

# Pacific Heads of Health

## Réunion des directeurs de la santé du Pacifique

### Report back on progress against commitments made at the 14<sup>th</sup> Pacific Health Ministers Meeting

Commitments made by health ministers

Ref to meeting report	Commitments	Progress status	Description of progress made by PICs
<b>1. Leveraging the COVID-19 pandemic to build sustainable systems and advance universal health coverage (UHC)</b>			
We, the Pacific Health Ministers at this Fourteenth Pacific Health Ministers Meeting, committed to:			
1.1	Strengthen integrated service delivery across the different levels of health care, including outreach, referral pathways and overseas medical referrals;	<b>Implementation started - behind schedule</b>	Fiji and Vanuatu participated in an initial analysis of primary healthcare and existing bottlenecks starting in October 2022. The collected information and structured analysis will inform the identification of priority areas for further strengthening including practical approaches to strengthen integrated service delivery.
1.2	Review and revise public health legislation and governance structures to enable effective, whole-of-government and whole-of-society responses to future health emergencies and pandemics;	<b>Implementation started - behind schedule</b>	Kiribati, Palau, Papua New Guinea and Tuvalu are all in the process of reviewing and revising their public health policies and legislation.

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1.3	Prioritize the collation and analysis of country data for the UHC Service Coverage Index and to use this regular monitoring and analysis to inform annual workplans and budgets;	<b>Implementation started - behind schedule</b>	Countries across the Pacific submitted key data under the Healthy Island Monitoring Framework (HIMF) which has now been analyzed and drafted into the 3rd progress report that will be tabled at the 15th Heads of Health meeting. As a number of the HIMF indicators are related to the UHC service coverage index, this 3rd progress review also analyzed UHC service coverage index-related indicators using country reported data. From working with PICs on this progress review, it facilitated better understanding of the importance of using country-collected data and how such data may be used to inform country development including workplans and budgets. In 2023, WHO led country consultations with PICs to validate the updated estimates of UHC service coverage index.
1.4	Contribute to subregional mechanisms for cooperation, knowledge exchange and resource sharing;	<b>Implementation started - on track</b>	Progress outlined in sub-sections a, b and c below
1.4(a)	Ongoing work on the subregional platform for regulation of medical products, plus support for efficient medical products supply chain management (implementation of the commitment made during the Thirteenth Pacific Health Ministers Meeting)	<b>Implementation started - on track</b>	Pacific representatives participated in discussion on the subregional platform for the regulation of medical products which was initiated in February 2023. In addition: <ul style="list-style-type: none"> <li>▪ Fiji has initiated the creation of a Pharmacovigilance Unit in coordination with National Immunization Program to report Adverse Events Following Immunization</li> <li>▪ Federated States of Micronesia and Fiji initiated work on the establishment of provisional medical product listing and import control procedures and Tonga is strengthening their existing procedures.</li> </ul>

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1.4(b)	The ongoing work on the subregional Quality Improvement Programme for Nursing and other identified health-care specialist workforces, including visiting specialists, with a focus on education and regulation (implementation of the commitment made during the Twelfth Pacific Health Ministers Meeting)	<b>Implementation started - behind schedule</b>	<ul style="list-style-type: none"> <li>▪ In line with the recommendations outlined in the 'Scoping Review for Improving the Quality of Nursing and Midwifery Education and Regulation in PICs' conducted in 2020, Solomon Islands initiated a review of the country's nursing legislation. To date they have completed the drafting of the policy rationale, discussion paper and implementation plan to inform the drafting the revised bill in 2023.</li> <li>▪ Cook Islands, Fiji, Marshall Islands, Nauru, Papua New Guinea, Tonga and Tuvalu enhanced the role and recognition of advanced practice nurses/nurse practitioners (as mid-level health care professionals) in primary healthcare to improve access to care, quality of care and/or to reduce costs. Kiribati is also exploring opportunities to introduce a nurse practitioners program.</li> <li>▪ Papua New Guinea also progressed with the country's review of the curricula for the Diploma in Nursing and Certificate for Community Health Program.</li> <li>▪ Papua New Guinea progressed with their implementation of the Village Health Worker and Village Health Volunteer Policy to strengthen primary health care services in communities.</li> <li>▪ Vanuatu initiated a review of the role of village health workers at aid posts, as part of a broader initiative to strengthen primary health care services. This includes a review of the related training modules.</li> </ul>
1.4(c)	The development of a Public Health Laboratory Network across the Pacific, including the ability to undertake whole genome sequencing	<b>Implementation started - on track</b>	Fiji and Guam are implementing whole genome sequencing testing capacity in country. Other PICs have access to an established referral network organized with reference labs in Australia, New Zealand or the US for whole genome sequencing.

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1.5	Work with key stakeholders, including those beyond the health sector, to identify at least one COVID-19 response intervention per country that could be invested in and harnessed to facilitate sustainable health systems strengthening, for example, laboratories, digital health, health workforce and community engagement	<b>Implementation started - behind schedule</b>	<ul style="list-style-type: none"><li>▪ Fiji, Kiribati and Tuvalu are using the risk communication and community engagement capacities developed during the pandemic to focus on improving COVID-19 vaccination and routine immunization rates. Communities are being engaged in problem identification and activity implementation. During the peak of COVID-19, message dissemination to school authorities, parents, pupils and communities were transmitted through various channels such as social media, radio, poetry and drama performances. Such innovative methods can be invested in and harnessed to foster cooperation in the tackling of other health issues.</li><li>▪ COVID-19 Intra-Action Reviews were conducted in the Federated States of Micronesia and Tonga to learn from the pandemic and improve future response operations.</li><li>▪ The Federated States of Micronesia implemented a pilot telehealth programme in which a dispensary was connected to the state hospital in Pohnpei. The pilot demonstrated that a patient can visit a dispensary and be connected to more specialized care, cutting down the time and cost of travel for health care services. In addition, Fiji initiated a research protocol to investigate the role of telehealth in assisting with the management of noncommunicable diseases.</li></ul>
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We, the Pacific Health Ministers at this Fourteenth Pacific Health Ministers Meeting, committed to:

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2.1	Lead our teams to monitor progress using the Pacific Monitoring Alliance for NCD Action (MANA) Dashboard indicators and the Pacific Legislative Framework, and to use the assessments to advocate for national action to ensure countries can more effectively progress towards the SDGs and global NCD targets;	<b>Implementation started - on track</b>	<ul style="list-style-type: none"><li>▪ 21 PICs have updated and validated their MANA dashboards for 2021-2022 to monitor progress, identify gaps, prioritize and advocate for national NCD actions.</li><li>▪ Cook Islands implemented a third round, and New Caledonia second round, of the population NCD risk factor prevalence survey for adults, while Kiribati (second round) and Nauru carried out the population NCD risk factor prevalence survey targeting youth/adolescents.</li><li>▪ Kiribati has strengthened their national NCD strategy</li><li>▪ Federated States of Micronesia has established a functioning NCD taskforce</li><li>▪ Fiji, French Polynesia, Kiribati, Niue, Samoa, Solomon Islands and Vanuatu have strengthened tobacco control measures</li><li>▪ Fiji, French Polynesia, New Caledonia, Samoa and Tonga have strengthened alcohol control measures</li><li>▪ Fiji, French Polynesia, New Caledonia, Niue, Palau, Solomon Islands, Tokelau, Tonga, Tuvalu, and Vanuatu have strengthened policies on unhealthy foods and drinks</li><li>▪ French Polynesia, Palau, Cook Islands, Samoa, Fiji, Niue, Solomon Islands and Tonga have strengthened health systems response programmes (see NCD Roadmap progress summary and MANA Dashboard for additional details).</li><li>▪ Nauru has strengthened taxes on tobacco and nicotine products; Fiji launched tobacco cessation hubs to expand the reach of intensive tobacco cessation support; Cook Islands, Palau and Vanuatu are in the process of finalizing their national tobacco cessation guidelines.</li></ul>
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2.2	Invest in additional resources to ensure effective prevention and early detection and management of NCDs, especially at the primary health care level, and to maximize the impact of available resources by employing innovative approaches, promoting vaccinations, fostering good nutrition and harnessing cross-cutting issues to strengthen decentralized NCD service delivery;	<b>Implementation started - on track</b>	<ul style="list-style-type: none"><li>▪ Cook Islands, Fiji, Kiribati, Marshall Islands, Federated States of Micronesia, Nauru, Commonwealth of the Northern Mariana Islands, Palau, Tuvalu, and Vanuatu implemented the WHO package of essential noncommunicable disease interventions (PEN) to strengthen screening, effective early detection, diagnosis, and management, especially at the primary health care and community level, in line with WHO's cost effective 'Best Buy' interventions. Papua New Guinea conducted a PEN Training of Trainers to improve NCD management at the community level.</li><li>▪ 8 PICs (Cook Islands, Fiji, French Polynesia, Kiribati, Niue, Papua New Guinea, Tonga, and Tuvalu) scaled up primary health care services for early detection and better management of NCDs, particularly diabetes, through the provision of additional resources such as diabetes equipment and consumables.</li><li>▪ French Polynesia introduced national guidelines for the diagnosis and management NCDs.</li><li>▪ Palau identified essential NCD medicines to be included in the national list of essential medicines.</li><li>▪ PICs are developing national capacity in the provision of mental health and psychosocial support (MHPSS) using primary health care approaches to identify risks, provide early diagnosis and support, especially during and in the aftermath of emergencies, including the COVID-19 pandemic.</li></ul>
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2.3	Promote a life-course approach, including an emphasis on healthy ageing, and to ensure that all NCD interventions effectively address the needs of indigenous populations, youth, older people and those living in outer/remote islands	<b>Implementation started - on track</b>	<ul style="list-style-type: none"><li>▪ 11 PICs (Fiji, Kiribati, Federated States of Micronesia, New Caledonia, Commonwealth of the Northern Mariana Islands, Papua New Guinea, Samoa, Solomon Islands, Tonga, Vanuatu and Wallis and Futuna) have engaged young people in addressing NCDs through NCD Youth Ambassador Projects.</li><li>▪ 18 PICs have produced 3-minutes physical activity break videos to promote physical activity at workplaces, schools and communities.</li><li>▪ Fiji, Solomon Islands, Tonga and Vanuatu strengthened their implementation of the Health Promoting Schools initiative.</li><li>▪ Faith-based organizations in Fiji, Kiribati, Nauru and Samoa used the 'grounds up' approach to stamp out NCDs. Health Promoting churches and faith-based organizations utilized Train-the-Trainers guidelines for Pacific faith-based organizations and local governments.</li><li>▪ Cook Islands made progress on the Tobacco Free Islands initiative.</li><li>▪ Fiji's new Wellness Strategic plan 2030 uses the healthy settings approach to promote health-enabling environments.</li><li>▪ Nauru implemented an NCDs health promotion campaign including a new series of animations</li><li>▪ Marshall Islands established a taskforce for healthy ageing to improve health and social services for the older population.</li><li>▪ Palau passed a Comprehensive National Policy on Care for the Ageing and Healthy Ageing Law. Behind the scenes, proactive NGOs played a critical role in fostering increased political will and civil society support.</li></ul>
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2.4	Support the regional endorsement of the Pacific Legislative Framework at high levels from political leaders, such as by Pacific Islands Forum Leaders, and consider more opportunities for Pacific-level actions and national utilization	<b>Implementation started - on track</b>	<p>Since the endorsement of Pacific NCDs Legislative Framework at the last PHMM:</p> <ul style="list-style-type: none"> <li>▪ The Framework was also presented for endorsement and implementation at the 2022 Pacific Islands Forum Economic Ministers Meeting.</li> <li>▪ 8 PICs (French Polynesia, Kiribati, Marshall Islands, Nauru, Papua New Guinea, Solomon Islands, Tonga and Tuvalu) commenced with the review of prioritized NCD policies and legislation, undertook gap analyses, and initiated the revision/amendment of provisions.</li> <li>▪ 7 PICs (Cook Islands, Fiji, French Polynesia, Marshall Islands, New Caledonia, Palau, and Tonga) developed plans to progress national legislation on regulating food marketing to children.</li> <li>▪ 8 PICs (Cook Islands, Fiji, Kiribati, Samoa, Tonga, Tuvalu and Vanuatu) developed plans to progress or strengthen health taxes on one or more risk factor areas--alcohol, tobacco or sugar-sweetened beverages.</li> </ul>
2.5	Take active steps to ensure engagement of non-health sectors and civil society in national NCD leadership, governance and implementation in order to address the root causes of NCDs in a coordinated whole-of-government, whole-of-society and health-in-all-policies approach.	<b>Implementation started - on track</b>	<ul style="list-style-type: none"> <li>▪ Fiji, Marshall Islands, Tonga and Tuvalu Diabetes Associations have engaged in addressing diabetes through advocacy, awareness and community interventions.</li> <li>▪ Tonga has mobilized civil society organizations and LGBTQI+ communities in addressing NCDs at the community level.</li> <li>▪ Tuvalu has engaged women's associations in addressing NCDs at the community level.</li> <li>▪ Solomon Islands has further strengthened the 'Wellness NCD Alliance' and PNG initiated the establishment of its NCD Alliance with non-state actors.</li> <li>▪ Fiji worked with a faith-based organization to expand tobacco cessation services at the national level.</li> </ul>



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			<ul style="list-style-type: none"> <li>▪ Cook Islands re-established the country's national multisectoral tobacco control committee which includes youth groups and outer island representatives.</li> <li>▪ Fiji's national strategic plan development included extensive cross-sector consultations and the plan includes an all-of-society approach.</li> </ul>
<b>3. Putting health at the centre of the climate change discussion</b>			
We, the Pacific Health Ministers at this <a href="#">Fourteenth Pacific Health Ministers Meeting</a> , committed to:			
3.1	Proactively advocate on the national and international stage for intersectoral and international action to address the health impacts of climate change, highlighting the special needs of the Pacific;	<b>Implementation started - behind schedule</b>	Health ministers from across the Pacific are increasingly using major national and international events to advocate for the climate action that will benefit health. Some examples include the Federated States of Micronesia's intervention at the World Health Assembly on behalf of the Pacific and Fiji's speech at the 2022 World Health Day celebration.
3.1(a)	Directing ministry staff to prioritize the gathering of data and evidence on the health impacts of climate change and the health co-benefits of action taken by colleagues outside the health sector.	<b>Planning underway</b>	Fiji is planning to convene a national conference to discuss the health co-benefits of climate change action from non-health sectors.
3.1(b)	Engaging colleagues working in other sectors to help them gain support for action that addresses climate change, while also benefitting health	<b>Implementation started - behind schedule</b>	Health is starting to have a seat at the table during discussions on climate action, such as during talk on Fiji's National Climate Finance Strategy 2022-2029 which includes health.

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3.1(c)	Supporting the inclusion of health priorities, including those related to nutrition and essential services such as water and sanitation, in national adaptation plans and by developing or revising health national adaptation plans (H-NAPs) or equivalent plans	<b>Implementation started - behind schedule</b>	Fiji's National Adaptation Plan includes a chapter dedicated to health with 10 specific health actions. The country's Health National Adaptation Plan is under review and new actions under the health sector plan will be aligned to the broader NAP.
3.1(d)	Driving specific agenda items on the health impact of climate change at meetings of the UNFCCC Conference of the Parties and other global climate change forums	<b>Implementation started - behind schedule</b>	The Pacific continues to advocate for action on climate change, including action to address its health impacts, at global climate change forums such as COP summits. Fiji led the way by formally committing to the Health Initiatives on the Climate Resilient Health Systems and Sustainable Low Carbon Health Systems at COP26. Fiji also chairs the Alliance on Transformative Action on Climate and Health (ATACH) Working Group on low carbon sustainable health systems and, part of the Steering Group (SG).
3.1(e)	Achieving incremental progress on an annual basis through mainstreaming climate change interventions in all our work to tackle this existential challenge to the health of the people of the Pacific	<b>Implementation started - behind schedule</b>	Fiji is working to develop its climate based early warning system for known climate-sensitive diseases. In addition, Fiji is seeking to digitalize the country's National Notifiable Diseases Surveillance System for timely reporting and climate proofing.

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3.2	Harness the resources available during the pandemic to ensure that health-care systems are not only better able to protect communities from the threat of COVID-19, but also have a reduced environmental impact and can continue serving patients in the face of a changing climate;	<b>Implementation started - behind schedule</b>	Nauru has recently installed state-of-the-art climate-friendly clinical waste management technology. Procured as part of the country's overall strategic response to COVID-19, this non-burning technology is capable of de-contaminating all kinds of medical waste by electricity alone, keeping health workers and neighbouring communities safe from infectious diseases such as COVID-19, as well as from pollution.
3.2(a)	Conduct climate change and health vulnerability and adaptation assessments	<b>Implementation started - behind schedule</b>	<ul style="list-style-type: none"><li>▪ Fiji conducted a Climate Hazard and Vulnerability Assessment covering 207 healthcare facilities. The findings have been used to inform proposed work to boost the climate resilience of healthcare facilities, with work already underway at one facility.</li><li>▪ In Kiribati, the integrated vulnerability assessment tool is being finalized and will be rolled out soon.</li></ul>

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3.2(b)	Commit to achieving the following proposed targets in the next five years: <ul style="list-style-type: none"><li>- 100% of health-care facilities have access to basic water, sanitation and hygiene services and medical waste management;</li><li>- 100% of health-care facilities have access to electricity; and</li><li>- health infrastructure has been assessed and strengthened and the capacity of the health workforce built to withstand climate shocks and other health emergencies, including pandemics.</li></ul>	<b>Implementation started - behind schedule</b>	An assessment has been completed of the level of access to WASH, electricity, and other factors in healthcare facilities across Fiji. The assessment findings have informed proposed response measures.
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*Support requested of development partners*

Ref to meeting report	Commitments made	Progress status	Description of support and details of progress
<b>4. Support requested from development partners</b>			
We, the Pacific Health Ministers at this Fourteenth Pacific Health Ministers Meeting ... invite development partners to assist us with the following:			
4.1	Support PICs in adopting and implementing sustained, future-oriented action informed by country data analysis that is used to prioritize workplans and budgets. Ensure that partner resources deployed for the COVID-19 response result in long-term systems strengthening and explore equitable financing options for better-targeted results on UHC. Wherever possible, put plans in place for a transition to full country ownership;	<b>Implementation started - on track</b>	Using the Healthy Islands Monitoring Framework, technical support was provided to 16 PICs in conducting data collection and analysis to monitor their progress towards the Healthy Islands vision. A full report will be presented at the 15th Heads of Health Meeting in 2023 and discussed with health information focal points in March 2023. The process will support PICs to identify actionable steps to promote evidence-based policy decisions and create a sustainable, future-oriented health information system.  Select PICs were also supported in updating and revising routine monitoring reports to better align monitoring activities with programme needs.

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4.2	Ensure that support provided is in full partnership with Pacific governments and is on plan, on budget and on system to improve transparency and accountability, to reduce systematic fragmentation and the potential for overlaps and gaps, and to support the transition to full country ownership;	<b>Implementation started - behind schedule</b>	Development partners and multiple government sectors were brought together in countries such as Fiji, Palau, Solomon Islands, Tonga, Tuvalu and Vanuatu to strengthen country ownership and leadership of health system development during the development and review of national health strategic plans as well as strategic plans on specific aspects of health development (e.g. digital health, human resource development, pharmacology governance and management, antimicrobial resistance, and government policy and legislation).
4.3	Facilitate cross-country sharing of best practices in harnessing COVID-19 response measures for sustainable and long-term impact;	<b>Implementation started - behind schedule</b>	A series of workshops were held in the second half of 2022. These workshops brought together experts and focal points from across the Pacific in clinical management, nursing, COVID-19 vaccines, surveillance, influenza, and laboratories to explore the lessons identified during the pandemic and what needs to be done going forward. The 12th Pacific Immunization Managers Meeting held in November 2023, for example, was an opportunity for the sharing of best practices including integration of services like COVID-19 into routine immunization systems (Federated States of Micronesia, Solomon Islands), risk communication (Fiji), and information management systems (Fiji, Federated States of Micronesia).
4.4	Support the strengthening or establishment of subregional mechanisms for cooperation, knowledge exchange and resource sharing;	<b>Implementation started - behind schedule</b>	Development partners worked together to strengthen subregional cross-country cooperation, knowledge exchange and resource sharing through existing networks, such as the Pacific Health Information Network for health information system and digital health, Brisbane Accord Group for civil registration and vital statistics.

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4.4(a)	The subregional platform for regulation of medical products (implementation of the commitment made during the Thirteenth Pacific Health Ministers Meeting	<b>Implementation started - on track</b>	<p>The subregional platform for regulation of medical products was initiated and discussed with all PIC representatives in February 2023. Further actions were discussed and will be conducted in coming years.</p> <p>At the national level, regulatory support has been provided from the subregional team in the following:</p> <ul style="list-style-type: none"><li>▪ Fiji has initiated development of a Pharmacovigilance Unit in coordination with National Immunization Program to report adverse events following immunization</li><li>▪ Federated States of Micronesia and Fiji initiated work on the establishment of provisional medical product listing and import control procedures and Tonga is strengthening the currently available procedures</li><li>▪ Several countries (e.g. Fiji, Solomon Islands) have received training in post-marketing surveillance and the use of Minilab equipment for field detection of substandard and falsified medicines. Additional PICs (Federated States of Micronesia, Nauru, Tonga and Tuvalu) have shown interest in Minilab training and/or received the equipment.</li></ul>
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4.4(b)	The subregional Quality Improvement Programme for Nursing and other identified health-care specialist workforces, including visiting specialists, with a focus on education and regulation (implementation of the commitment made during the Twelfth Pacific Health Ministers Meeting)	<b>Implementation started - on track</b>	PICs were supported to review and strengthen their education and regulation for the health workforce. Some examples include: <ul style="list-style-type: none"> <li>▪ Papua New Guinea progressed with their review of the curricula for the Diploma in Nursing and Certificate for Community Health Program.</li> <li>▪ Papua New Guinea also progressed with the implementation of Village Health Worker and Village Health Volunteer Policy.</li> <li>▪ Solomon Islands initiated a review of their nursing legislation in line with the recommendations outlined in the 'Scoping Review for Improving the Quality of Nursing and Midwifery Education and Regulation in PICs' conducted in 2020.</li> <li>▪ Vanuatu initiated a review of the role and training of village health workers at aid posts.</li> </ul>
4.4(c)	A specialized public health laboratory network with the ability to undertake whole genome sequencing	<b>Implementation started - on track</b>	Support was provided to Fiji and Guam in implementing whole genome sequencing. Other PICs were supported in accessing reference labs in Australia, New Zealand or the US for whole genome sequencing.
4.4(d)	A network or platform for making referral pathways between outer and main islands and overseas medical referrals an effective, efficient and equitable part of national health systems, including through the use of telehealth/telemedicine networks	<b>Implementation started - behind schedule</b>	Countries were supported by development partners to identify practical approaches, acknowledging the specific context, to strengthening referral pathways between outer and main island and overseas medical referrals. Selected countries such as Fiji, Samoa, Solomon Islands and Vanuatu were also supported to strengthen digital health/telemedicine practices.



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4.5	Support PICs with the scaling up of NCD actions and monitoring the progress of implementation through the MANA Dashboard and other agreed reporting mechanisms and utilize this information to encourage actions in annual health workplans, as well as increasing engagement from non-health partners;	<b>Implementation started - on track</b>	Partner agencies worked closely with PICs and supported: <ul style="list-style-type: none"><li>▪ All PICs in updating and validating the MANA Dashboard for 2021-2022 to measure implementation progress, identify gaps and prioritise national NCD actions.</li><li>▪ Several PICs to scale up NCD actions, for example, establishing NCD committee through engaging non-health partners; developing national NCD strategies, priorities and workplans; developing policies and legislation addressing key NCD risk factors; strengthening healthy system response programme; building capacity and system to improve NCD services etc. (See PICs' progress tracker and MANA Dashboard summary report for additional details).</li><li>▪ Fiji to develop a new NCD strategic plan, including extensive multisectoral consultations and numerous assessments to develop foundational documents to inform this work, near final endorsement and launch.</li><li>▪ Tonga to strengthen alcohol control through three of the SAFER strategies for alcohol control. "SAFER" is an acronym for the five most cost-effective interventions to reduce alcohol related harm.</li><li>▪ Cook Islands' work on strengthening implementation of the Baby Friendly Hospital Initiative, Food Based Dietary Guidelines and Physical Activity Guidelines</li><li>▪ Cook Islands and New Caledonia in completing their implementation of population-based NCD risk factor prevalence surveys for adults and Kiribati and Nauru in completing similar surveys for youth/adolescents</li></ul>
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4.6	Explore opportunities to maximize available resources to enhance NCD prevention and management services, and to implement innovative interventions using advanced technology and creative communication to enhance behaviour change;	<b>Implementation started - on track</b>	Development partners supported: <ul style="list-style-type: none"><li>▪ The development and implementation of primary school health promotion resources for NCD prevention in the Pacific through innovative and creative projects, for example, Healthy Child Promising Future and Beyond the Stars projects that address childhood obesity in French Polynesia, New Caledonia and Wallis and Futuna; and a series of 3-minute physical activity break interactive videos to promote physical activity in workplace, schools and communities in 18 PICs.</li><li>▪ The scale-up of PEN at the community level through the provision of additional resources to support PEN Training of Trainers in PNG to improve NCD management.</li><li>▪ The improvement of early detection and management of diabetes through the provision of equipment and consumables to 8 PICs (Cook Islands, Fiji, French Polynesia, Kiribati, Niue, Papua New Guinea, Tonga and Tuvalu).</li><li>▪ Fiji to engage in formative research for the development of behavioural science-based communications for youth and alcohol.</li><li>▪ Exploration of the use of information technology to facilitate NCD prevention and management services in selected countries. A review of existing systems and resources has been essential in identifying feasible options to enhance tobacco cessation services.</li><li>▪ Vanuatu in developing the HeartCare App for improving NCD management and Fiji's initial work to adapt the application to fit country-specific needs.</li><li>▪ A feasibility study in multiple PICs to inform the development of a telemedicine project to reach the unreached with quality care.</li><li>▪ Fiji to engage in cross-sectoral consultation in their review of the country's School Health Policy</li></ul>
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			<ul style="list-style-type: none"><li>Integration of Fiji's education management information system (FEMIS) and school health data, to enhance implementation of the Health Promoting Schools initiative and its impact on student health.</li></ul>
4.7	Strengthen efforts to improve civil society engagement, regional coordination, international collaboration and networking opportunities for PICs;	<b>Implementation started - on track</b>	Partner agencies worked closely with PICs and: <ul style="list-style-type: none"><li>Provided support to strengthen networking and engagement with civil society organizations and other non-state actors in addressing NCDs. This included:<ul style="list-style-type: none"><li>work with diabetes associations in Fiji, Marshall Islands, Tonga and Tuvalu to improve diabetes awareness and community interventions;</li><li>mobilising civil society organization and LGBTQI+ communities in addressing NCDs in Tonga;</li></ul></li></ul>

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			<ul style="list-style-type: none"> <li>○ engaging women’s association in addressing NCDs at the community level;</li> <li>○ strengthening the 'Wellness NCD Alliance' in the Solomon Islands and initiating the establishment of an NCD Alliance with key stakeholders in PNG.</li> </ul> <ul style="list-style-type: none"> <li>▪ Assessed the capacity and capability of diabetes associations in PICs with a view to providing additional support to improve diabetes interventions.</li> <li>▪ Initiated the expansion of collaboration with SIDS in other regions facing similar NCD challenges working closely with the Healthy Caribbean Coalition particularly in expanding networking, information sharing and dialogue with NGOs and civil society. Mapping of NGOs, civil society and associations of people living with disability was initiated with the intention of forming a coalition.</li> <li>▪ Provided support to Fiji for the country’s wellness plan development in consultation with all sectors.</li> <li>▪ Conducted two workshops for several PICs inclusive of cross-sector partners (health, finance, agriculture)</li> </ul>
4.8	Support the regional endorsement and the implementation of the Pacific Legislative Framework for Noncommunicable Diseases at the national level;	<b>Implementation started - on track</b>	<p>Partner agencies supported the endorsement and implementation of the Pacific Legislative Framework for Noncommunicable Diseases by:</p> <ul style="list-style-type: none"> <li>▪ Presenting the Pacific NCDs Legislative Framework for endorsement and implementation at the 2022 Pacific Islands Forum Economic Ministers Meeting.</li> <li>▪ Reviewing the prioritized NCD policies and legislation, undertaking a gap analysis, and initiating the revision/amendment of the provisions in eight PICs (French Polynesia, Kiribati, Marshall Islands, Nauru, Papua New Guinea, Solomon Islands, Tonga and Tuvalu).</li> </ul>

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			<ul style="list-style-type: none"> <li>▪ Convening a workshop on restricting marketing of unhealthy foods and drinks to children. The Pacific Legislative Framework was highlighted as a resource and important tool developed for the Pacific context.</li> <li>▪ Supporting amendment of tobacco control laws and regulations in multiple PICs. Opportunities are being sought with countries to conduct gap analyses at the planning phase for legislative amendments.</li> </ul>
4.9	Support the efforts of countries to develop or strengthen plans and access sustainable financing, including the Green Climate Fund, to address the health impacts of climate change, focusing on developmental effectiveness and identifying opportunities to optimize available resources to tackle both COVID-19 and climate change, simultaneously;	<b>Implementation started - on track</b>	Development partners continue to offer support in guiding countries in the development of concept papers for resourcing proposals to address the health impacts of climate change and boost health system resilience. Fiji and Kiribati were supported to secure funding support from KOICA to strengthen the health system's adaption to climate change. Marshall Islands was supported to access funding from the Green Climate Fund. Kiribati, Tuvalu, Vanuatu, and Solomon Islands have received ongoing support in seeking funding from the Global Environmental Facility – this has been approved and is likely to be released soon to the four countries.
4.10	Support efforts of Pacific leaders to inspire those beyond the health sector to play their part in addressing the health impacts of climate change, including through the development of communications and advocacy tools;	<b>Implementation started - behind schedule</b>	Messaging has been developed and used to inform communications products including op-eds, stories, and social media posts. Support has been provided to health leaders in jointly crafting speeches for major events.

# Pacific Heads of Health

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4.11	Produce and share regional guidance on climate-resilient and environmentally sustainable health-care facilities, and support countries in its implementation;	<b>Implementation started - behind schedule</b>	Fiji was supported in the country's implementation of national guidelines on climate resilient and environmentally sustainable healthcare facilities.
4.12	Monitor the health and nutrition impacts of climate change and gather and share evidence to inform decision-making, guide advocacy, drive action, and track the impacts and successes of interventions;	<b>Implementation started - behind schedule</b>	WHO, through the Asia Pacific Centre for Environment and Health (ACE) in the Western Pacific Region, has initiated a work programme to support Member States to systematically monitor the impacts of climate and environmental change on health. At the second meeting of the Technical Advisory Group on Climate Change, the Environment and Health in September 2022, a revised approach to supporting the monitoring of action and impact across the four pillars was recommended. This will inform the WHO's support to PICs going forward.
4.13	Facilitate cross-country sharing of ideas and best practices, including through the digital arm of the climate change, environment, and health platform.	<b>Implementation started - behind schedule</b>	Work continues with the information architect on the digital arm of the climate change, environment, and health platform. A mock-up has been developed and the final content is being gathered ready for the site launch in the coming months.