

## 10. HEALTHY ISLANDS, HEALTHY PEOPLE

Secretariat of the Pacific Community & World Health Organisation

### SUMMARY

The Pacific island countries present many challenges in terms of sustainable development. Their smallness in terms of land area and population size poses difficulties in terms of economic growth and social development. In the area of health, many PICTs are unlikely to meet the health-related MDGs by 2015. By global standards, the region has one of the highest rates of non-communicable disease related ill-health and premature deaths. For the major development partners and regional agencies working with governments in this region, more needs to be done in terms of effectively addressing these challenges than the current efforts and resources being mobilised.

Based on the definition of “*sustainable development*”, future generations in the Pacific region are at risk of not meeting their own needs if the current epidemiological trends of ill-health and premature deaths are allowed to continue. Health is an important resource for personal, community and national development. Good health is a necessary pre-requisite for sustainable economic development and income generation. Investment in public health is an investment in economic development and wealth creation. However, addressing sustainable health based solely on the technical and scientific issues within the ambit of the health sector and health professionals will not only be misguided but a waste of valuable resources and investment in the region. All stakeholders in health must be prepared and determined to not only act on best practices and the available evidence base but also to make innovative approaches to addressing the social determinants of health.

### KEY ISSUES

The past decade has seen major shifts in the health status of populations in Pacific Island countries and territories (PICTs). The very high level of non-communicable diseases seen in the Polynesian and Micronesian group of islands is now beginning to become a health issue in the Melanesian countries. Disease previously considered low prevalent (tuberculosis, dengue, typhoid fever) are now re-emerging to pose significant challenges to small island states in terms of the capacity of their health systems to cope with disease outbreaks. The inability of health systems to deliver adequate and quality services further compounds problems because of inherent lack of human and financial resources, poor infrastructure, inefficient delivery and lack of transparency and accountability.

### Prioritising health issues for the Pacific region

Given the existing knowledge and evidence about the health of populations in the Pacific, there are broad priority issues that impact the health and wellbeing of people that have called the Pacific their only home. These include non-communicable diseases, communicable diseases, environmental health and maternal and child health. The challenge for the regional and international agencies working with national governments in the Pacific is to allocate sufficient resources and build responsive health systems to address these health issues. In prioritising these important issues, factors such as the epidemiology and disease burden, social justice, potential for prevention and costs should be considered.

### Non communicable diseases

In September 2011, Forum Leaders acknowledged that Non-Communicable Diseases (NCDs) are the major cause of premature deaths in the Pacific Islands and declared the Pacific region to be in ‘crisis’,

with the highest NCD rates and associated risk factors in the world. They noted that NCDs (diabetes, cancer, chronic respiratory diseases, heart disease including hypertension and stroke) have reached epidemic proportions in Pacific Island countries (PICs) and are creating a 'human, social and economic crisis', requiring an urgent and comprehensive response. Pacific leaders have called for effective multi-stakeholder coordination and strategic partnerships that will result in improved health outcomes in the area of NCDs. The challenge is to maximise opportunities for positive synergies between sectors.

### **Communicable diseases**

Communicable diseases are a wide range of diseases that are either endemic (e.g. diarrhoeal diseases throughout the year) or could cause epidemics (outbreaks) that impact on a country's resources within a short time period (dengue, typhoid). In recent years, the countries in the region have experienced outbreaks of communicable diseases – leptospirosis and typhoid fever in Fiji; cholera in PNG; dengue in New Caledonia and Solomon Islands (during the time of this write-up), HIV and AIDS in PNG; and sexually transmitted infections (chlamydia, cervical cancer) in many Pacific islands.

There are still several diseases which are neglected but prevalent in the Pacific countries, namely lymphatic filariasis and soil-transmitted helminths (STH). In fact, the Pacific Island countries are on the verge of unprecedented success in the elimination of LF from the Region. Approximately 250,000 pre-school and school age children, across ten countries in the Pacific Islands, are at-risk for STH and need medicines.

The challenge for all national governments in the region is to ensure that relevant aspects of their health systems are functioning in a capacity that is able to provide optimal disease surveillance, data analysis and dissemination and effective response to any potential disease threat. Just as important in the prevention and control of communicable diseases in the region are national immunisation programmes (vaccine stock, cold chain, health information systems); procurement and supply management for vaccines, diagnostics, essential medicines); quality laboratories (rapid confirmatory diagnosis); enforcing public health regulations (food safety and standards) and improving the environment in which people live (water and sanitation, housing standards, urban and town planning).

### **Environmental health**

The neglect of human settlements and inadequate waste disposal contribute to the prevalence of infectious diseases such as dengue fever, malaria, tuberculosis, cholera, and typhoid fever. Recent reported literature on health status of populations in the Pacific region have stated that the Infant Mortality (IMR) and Under 5 Mortality Rates (U5MR) remain a problem with the majority of the disease burden due to acute respiratory infections and diarrheal diseases and thus some countries are unlikely to meet the MDGs by 2015<sup>1</sup>. Environmental changes brought about by climate change are likely to compound existing environmental health concerns and a resurgence of endemic diseases such as typhoid fever and leptospirosis. Many countries would need to give more priority to the environment than is currently done in order to improve not only the standard of living but also reverse the poor health indicators related to child morbidity and mortality.

### **Maternal, child and adolescent health**

The health of women, children and young people is a priority in the region as some of the statistics show high prevalence of sexually transmitted infections (e.g. chlamydia) and reproductive tract cancers among women (e.g. cervical cancer); sexually transmitted infections (STIs) including HIV are more prevalent in the younger age group (15-29 years age); and that progress towards achieving the MDGs 4, 5 and 6 is a concern for some PICTs<sup>2</sup>. Women and young peoples' access to quality and appropriate

health care is critical in terms of health information, counselling and testing, access to reliable methods of contraceptives; access to emergency obstetric care; and screening services (e.g. Pap smear) to detect early stages of common cancers in women (e.g. cervical cancers). Women continue to die in childbirth, many newborn deaths are unreported, rates of premature births have increased, unmet need for family planning remains high, and childhood malnutrition has re-emerged as a public health problem.

For many small island states in the region, increasing population pressures due to rapid population growth and poorly managed urbanization has become a big challenge to growing townships and urban areas. Densely populated urban settlements have impacts on standards of living and social services – poor and unhygienic dwellings, overcrowding, food insecurity, waste management, and education and employment opportunities. Increasing population pressure will worsen unless population health issues are seriously addressed through the empowerment of women and young people to have greater control over their sexual and reproductive health – access to reliable methods of family planning and to have greater say in the control of their own fertility.

## **BACKGROUND**

Recent meetings of the Pacific region's health ministers<sup>3</sup> have identified the following as priority issues facing the PICTs and thus requiring the most urgent attention:

- Prevention and control of non-communicable diseases (NCDs);
- Prevention and control of communicable diseases (STIs, HIV, malaria, tuberculosis (TB), Dengue fever);
- Strengthening of national health systems;
- Maternal, child and adolescent health;
- Social determinants of health;
- Food security;
- Mental health;
- Climate change and health;
- Primary health care;
- Disaster Risk Management.

Other important issues of regional priority are urbanisation and overcrowding, increasing population pressure, inadequate nutrition and housing, lack of education, unhygienic physical environment, water and sanitation challenges, and deprived socio-cultural environments as contributing to the health challenges facing many PICTs.

### **Sexually transmitted infections, including HIV**

Although HIV prevalence remains low across the region, PICTs face one of the highest burdens of STIs in the world. Untreated STIs have been known to increase by two to five times a person's risk of contracting HIV<sup>4</sup>. Across the Pacific region, on average one in four sexually active young people has a sexually transmitted infection<sup>5</sup>. Chlamydia prevalence among young pregnant women ranges between 10% to over 40% in some PICTs.

In the current level of development assistance to control priority diseases in the region, HIV and STIs has received the biggest share of the donor cake relative to NCDs even though the latter contributes the highest disease burden. Such funding has come from the Response Fund and also the Global Fund. The positive outcomes from these two funds include the strengthening of health systems (prevention and health promotion, laboratory testing, drug procurement and distribution, treatment, policy and clinical

guideline development), monitoring and evaluation, and support for those affected by these diseases. However, this year will see the end of both these funds which leaves a funding gap in ensuring sustainability of the regional and national response efforts.

### **Health systems of PICTs**

Much of the health sector related activities delivered by national governments are through their health systems which comprise human resources, financing, essential drugs and medicines, disease surveillance, health information and service delivery. Even in the best of assistance from regional development partners and national commitment of sizeable contribution of their GDPs, many of the health systems still lack behind in providing services for unmet needs – family planning commodities, essential medicines, vaccines for children and diagnostic procedures for primary care. The impact of such weakened health systems could be reflected in their slow progress towards achieving the health-related MDGs. Weak health systems impede universal access to essential primary health care services and negatively impact health equity and the exercise of human rights to health. Frequent changes in health leadership affects good governance, accountability and policy direction for moving health forward.

Severe human resource constraints is a major long-standing problem across SIDS. This includes an inadequate number of trained health professionals, exacerbated by their migration to other countries. Furthermore, the distribution of the available human resources is often inequitable, with outer island populations underserved.

Investment in national strengthening health systems is a critical need for many PICTs. However, such investment should not be focussed on hospital based care at the expense of prevention or primary health care. PICTs cannot afford to neglect the importance of strengthening preventive methods of health care which are the key to sustainable development. Hospital care is not only expensive but will continue to take away a sizeable proportion of the national health budget from other cost-effective measures in prevention. Having an effective health information system is also important for providing evidence bases for policy formulation and prioritising needs, strategic planning, budget allocation, monitoring trends and reporting progress on international commitments.

It is critical to develop appropriate national health strategies and policies aligned to National Development priorities. These Health Sector strategies should be developed, owned and led by countries in line with Paris Declaration. Unless national Health Strategies reflect the needs of the countries, based on evidence, and appropriate human resources, financial, and structural adjustments are made, with appropriate financing mechanisms applied and appropriate regulatory environment is created, systems will continue to have major challenges in the short and long term.

### **Research, evidence and information for policy & action**

There is an urgent need to develop capacity and capability of national and regional agencies in the creation of relevant scientific information and evidence on key public health priorities for PICTs. This includes adapting and adopting evidence-based interventions and good practice which are appropriately applied to context. Well-funded multidisciplinary research teams are needed to translate research advances into practical management solutions. Of critical importance is undertaking regular cost-benefit analyses to inform and guide national decisions on investment in health interventions and that the knowledge and information generated is utilised to guide policy and strategic directions.

### **Planning, policy, regulation, monitoring & evaluation**

The 2011 Framework of Action for Revitalisation of Healthy Islands notes that public health outcomes can only improve when PICTs have in place national policies and plans to address priority health issues; and legislative and regulatory frameworks that protect and promote health and are being implemented, monitored and evaluated. Legislative and regulatory interventions (including taxation) are among the most effective interventions for public health. However, many PICTs have limited resources and planning and policy functions are not well supported. It is important that policy and legislation create an environment where healthy choices are made easy.

### **Health financing**

Current health financing in the region in priority areas remains unpredictable, short term and fails to build long-term sustainable capacity to the region, especially in the presence of rising health care costs and growing populations. This has resulted in less predictability and inflexibility of development assistance to many PICTs. Work continues in this area as part of the Paris Declaration and Pacific Aid Effectiveness Principles and the Quintilateral Health Partners working group that comprises AusAID, the New Zealand Aid Programme, SPC, WHO and the World Bank.

### **Health promotion/strategic health communication**

Specialist technical skills and expertise in strategic health communication/social and behaviour change communication are lacking across PICTs. The strong verbal commitment to health promotion and disease prevention is not reflected in the human and financial resources made available for health promotion/strategic health communication. In many PICTs, efforts to encourage individuals and communities to adopt and maintain healthy behaviour take a narrow health education or “awareness-raising” approach, believing if people know the dangers/consequences, they will change behaviours. Such approaches need to change to address the complex, sophisticated, challenging and difficult nature of social and behaviour change.

### **KEY DOCUMENTS & HYPELINKS**

[Framework of Action for Revitalization of Healthy Islands in the Pacific \(2011\)](#)

[Tuberculosis surveillance in the Pacific Island countries and territories: 2010](#)

[Breaking the Silence: Responding to the STI Epidemic in the Pacific, 2010](#)

[Towards a Food Secure Pacific, Framework for Action of Food Security in the Pacific \(2010\)](#)

[Asia Pacific Strategy for Emerging Diseases \(2010\)](#)

[The Paris Declaration on Aid Effectiveness \(2005\) and the Accra Agenda for Action 2008](#)

[Pacific Aid Effectiveness Principles \(2007\)](#)

---

<sup>1</sup> UN and ADB (2012). *Accelerating Equitable Achievement of the MDGs: Closing gaps in Health and Nutrition Outcomes*. Asia-Pacific Regional MDG Report 2011/12. UN and ADB 2012.

<sup>2</sup> Family Planning International (2009). *A Measure of the Future: Women's Sexual and Reproductive Risk Index for the Pacific 2009*. Family Planning International 2009.

<sup>3</sup> Pacific Health Minister's Meeting: Honiara, Solomon Islands July, 2011.

<sup>4</sup> Ward H, Rönn M (2010). *Contribution of sexually transmitted infections to the sexual transmission of HIV. Current Opinion in HIV and AIDS*. 2010 Jul;5(4):305–10.

<sup>5</sup> *Breaking the silence: Responding to the STI epidemic in the Pacific*. STI Regional Working Group, 2010.