Disease Control and Prevention, Vanuatu recently completed baseline mapping for yaws.

**Health Sector Development.** Training in human resource planning and management was conducted in Guam, the Marshall Islands, the Federated States of Micronesia and Palau, while some mentoring work for human resource managers was conducted in the Marshall Islands and Palau. The Division supported the development and revision of national medicines policies in Fiji, Palau, Tonga, Tuvalu, and Vanuatu. Support to strengthen medicines procurement and supply systems has been provided to Cook Islands, Fiji, the Marshall Islands, Palau, Tuvalu and Vanuatu. Medicines legislation was developed and reviewed in Fiji and Tuvalu, while the development of coherent national regulatory frameworks, monitoring and evaluation mechanisms, and tools for laboratory services were carried out in Fiji, Palau, Samoa, Solomon Islands and Tonga. Fiji was supported with policy development and implementation for health information systems.

**Monitoring and Evaluation**

A results-based performance framework has been developed for monitoring and evaluation linking to country outcomes, which serves as a tool for resource mobilization. A few countries completed their first round of the NCD STEPS surveys to set baselines, and Fiji and Tonga were supported for second round surveys to measure the impact of NCD prevention and control efforts. A pharmaceutical sector country profile has been compiled in Cook Islands, Fiji, the Marshall Islands, the Federated States of Micronesia, Nauru, Palau, Solomon Islands, Tonga, Tuvalu and Vanuatu.