

7th Pacific Heads of Health (PHoH) Meeting: 3 to 5 April 2019, Nadi Fiji**Agenda Item 9.3 – Integrated Programming in One Health/Planetary Health**

Pacific forum leaders through the ‘Blue Narrative’ and Pacific health leaders through various regional fora have affirmed the importance of One Health and Planetary Health approaches to addressing regional health security given the interdependency of human health and the health of ecosystems that they live in. Pacific leaders had this foresight when they declared the Healthy Island vision in Yanuca, Fiji in 1995 with its five focus areas.

The Pacific Community as the lead inter-sectoral organization in the region has taken on this challenge of the use of the One Health/Planetary Health platform in its integrated programming approach to addressing developmental needs of its member countries and in its resource mobilization efforts.

This paper aims to inform the Heads of Health of the progress made so far in this endeavour, challenges that are still quite plentiful but not insurmountable particularly at national level and highlighting the necessary building blocks including resourcing. This needs to be addressed in a coordinated and consolidated manner with suggestions that both government and development partners should note.

1. BACKGROUND

1.1 The health and wellbeing of PICTs is threatened by complex issues at the nexus of environment and health, with climate change, water and food safety and security, and ocean pollution chief among them. Pacific health leaders with foresight and wisdom created the Healthy Islands vision with its five focus areas addressing human and ecological health. Its continued relevance to sustainable existence and health of PICTs and particular usefulness in highlighting NCDs in the region remains. The two instruments that operationalizes and track progress of IHR2005 and SDG implementation being namely the Asia Pacific Strategy on Emerging Diseases and Public Health Emergencies (APSED III) and the Healthy Islands Monitoring and Evaluation Framework, acknowledge that regional health security requires use of multiple sources of information within and beyond the health sector. This is in reference to assessment of risk and in prioritizing responses to communicable disease outbreaks, climate change and natural disasters.

1.2 Pacific leaders further affirmed in the 2018 Pacific Islands Forum Leaders meeting in Nauru through the 'Blue Pacific narrative' as a catalyst of collective action in Oceania in recognizing the intertwining of the human, animal and ecology nexus in adequately addressing emerging public health risks in the region. Additionally other regional fora have acknowledged the importance of One Health, Eco Health and Planetary Health approaches to health security in PICTs. There is an urgent mandate for an integrated or *consolidated platform* in PICTs for action across emerging fields of One Health, Eco Health and Planetary Health that acknowledge the interdependency of the health of ecosystems, humans and other species ([Oceania Planetary Health Forum 2018](#), [PPHSN One Health Consultative Workshop 2018](#)). This consolidated platform will urgently respond to the key regional health impacts by uniting and strengthening human, animal and environmental health, environmental management, natural resource management, and indigenous local knowledge ([Oceania Planetary Health Forum 2018](#)).

1.3 The Pacific Community (SPC) as a regional intergovernmental organisation (www.spc.int) providing technical and scientific assistance in the areas of public health, land resources, fisheries including aquaculture and marine ecosystems, education, gender and cultures, human rights, disaster risk management and statistics for development is strategically poised to providing an integrated approach to addressing the development issues of its members. Established in 1947 by Treaty (Canberra Agreement) it now has 26 members (Australia, NZ, USA, France + 22 PICTs) it has a set purpose of supporting crosscutting development needs in PICTs.

1.4 SPC defines the integrated programming approach as the process by which its activities are developed and approved to deliver optimal results across both; (i) the shared priorities of member countries and territories, and (ii) SPC's sectoral, thematic and organizational areas of priority and expertise. The integrated programming approaches has been endorsed by the SPC Executive and SPC's governing body, the CRGA, acknowledging that the integrated programming approach will strengthen SPC's ability to achieve all of its ten development objectives, some of which explicitly calls for multi-sectoral responses. As Climate Change and Health strategies and financing becoming more prominent and accessible in the region, the integrated programming allows for better foresight for SPC to resource mobilize. SPC considers the One Health/Planetary Health approaches to addressing emerging public health threats such as food safety and food security, zoonoses and antimicrobial resistance is an integrated programming model that should be supported and resourced appropriately.

2. PROGRESS AND ACHIEVEMENTS

2.1 The 22nd Pacific Public Health Surveillance Network Coordinating Body Meeting and the 7th Heads of Health meeting in April 2018 endorsed the key resolutions of the first One Health Consultative Workshop with following resolutions emphasizing opportunities for an integrated programming approach:

- Strengthen partnerships between the human, animal and environmental health sectors in research.
- Empower local education institutions to provide One Health research and training leadership appropriate to the Pacific context.
- Address vector control from environmental perspectives, including through better water management and environmental hygiene, noting the contribution of deforestation and planning natural and built infrastructure in place.

2.2 SPC at its One Health sense-making workshop in October 2018 mapped the past, current and upcoming One Health activities and affirmed that this process helped to identify relevant gaps, and key recommendations and opportunities to build on the work for new ideas/concepts. It was noted that concepts and ideas will vary depending on the problem identification for One Health and the gaps identified. For example, zoonosis and the gap in data in the region, surveillance needs in aquatic and animal health and high risk of outbreaks of diseases and infection from animal sources and contamination of soil, vegetables and plants transmittable to human and limited capacity of the PICTs to prevent and address those.

2.3 Potential solutions identified included: (i) Research and surveillance, (ii) Capacity building of institutions – health, agriculture, fisheries and (iii) Empower communities to prevent (traditional practices and technical support).

3. CHALLENGES

Poor linkage of human, animal and environmental surveillance data ([Marais et al. 2019](#)) remains. Current governance arrangements at environment and health nexus often inadequate, disconnected, fragmented, competitive or conspicuously absent. Shifting from gross domestic product as the measure of prosperity toward green growth ideals that more effectively assimilate economic development with quality of life, health and natural systems has not occurred very much. Facilitating the continuation of traditional relationships and strongly participatory practices, to gain insight into collective concerns by including the voice of the lived experience as evidence, using this voice (personal connection) to resonate with governments, international agencies and corporates to leverage change.

4. FUTURE DIRECTIONS

4.1 Recommendations for governments:

The Heads of Health are invited to note that the smooth implementation of the integrated programming approaches adopted by SPC using the One Health/Planetary Health platform necessitates important pre-requisites such as:

- Establishment of necessary legal and administrative arrangements to enable the health, environment and natural resource management sectors to work and plan together and to mainstream a consolidated One Health/Eco Health/Planetary Health platform into routine sectoral dialogue.
- Provision of the necessary resources to enable joint decision making and researches across sectors pertinent to health and environment, like those now being developed for emergency response and preparedness in the face of disease outbreaks and natural disasters.
- Recognition of indigenous leadership and local cultural knowledge as foundational and universally meaningful, and actively seek the engagement of indigenous leaders in decision-making.

- Strengthen the Healthy Islands Vision and the Pacific Islands Forum Leaders' Blue Pacific narrative by developing a suite of reportable indices that will draw from, and be aligned with, existing reportable and accountability measures including SDG targets for reporting to Pacific Heads of Health and Ministers and the CRGA.
- Support SPC as focal point of PPHSN in convening annual back-to-back meeting of PPHSN and One-Health/ Planetary Health forum to track progress.

4.2 Recommendations for development partners:

Development partners are invited to note the key roles that they play in integrating programming using the One Health/Planetary Health platform through:

- Encouraging existing networks such as PPHSN to establish common platforms to facilitate productive dialogue and collaboration between the health, animal and environment sectors and other relevant sectors.
 - Acknowledging the differences in operating scales and that a 'network of (existing) networks' is a good approach and can take messages forward to relevant forums, symposiums and conferences.
 - Support appropriate resourcing of implementable integrated and consolidated researches and activities pertaining to addressing key public health issues such as food safety and food security, zoonoses and antimicrobial resistance that would benefit from the use of a One Health/Planetary Health platform.
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