



Progress on Implementation of the Pacific NCD Roadmap Monitored through the Pacific MANA Dashboard

At a glance

- To strengthen multi-sectoral responses to the Non-Communicable Diseases (NCD) crisis, the Pacific leaders committed to implement the Pacific NCD Roadmap. The Pacific Monitoring Alliance for NCD Action (MANA) Dashboard has been used to monitor the progress on the implementation of the Roadmap.
- Despite the progress made between 2019-2020, most PICTs are not progressing fast enough and are off-track to meet the global NCD targets and the NCD-related Sustainable Development Goals (SDGs).
- The COVID-19 pandemic, natural disasters and other competing priorities continue to hamper progress on all aspects of NCD prevention and control. Without urgent action on NCDs, Pacific Island countries and territories (PICTs) will remain off-track and threaten socioeconomic development.
- Pacific Heads of Health are invited to commit to ensuring they have an active costed national multisectoral NCD strategic plan which is effectively implemented and monitored using MANA indicators; invest in additional resources to enhance NCD management services with a focus on decentralised primary health care level actions; continue to strengthen preventive measures particularly common policy gaps in the region; and ensure to address the root causes of NCD in a coordinated 'whole of government and society' approach.

Future vision

NCDs account for around 75% of deaths in PICTs and are a major threat to health and development. To strengthen multi-sectoral responses to the NCD crisis, the Pacific leaders endorsed the Pacific NCD Roadmap in 2014¹. In line with WHO NCD best-buys², the Roadmap includes five key recommended actions and a menu of over 30 other multi-sectoral interventions. The Pacific MANA Dashboard has been used to monitor the progress on the implementation of the Roadmap. The MANA Dashboard indicators are complementary to the Pacific Healthy Islands Monitoring Framework³, and the global NCD progress monitoring indicators and Global NCD and SDG targets⁴.

Scaling up actions on the Pacific NCD Roadmap will contribute to meeting the global NCD targets⁵ particularly to reduce premature mortality from NCD by one third by 2030, to achieve our vision of

¹ Pacific NCD Roadmap. <http://documents.worldbank.org/curated/en/534551468332387599/pdf/893050WP0P13040PUBLIC00NCD0Roadmap.pdf>

² Best buys and other recommended interventions for NCD. <https://apps.who.int/iris/bitstream/handle/10665/259232/WHO-NMH-NVI-17.9-eng.pdf?sequence=1&isAllowed=y>

³ Framework of action for revitalization of healthy islands in the Pacific. [9789290616207_eng\(1\).pdf](https://www.who.int/publications/i/item/9789290616207_eng(1).pdf)

⁴ NCD Progress Monitor 2020. <https://www.who.int/publications/i/item/ncd-progress-monitor-2020>

⁵ Voluntary global NCD targets. <https://www.who.int/nmh/ncd-tools/definition-targets/en/>

'Pacific people live long, healthy, and productive lives'. Specifically, in the next 10 years, it is expected that PICTs will have improved leadership, governance and accountability mechanisms that support NCD initiatives; enhanced implementation and enforcement of policies and legislation across all relevant sectors with strong buy-in from across government Ministries and significant involvement from CSOs and communities ; strengthened capacity and services for early detection and management of NCD including mental wellbeing, and programs that address cross cutting issues linking NCD with infectious diseases through decentralised primary health care services; have in place NCD health information management systems that are credible and accessible to inform policy making; and are implementing innovative health promotion interventions using advanced technology and creative ways of communication to enhance behaviour change. At a Pacific level, opportunities to leverage shared approaches will be taken, including sharing of information and tools and expertise.

Examples of recent progress

The following summarises the progress made in the updated MANA dashboards for 2019-2020 against the baseline MANA dashboard status report published for 2017-2018⁶, and the cumulative progress on the key recommended actions identified in the Roadmap⁷. Additional details are shown in the Annex.

Recommendation 1: Strengthen tobacco control by increasing excise duties to 70% of the retail price.

Three additional PICTs (Marshall Islands, Solomon Islands and Tokelau) have implemented tobacco taxation measures, resulting in 20 PICTs out of 21 PICTs, that have maintained and/or implemented tobacco taxation measures. To-date, six PICTs (American Samoa, French Polynesia, New Caledonia, Palau, Tonga, and Wallis & Futuna) have reached minimum recommended tobacco taxation target.

Recommendation 2: Increase in taxation of alcohol products.

One additional PICT (Marshall Islands) has implemented alcohol taxation measures resulting in 21 PICTs that have maintained and/or implemented alcohol taxation measures, but in most cases, taxation is based on beverage type rather than on ethanol content and would therefore benefit from adjustments.

Recommendation 3: Improve policies on food and drink products directly linked to NCD.

One additional PICT (New Caledonia) adopted a taxation measure to discourage unhealthy food/beverage choices, bringing the total to 14 PICTs. One additional PICT (Tonga) put in place a policy to reduce population salt consumption resulting in 16 PICTs in total; and six additional PICTs (American Samoa, Commonwealth of the Mariana Islands (CNMI), Cook Islands, Niue, Samoa, and Tuvalu) have referenced approaches to restrict trans-fat in the food supply in national documents (from none to now six PICTs in total).

Two additional PICTs (Palau and Tuvalu) have endorsed food based dietary guidelines resulting in 13 PICTs in total; three additional PICTs (Cook Islands, Niue, and Samoa) have put in place policies to

⁶ The Pacific Monitoring Alliance for NCD Action (MANA). Status of non-communicable diseases policy and legislation in Pacific Island countries and territories, 2018. The Pacific Community.

⁷ Progress made since the endorsement of PICTs' updated MANA Dashboards may not be reflected in this paper.

restrict marketing of foods and non-alcoholic beverages to children resulting in five PICTs in total, with four more PICTs (Nauru, Palau, Papua New Guinea (PNG), and Tonga) putting in place policies to encourage provision and promotion of healthy food choices in schools, which now brings the total to 14 PICTs.

Recommendation 4: Enhance primary and secondary prevention of NCD.

One additional PICT (Palau) has national guidelines in place for the diagnosis and management of at least one of the four main NCDs (total 19 PICTs) and four additional PICTs (Federated States of Micronesia (FSM)-Pohnpei, PNG, Marshall Islands, and Solomon Islands) have essential NCD medicines included in the national list of essential medicines (total 19 PICTs). Four additional PICTs (FSM, PNG, Tokelau, and Wallis & Futuna) have smoking cessation support of some kind available (total 18 PICTs).

Regarding programmes related to infant nutrition, one additional PICT (Samoa) has restrictions on the marketing of breast milk substitutes (total six PICTs), one additional PICT (PNG) has a public hospital certified as a baby-friendly hospital (total five PICTs), and six additional PICTs (CNMI, Guam, Samoa, Tuvalu, and Wallis & Futuna) have legislation to provide at least 12 weeks paid maternity leave and breast-feeding facilities, resulting in a total of 14 PICTs. NCD prevention and control awareness campaigns and behaviour change interventions using health promotion and education resources in the Pacific context, are ongoing in several PICTs.

Recommendations 5: Strengthen the evidence base for better investment planning and program effectiveness.

The monitoring of adult NCD risk prevalence data has been completed in two additional PICTs (Marshall Islands and Wallis & Futuna) (total 14 PICTs) while three additional PICTs (American Samoa, Niue, and Marshall Islands) have been monitoring adolescent prevalence data (total 17 PICTs). With one additional PICT (PNG), 19 PICTs now have functioning systems for generating cause-specific mortality data on a routine basis. Four additional PICTs (New Caledonia, Marshall Islands, Tonga, and Wallis & Futuna) now routinely collect and report child growth data, thus bringing the total to 15 PICTs.

2.6. Other recommended actions

Leadership and governance

Seven additional PICTs (CNMI, Cook Islands, Fiji, Kiribati, Nauru, Marshall Islands and Tokelau) have established a multisectoral NCD taskforce to oversee the implementation of their national NCD strategies, resulting in a total of 12 PICTs establishing such a mechanism. Four more PICTs (Nauru, New Caledonia, Solomon Islands and Tokelau) have developed a national multisectoral NCD strategy, which brings the total to 17 PICTs.

Other preventive policy and legislation

A total of 20 PICTs now have legislation to create smoke-free public places with the two additional PICTs (FSM-Kosrae and Niue); two additional PICTs (American Samoa and Niue) have legislation for

health warnings on tobacco packaging (total 17 PICTs); two additional countries (Niue, and Tokelau) have legislation to restrict advertising (total 19 PICTs); and four additional PICTs (FSM-Pohnpei, Niue, Samoa, and Tokelau) restrict sales and require tobacco licensing (total 18 PICTs).

Two additional PICTs (FSM-Pohnpei and PNG) have regulations in place to control drink driving (total 20 PICTs), and two additional PICTs (FSM and Nauru) restrict alcohol advertising (total 8 PICTs). Two additional PICTs (CNMI and Palau) have compulsory physical education in school (total 15 PICTs). Five additional PICTs (American Samoa, FSM-Pohnpei, Palau, Marshall Islands and Tokelau) have a government-level system in place to support enforcement of NCD risk factors although the strength of enforcement systems varies greatly.

Why urgent action is needed now

Despite some progress made, most PICTs are not progressing fast enough or are off-track to meet their global NCD targets and commitment to reduce premature mortality from NCD⁸. Unhealthy behaviours such as physical inactivity, consuming less healthy foods and drinks, tobacco use, alcohol abuse and kava use are still a significant challenge in most PICTs. The COVID-19 pandemic, natural disasters and other competing priorities continue to hamper progress on all aspects of NCD prevention and control. Some measures taken to fight COVID-19 are likely to increase the risk of NCD and mental health issues in the long term. In addition, the COVID-19 pandemic has highlighted the existing link between NCD, infectious diseases and health emergencies, and the need to ensure health issues are not addressed in siloes.

Specifically, the COVID-19 pandemic has resulted in disruption of NCD management due to the postponement of screening programs, cancellation of planned treatments, shortage of essential medicines etc., and delaying in addressing regional gaps on preventive policies such as preventing tobacco industry interference, restricting trans-fats in the food supply, restricting marketing of foods and non-alcoholic beverages to children, and enforcing policies and legislations. Despite commitments made at high political level, there is still a need to further strengthen leadership, governance, and financing, and go beyond the health sectors to address the root causes of NCD in a sustained 'whole of government and whole of society approach'. There is a great need for more inter-ministerial collaboration to address NCD. Further work is also needed to engage CSOs more effectively to address NCD within their work at community level and to ensure the development of community-led innovative approaches to change behaviour and risks.

Significant opportunities exist to target liver cancer and eliminate cervical cancer through screening and vaccination programmes, but these are currently insufficiently resourced and not being prioritised. Similarly, opportunities to link NCD programmes with Maternity, STI and TB services are being missed. Insufficient investment is being made in ensuring availability of critical medicines, equipment, vaccines, and staffing at the decentralised primary health care level for the prevention, early detection and management of NCD.

⁸ NCD Progress Monitor 2020. <https://www.who.int/publications/i/item/ncd-progress-monitor-2020>

Without urgent action on NCD, PICTs will remain off-track and threaten socioeconomic development. Scaling up actions on the Pacific NCD Roadmap will ensure the safeguarding of people with NCD, minimising co-morbidity and promoting the well-being of all Pacific people. This will contribute to meeting the global NCD targets particularly to reduce premature mortality from NCD and to achieve our vision of 'Pacific people live long, healthy, and productive lives'.

Recommendations to be considered by the Heads of Health

Recommendations for governments

Pacific Heads of Health are invited to:

- 1) **commit** to effectively implement and monitor a costed national multisectoral NCD strategic plan with clearly defined indicators using the Pacific MANA and timelines aligned with the global NCD targets, including for working towards cervical cancer elimination, as part of efforts to reduce premature mortality;
- 2) **invest** in additional resources to enhance NCD management services and mental wellbeing at decentralised primary health care level including early detection, prevention (including vaccination), management and palliative care while leveraging opportunities through relevant programmes and innovative approaches that address cross-cutting issues linking NCD with infectious diseases.
- 3) **continue to strengthen** preventive measures, particularly common gaps in the region, such as enhancing use of fiscal policies on unhealthy products, preventing tobacco industry interference, restricting trans-fats in the food supply, and restricting marketing of foods and non-alcoholic beverages to children; and
- 4) **ensure** engagement of non-health sectors and civil societies in national NCD leadership, governance, and implementation to address the root causes of NCD in a coordinated 'whole of government and society' as well as 'health-in-all policies' approach.

Recommendations for development partners

Development partners are invited to:

- 1) **support** PICTs with the scaling up of NCD actions and monitoring the progress of implementation through the MANA Dashboard, and utilise this information to encourage relevant actions from non-health partners
- 2) **explore** opportunities to invest additional resources to enhance NCD management services, address cross-cutting issues, and implement innovative interventions using advanced technology and creative ways of communication to enhance behaviour change; and
- 3) **strengthen** efforts to improve civil societies engagement, regional coordination, international collaboration, and networking opportunities for PICTs.

Annex

Pacific Monitoring Alliance for NCD Action (MANA) Dashboard Progress 2018 vs. 2019-2021

	American Samoa		CNMI		Cook Islands		Federated States of Micronesia		Fiji		French Polynesia		Guam		Kiribati		Nauru		Niue		New Caledonia	
	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20
Leadership and governance																						
L1. Multi-sectoral NCD taskforce				★						★			★★★	★★★		★★★		★★				
L2. National strategy addressing NCDs and risk factors					★★★	★★★		★★★	★★★	★★★	★★★	★★★	★★★	★★★		★★★		★★★	★★★			★
L3. Explicit NCD indicators and targets	★★				★★★	★★★	★★★	★★★	★★★	★★★			★★★	★★★	★★	★★		★★★		★		
Preventive policies																						
<i>Tobacco</i>																						
T1. Tobacco excise taxes	★★	★★★	★★	★★	★★	★★	★	★	★	★	★★★	★★★	★	★	★	★	★	★	★	★	★★	★★★
T2. Smoke-free environments	★★★	★★★	★★	★★	★★	★★		★	★	★★	★★★	★★★	★★★	★★★	★★	★★	★★★	★★★		★★★	★★★	★★★
T3. Tobacco health warnings					★★	★★★			★★★	★★★			★	★							★★★	★★
T4. Tobacco advertising, promotion and sponsorship		★★				★★★			★★★	★★	★★★	★★★			★★	★★★	★★★	★★★	★★★		★★★	★★★
T5. Tobacco sales and licencing	★★★	★★★	★★★	★★★	★	★	N/A	★	★★★	★★			★★	★★	★	★	★★	★★		★★★	★★★	★★★
T6. Tobacco industry interference																					★★★	★★★
<i>Alcohol</i>																						
A1. Alcohol licencing to restrict sales	★★★	★★★	★★★	★★★	★★	★★	N/A	★★	★★	★★	★★	★★	★★★	★★★	★★	★★	★★	★★★	★★	★★	★★★	★★
A2. Alcohol advertising							N/A	★★★				★★★									★★	★★★
A3. Alcohol taxation									★★★	★★★							★★★	★★★			★★★	★★★
A4. Drink driving	★★★	★★	★	★		★	N/A		★★	★★	★★	★★	★★	★★	★	★	★★	★★	★	★	★★	★★★
<i>Food</i>																						
F1. Reducing salt consumption					★★	★★	★★★	★★	★★★	★★★	★★	★	★★	★★	★★	★★	★★★	★	★			★★
F2. Trans-fats				★		★																★★
F3. Unhealthy food marketing to children						★★★									★★★	★★★						★★
F4. Food fiscal policies					★	★	★	★	★	★	★	★			★★★	★★★	★★★	★★★	★★	★★		★
F5. Healthy food policies in schools	★★				★	★	N/A		★	★	★★★	★★★	★★★	★★★	★	★	★★	★★	★★★	★★★	★	★★
F6. Food-based dietary guidelines					★★	★★			★	★	★★	★★	★★	★★	★★★	★★★	★★★	★★★	★★★	★★★	★★★	★★★
<i>Physical Activity</i>																						
P1. Compulsory physical education in school curriculum	★★★			★★★	★★	★★★						★★★	★★★	★	★	★★★	★★★	★★★	★★★	★★★	★★★	★★★
Enforcement																						
E1. Enforcement of laws and regulations related to NCD risk factors		★	★★★	★★		★★★	N/A	★						★	★	★	★★★					
Health system response programmes																						
H1. National guidelines for care of main NCDs	★★	★			★	★★★		★	★	★	★★★		★★	★★	★	★	★	★★	★★★	★★	★★★	★★★
H2. Essential drugs		★★★	★★★			★★★	N/A	★★	★	★	★★★	★★★	★★★	★★★	★★	★★	★★	★★★	★★		★★★	★★★
H3. Smoking cessation	★	★★	★★	★★	★★	★★	N/A		★	★	★★	★★★	★★	★★★						★★★	★★★	★★★
H4. Marketing of breast milk substitutes									★★★	★★						★★						
H5. Baby friendly hospitals									★	★												
H6. Maternity leave and breastfeeding		★		★					★	★	★★★	★★★	★★★	★	★							★★★
Monitoring																						
M1. Population risk factor prevalence surveys - adults	★★	★★	★★	★★	★★★	★★★	★★★		★	★			★	★★	★★	★★★	★★	★★				★★★
M2. Population risk factor prevalence surveys - youth					★★★	★★★	★★★	★★★	★	★	★★★	★★★									★★★	★★★
M3. Child growth monitoring			★	★	★★	★★★											★★★	★★★	★★★	★★★	★★★	★★★
M4. Routine cause-specific mortality	★★★		★★★	★★★	★★★	★★★	★★	★★	★	★	★★★	★★	★	★	★★★	★★★	★★★	★★★	★★★	★★★	★★★	★★★

Note: Red: not present; Amber: under development; Green: present (*) low (**) medium (***) high strength of action; NA (not applicable); American Samoa Dashboard is yet to be endorsed Pacific Monitoring Alliance for NCD Action (MANA) Dashboard Progress 2018 vs. 2019-2021

	Palau		PNG		Republic of the Marshall Islands		Samoa		Solomon Islands		Tokelau		Tonga		Tuvalu		Vanuatu		Wallis and Futuna	
	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20	2017-18	2019-20
Leadership and governance																				
L1. Multi-sectoral NCD taskforce	***	***				*	***	***					***	***	**	**				
L2. National strategy addressing NCDs and risk factors		**	***	***			***	***		***			***	***	***	***	***	***		
L3. Explicit NCD indicators and targets	***	***	***	***			**	***		***	***	***	***	***	**	**	***	***		
Preventive policies																				
Tobacco																				
T1. Tobacco excise taxes	***	***		**		*	**	**					***	***	**	*	*	*	***	***
T2. Smoke-free environments	**	**	***	***	*	**	**	**	*	*	**	**	**	**	***	**	***	***		
T3. Tobacco health warnings		**	**	***			**	***	**	**			**	**	*	*	***	***		
T4. Tobacco advertising, promotion and sponsorship	***	***	**	**	*	*	***	**				*	**	**	***	**	**	**	***	***
T5. Tobacco sales and licencing	***	***	***	**		*		***	***	***			*	*	***	***	***	***		
T6. Tobacco industry interference								***												
Alcohol																				
A1. Alcohol licencing to restrict sales	***	***	**	***	**	**	**	***	***	***	**	**	***	***	***	***	**	**	**	**
A2. Alcohol advertising																				
A3. Alcohol taxation				**			*	*	**	**				**	***	**				
A4. Drink driving	**	**			*	*		*	**	**			**	**	*	*			***	**
Food																				
F1. Reducing salt consumption	*	*	*				***	***		*				*		*				
F2. Trans-fats								**								*				
F3. Unhealthy food marketing to children								*												
F4. Food fiscal policies					*	*	***	***			***		***	***			**	**	*	*
F5. Healthy food policies in schools		**					*	***						***						
F6. Food-based dietary guidelines		**			*		***	***	***	***			**			***				
Physical Activity																				
P1. Compulsory physical education in school curriculum			**	***			**	***	**	**	**	**	*						***	***
Enforcement																				
E1. Enforcement of laws and regulations related to NCD risk factors		*						**	*				*	***	**	**			***	***
Health system response programmes																				
H1. National guidelines for care of main NCDs		**	*	*			*	**	***	***	**	**	***	***	**	**	*	*	***	***
H2. Essential drugs							**	***			***	***	***	***	**	**			***	***
H3. Smoking cessation	*	**		*					**	**			***	***			*	*		
H4. Marketing of breast milk substitutes	***	***																		
H5. Baby friendly hospitals																				
H6. Maternity leave and breastfeeding							***													
Monitoring																				
M1. Population risk factor prevalence surveys - adults	**	**	*			**	***		**	**	***	***	***	***	***	***				**
M2. Population risk factor prevalence surveys - youth	***	***			*	*		**			***	***	***	***	***	**	***	***	***	***
M3. Child growth monitoring	***	*	***	*		**					*	*		*	**	**				
M4. Routine cause-specific mortality	***	**			**	**	***	***					**	**	***	***				

Red: not present; Amber: under development; Green: present (*) low (**) medium (***) high strength of action