Young people take advantage of low tide to play football on tidal flats in New Caledonia.
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Introduction

Enhancing healthy and resilient Pacific islands

The WHO Division of Pacific Technical Support was established in 2010 to deal with the specialized health challenges of the Pacific, including the double burden of disease and climate change. With offices in Fiji, Kiribati, the Federated States of Micronesia, Samoa, Solomon Islands, Tonga and Vanuatu, the Division coordinates support tailored to Pacific island countries and areas (PICs).

The Pacific islands experience specific challenges due to small populations and geographical remoteness. Specialized services typically require high population numbers to be efficient and cost-effective, which means they are often not available in the Pacific islands. Drugs and other needed products are also often high-priced imports. Smart solutions are required to overcome these “built-in” obstacles for health systems in the Pacific.
Strengthening health systems and primary care is embedded in the Healthy Islands vision set out in 1995. The vision has guided the policies of PICs over the past 20 years, as well as the support from WHO and other development partners.

WHO defines health security as “the reduced vulnerability of populations to acute threats to health” through collective international action. Health is a major concern in nearly all emergencies. People have high expectations for health systems to respond quickly and effectively in emergencies while remaining fully functional.

Readiness to respond to and recover from health crises requires strong national health systems, and partnerships for regional and global collective action for health security. Key achievements in this area include the endorsement of the Pacific Health Security Coordination Plan 2017–2022, with funding from the Department of Foreign Affairs and Trade of Australia and the Ministry of Foreign Affairs and Trade of New Zealand.

WHO also stands ready to respond to emergencies in the Pacific through technical collaboration and field operations. With WHO support, National Emergency Medical Teams in four PICs have strengthened readiness to respond in crises and preparedness to receive and employ international teams.

As of January 2018, 12 PICs have reached and sustained high routine immunization coverage of over 90%, in line with goals for the Decade of Vaccines 2011–2020. WHO in the Pacific has worked closely with the United Nations Children’s Fund (UNICEF) to train Expanded Programme on Immunization (EPI) managers to improve the quality of data behind these statistics.

PICs as a bloc are likely to have achieved the regional measles elimination goal. This conclusion is based on the discarded non-measles rates in 2016 and 2017, which exceed the expected rates for monitoring, and the fact that no measles outbreaks have occurred in the Pacific since 2015.

Similarly, hepatitis B control is progressing through immunization, with eight PICs verified, and four now ready to be verified as having achieved the disease control goal. Over the past year, the Division has continued to support the rollout of testing and treatment guidelines for HIV, sexually transmitted infections and hepatitis, including their inclusion in the development of national action plans, training of trainers and surveillance activities.

Prevention, care and control measures continue to be on strong footing, with the burden of tuberculosis (TB) trending downward in PICs. Multidrug-resistant TB and TB/HIV burden is low and has been well managed. WHO coordinated the establishment of a Pacific TB laboratory network as additional support for culture and drug sensitivity testing and a second-line TB drug stockpile for PICs.

Efforts to increase access to health services for women, newborn babies, children and adolescents have continued with the United Nations Joint Programme on Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) in Kiribati, Solomon Islands and Vanuatu. Policy dialogue was concluded on the adaptation and implementation of the new WHO global guidelines and recommendations on RMNCAH in the three countries, with WHO providing support for programme implementation.

Out of 15 countries endemic for lymphatic filariasis, five (Cook Islands, the Marshall Islands, Niue, Tonga and Vanuatu) were acknowledged by WHO in 2016–2017 as having eliminated the disease as a public health problem.

Support for improved disease management using the WHO Package of Essential Noncommunicable (PEN) Disease Interventions for Primary Health Care in Low-Resource Settings included subregional and national capacity-building workshops, with a focus on monitoring. Meanwhile, the fifth Pacific Islands Mental Health Network (PIMHNet) meeting focused on emergencies and mental health resilience. In the wake of Tropical Cyclone Gita, post-disaster support was also provided to Kiribati in March.

In 2017, partnerships for tobacco control also increased, as agreements were signed with the Oceania Customs Organisation and the South Pacific Tourism Organisation.

Health leaders in the Pacific welcomed the WHO special initiative on climate change and health in Small Island Developing States (SIDS). The initiative is a collaboration with the United Nations Framework Convention on Climate Change, for which Fiji presided over its 23rd annual Conference of the Parties. Developing and nurturing resilient health systems is central to addressing the health impacts of climate change. In March, the plan of action to implement the SIDS initiative in PICs was developed. The Pacific action plan will feed into the global initiative, joining forces with SIDS around the world to produce a global plan of action.
1. Pacific Health Ministers Meeting and the Healthy Islands Monitoring Framework

The 20-year review of Healthy Islands concluded that it remains the unifying vision for the development of the health sector in the Pacific. In addition to the findings from the review, WHO and the Pacific Community drafted the Healthy Islands Monitoring Framework and submitted it for endorsement at the Twelfth Pacific Health Ministers Meeting (PHMM) in Rarotonga, Cook Islands, in August 2017.

The framework includes 48 mandatory indicators (33 core and 15 complementary) and 31 optional indicators to track progress of the health status of populations across the Pacific. The framework also enables progress to be tracked against the health-related targets in the Sustainable Development Goals. This step helps ensure that countries are on track towards universal health coverage in the Region.

The first progress report, published at the August 2017 PHMM, offers baseline data for the indicators as well as a snapshot of achievements and challenges that underscore opportunities and priority actions. The PHMM tasked the Pacific Heads of Health to work closely with WHO and the Pacific Community to collect data and publish the second report, including suggested amendments.

As stronger health information systems will bolster the monitoring framework, continued support from development partners is necessary to strengthen overall systems, including digitalization and building national capacity for data management and analysis. The resolution of the Twelfth PHMM commits PICs to further strengthening regional networks to share best practices and improving digitalization of health information systems.
2. Climate change and health in the Pacific

The Pacific is among the world’s most vulnerable regions to climate change. The Twelfth PHMM welcomed the WHO Director-General’s SIDS initiative on climate change and health. Pacific health leaders called for a massive scale-up of efforts to mitigate the health consequences of climate change, making climate change and health a standing agenda item for future PHMMs.

The initiative, launched in November 2017, envisions that, by 2030, all SIDS health systems will be resilient to climate variability and change. The initiative calls for increasing international financial support for climate change and health efforts in SIDS.

WHO hosted a meeting in Nadi, Fiji, in March 2018 to develop the Pacific action plan for the SIDS initiative. The Minister of Health and Medical Services of Fiji and the Minister of Health of the Cook Islands co-chaired the meeting, which was also attended by the WHO Assistant Director-General for Climate and Other Determinants of Health.

The WHO/Global Environment Facility project on Building Resilience of Health Systems in Pacific Island Least Developed Countries serves as a significant milestone in WHO’s climate change and health programming. The project aims to build climate-resilient health systems through strengthened governance and policy, early warning and health information systems, and preventive and curative health services.

Children catch crabs during low tide in the Marshall Islands. Climate change is affecting the close connection between ecosystems and people in the Pacific.
3. Health Promoting Schools in Fiji

With funding from the Korea International Cooperation Agency, WHO is working in Fiji with the Ministry of Health and Medical Services and the Ministry of Education, Heritage and Arts to expand and strengthen the Health Promoting Schools programme.

Since its start in late 2016, the three-year expansion project has now enrolled 204 new schools. Guided by the National Steering Committee, which is chaired by the Ministry of Education, Heritage and Arts, Health Promoting Schools focus on three priority areas: (1) water, sanitation and hygiene; (2) diet and physical activity; and (3) mental health and well-being, in line with the problems identified among school-age children in Fiji. Technical working groups, comprising representatives from key government departments and civil society organizations, have been formed for each area to provide guidance on approaches.

In the first phase, 89 schools in Suva, Lautoka and Nausori joined the programme. They underwent baseline assessments of the school environment and formed their own Health Promoting Schools steering committees. In total, 6500 students completed the questionnaire using tablet computers.

Students were measured for height, weight and haemoglobin levels. Primary school students were also asked to provide stool samples for assessment of soil-transmitted helminth infections. A summary of these baseline assessments has been provided to each school to plan interventions.

Starting in March 2018, the second phase of the programme added 115 schools across the remaining districts of Fiji. They are undergoing baseline assessments and will start planning interventions in late 2018.
4. Response to emergencies, including outbreaks and disasters

Infectious disease outbreaks continue to cause morbidity and mortality in PICs. From July 2017 to February 2018, the Division of Pacific Technical Support supported the response to 15 of the 23 outbreaks reported in the Pacific, of which about a third were dengue fever.

The re-emergence of dengue serotype 2 in Solomon Islands in 2016 after 20 years resulted in a large outbreak of more than 12,000 clinical cases. The same disease subsequently re-emerged in Vanuatu and Samoa. All four serotypes of dengue co-circulate in the Pacific.

WHO contributed technical expertise in information management and epidemiology, laboratory testing, infection prevention and control, risk communications, clinical case management, vaccine use and procurement, and integrated vector management. In five outbreaks (including outbreaks of *Acinetobacter baumannii* bacteria, of Hepatitis A, and invasive meningococcal disease), countries requested deployment of WHO staff, Global Outbreak Alert and Response Network (GOARN) partners and consultants, and procurement of supplies for laboratory and vector control.

The Pacific experiences natural disasters every year. Extreme weather events are expected to increase in frequency and severity as a result of climate variability and climate change. Since 2015, PICs have sustained devastating social and economic losses from tropical floods, cyclones, landslides and volcanoes.

Implementation of the WHO Health Emergencies Programme in the Pacific has been strengthened by the recruitment of a Health Cluster Coordinator in 2017. Support was provided for a maritime disaster in Kiribati, Tropical Cyclone Gita in Tonga, and an earthquake in Papua New Guinea, all in 2018.

A WHO staff member surveys damages from Tropical Cyclone Gita in Tonga.