

Introduction

Progressing towards the Healthy Islands vision

The Division of Pacific Technical Support (DPS) was established in 2010 in Suva, Fiji. The new division expanded the role of the WHO Representative Office in the South Pacific, which was established in 1956 to serve Pacific island countries and areas. Together with the Regional Office, DPS coordinates tailored technical support to the 21 Pacific island countries and areas through WHO country offices in Fiji, Kiribati, the Federated States of Micronesia, Samoa, Solomon Islands, Tonga and Vanuatu.

WHO support in the Pacific is guided by the Healthy Islands vision, embraced by health leaders from the Pacific as a unifying theme for improving health and protecting life-sustaining environments in the Pacific. Adopted at the first Pacific Health Ministers Meeting in Yanuca Island, Fiji in 1995, Healthy Islands has provided an aspirational vision for healthy living in the Pacific for more than two decades.

To align and provide fully tailored support to this renewed commitment from the Pacific health leaders, WHO has embraced and clearly articulated its support around the Healthy Islands vision in its draft *Pacific Island Countries and Areas – WHO Cooperation Strategy (PICCS)* that will cover the period from 2018 to 2022. The PICCS was developed in close collaboration with health partners



A health worker in Cook Islands measures growth and development of a child at a primary health-care facility.

and governments. It was also shaped at the same time as the *United Nations Pacific Strategy 2018–2022*, thus ensuring full congruence and integration between the two strategies.

DPS has supported the development of national strategic health plans, annual reviews and planning in Cook Islands, Fiji, Kiribati, the Federated States of Micronesia, Nauru, Samoa, Solomon Islands, Tonga, Tuvalu and Vanuatu. Support also was provided in developing, implementing and monitoring national policies, plans and guidelines

on essential medicines and health technologies, including work on traditional medicines.

WHO is working with Pacific island countries and areas to develop comprehensive national action plans on anti-microbial resistance (AMR). WHO also encouraged and provided support to organize public awareness campaigns in Fiji, Kiribati, the Federated States of Micronesia, Palau, Samoa, Tonga and Tuvalu.

In an effort to advance universal health coverage, WHO has worked with Pacific

island countries and areas to improve the delivery of essential health services by focusing on primary health care and community health. Acting on a recommendation from the Eleventh Pacific Health Ministers Meeting in April 2015, WHO has worked closely with the Pacific Community (SPC) and other partners to develop the Healthy Islands monitoring framework. A progress report on the framework will be presented to the Twelfth Pacific Health Ministers Meeting to be held from 28 to 30 August 2017 in Rarotonga, Cook Islands.

In support of efforts in the Pacific to prevent and manage noncommunicable diseases (NCDs), WHO has supported monitoring against regional and global targets and treaties, such as the *Global Monitoring Framework for NCDs* and the *WHO Framework Convention on Tobacco Control*.

Tobacco-free community settings continue to increase across the Pacific, alongside increased taxes and strengthened laws to reduce tobacco use. Repeated national surveys in three Pacific island countries show tobacco use on the decline.

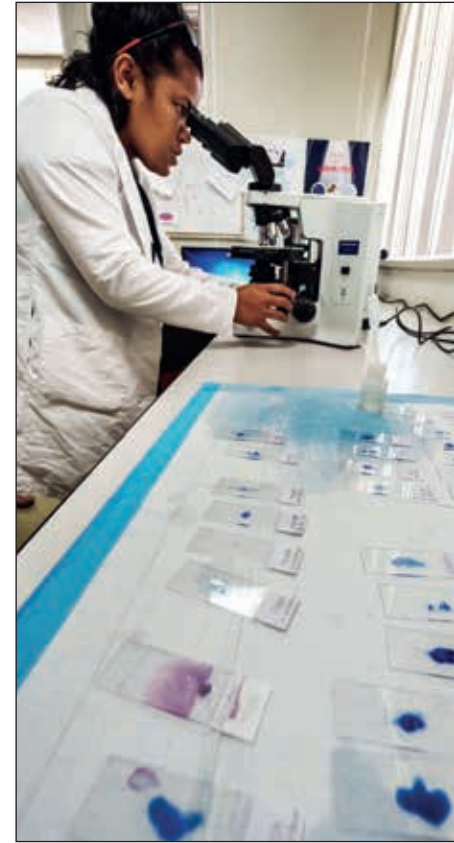
A regional monitoring dashboard for NCD actions and progress against global and regional targets has been developed and will be used for annual progress reports. Nearly all Pacific island countries and areas have customized the evidence-based protocols on the early diagnosis and management of major NCDs from the *WHO Package of Essential Non-communicable (PEN) Disease Interventions for Primary Health Care in Low-Resource*



Use of the PEN protocols is supporting improved management of NCDs through primary health care in the Pacific.

Settings. A PEN meeting provided an opportunity for country focal points, experts and partners to review country progress on NCD clinical management, as well as consider actions to accelerate and strengthen programme implementation and roll-out.

WHO is supporting the scale-up of country actions for mental health, with a focus on strengthening policies and



A health worker in the Marshall Islands conducts laboratory tests.

laws, integrating mental health into primary health care and raising public awareness. Many Pacific island countries used World Health Day 2017 to increase community understanding of depression under the theme *Depression: Let's talk*.

In Fiji, an information package helped staff at health facilities and primary and secondary schools organize campaigns in their communities; Kiribati and Samoa

hosted sports events to call attention to the issue. Supporting Pacific island countries and areas to reduce vulnerability to acute threats to health from public health emergencies and the health consequences of disasters requires coordinated national and regional responses. Over the past year, WHO continued to support countries in detecting, investigating and mitigating outbreaks of arbovirus disease, including outbreaks of dengue serotype 2, which has re-emerged in the Pacific.

WHO is working closely with Pacific Public Health Surveillance Network re-

sponse partners – SPC, the Pacific Island Health Officers' Association and the United States Centers for Disease Control and Prevention – in strengthening Pacific health security through coordinated technical support for the implementation of the International Health Regulations, also known as IHR (2005), through the *Asia Pacific Strategy for Emerging Diseases and Public Health Emergencies (APSED III)*.

As a lead agency of the Health and Nutrition Cluster of the Pacific Humanitarian Team, WHO has worked closely with Fiji and Solomon Islands in their

response to Category 5 Tropical Cyclone Winston in 2016 and the M6.4 Makira earthquake in 2017, respectively. Work began in 2017 on a five-year programme to build climate-resilient health systems in Kiribati, Solomon Islands, Tuvalu and Vanuatu through strengthened governance and policies, early warning systems, and preventive and curative service delivery within the framework of a successful pilot project on climate change adaptation to protect human health.

WHO support continues in tackling the emergence of multidrug-resistant



The effects of climate change and severe weather abound in the Pacific. This road in Tuvalu is disappearing because of coastal erosion and flooding.



Health workers visited every community and household during mass drug administration campaigns in Vanuatu to prevent and treat lymphatic filariasis.

tuberculosis (MDR-TB); building on the strong progress towards the elimination of lymphatic filariasis, trachoma, soil-transmitted helminths and yaws; and the prevention and control of HIV and sexually transmitted infections. The Marshall Islands achieved elimination of lymphatic filariasis as a public health problem in 2017 for a total of five countries in the Western Pacific Region that

have been removed from the global list of endemic countries and areas.

Over the past year, Fiji, Kiribati and Vanuatu began countrywide rounds of mass drug administration (MDA) against trachoma. These endemic countries – along with Solomon Islands, which conducted MDAs the previous year – are making great progress towards the elimination of trachoma.

Lymphatic filariasis: elimination as a public health problem validated

Sustaining continuous efforts made since 1999 when the Pacific Programme to Eliminate Lymphatic Filariasis was established, the Pacific continues to move towards the elimination of lymphatic filariasis, also known as elephantiasis.

The majority of the 15 Pacific island countries and areas, plus Papua New Guinea, that were endemic with lymphatic filariasis at the beginning of the global elimination programme are now seeing encouraging results from annual MDAs with two medications – diethylcarbamazine and albendazole – and strong post-MDA surveillance.

Over the past year, four Pacific countries – Cook Islands, the Marshall Islands, Niue and Vanuatu – were validated by WHO as having achieved the elimination of lymphatic filariasis as a public health problem.

Five more countries have successfully completed MDAs, and they are now in the surveillance phase; three of these countries are likely to complete their dossiers for validation of elimination status and submit them before the year ends. Six countries continue with rounds of MDA in areas where the transmission of lymphatic filariasis persists, and intensive efforts are being made to ensure effective interventions in these areas. ■