

*Public Health Association of Fiji*



*Protecting Health*

STRATEGIC PLAN 2023 – 2026

***Choose Life and Protect Health***



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## Foreword: President

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I am pleased to share that the Public Health Association of Fiji (PHAF) has been re-registered to be the voice of public health and to assist and be partners with government and other stakeholders in at least, the promotion and protection of health of Fiji's population.

Reflecting on the fundamental premise of primary health care, PHAF affirms that all people, everywhere, have the right to achieve the highest attainable level of health.

Indeed and as the most recent pressing global public health event, Covid-19 pandemic has once again brought public health and public health services to centre stage not only in Fiji but the world over. Public health in our globalized world is multi-faceted, serving as a basis for everyday life and crucial for growth and development, equity and stability and is a function of numerous social, environmental and behavioural determinants.

Even though Fiji has not explicitly asserted nor define what it constitutes as its Essential Public Health Functions (EPHF), the country broadly accepts the nine elements of the World Health Organisation (W.H.O.) EPHF for our region. W.H.O. recognizes that the EPHFs are important to achieving Universal Health Coverage (UHC), the United Nations Sustainable Development Goals (SDGs) and the implementation of the International Health Regulation (IHR).

Over the past decades, Fiji has made a lot of progress in promoting and achieving health for its citizens. Public and preventive health remain a key focus of the government as channel and mechanism of achieving universal health coverage for all. The Ministry of Health and Medical Services Strategic Plan 2020 – 2025 identified strategic priorities for health services with Strategic Priority 1: stating to 'Reform public health services to provide a population-based approach for diseases and the climate crises'. Preventive health programmes and interventions are placed under this strategic priority in the plan.

The PHAF Strategic Plan 2023-2026 has the noble Vision of *'Healthy people and communities living in an inclusive and equitable society supported by healthy and sustainable environments'*. In our strategic plan, we have identified four priority areas to focus on in four years. These areas include: Association building and development; Advocacy for health system strengthening; Health awareness and health promotion; and Primary health care and community engagement. We have also identified certain early term policy activities for 2023 and these are outline in the strategy.

As relatively 'young' in comparison to well established public health associations of countries in the region and worldwide, PHAF will need considerable support from its members and stakeholders to thrive and to become effective in its contributions to the nation's public health agenda.

I invite health care workers and stakeholders to join us in our endeavour to complement government and key health partners promote and protect for all in Fiji.

[Lepani Waqatakirowa](#)

## About the PHAF

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### Who We Are

The Public Health Association of Fiji (PHAF) is the independent voice for public health in Fiji. As the only registered Fijian non-profit, non-governmental organization focused exclusively on public health, we are uniquely positioned to support and implement policies, actions and programmes to promote and protect health of all people and communities in Fiji.

We champion health equity, social justice and evidence-informed decision-making to promote and enhance public health perspective and evidence to government leaders and policy-makers.

Our members, from multi-discipline health workforce and stakeholders, believe that universal and equitable access to health care and services are catalyst for change that improves health and well-being for all.

PHAF respects and values diversity and inclusiveness in all aspects of its work.

### Executive Council Members

|                        |   |                          |
|------------------------|---|--------------------------|
| President              | - | Dr. Lepani Waqatakirewa  |
| Vice President         | - | Dr. Filimone Raikanikoda |
| General Secretary      | - | Sr. Litia Makutu         |
| Treasurer              | - | Dr. Nikansha Kumar       |
| Members Representative | - | Rev. Dr. Mosese Salusalu |

## Aims of the PHAF

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As outlined in the PHAF Constitution, the aims of the Association are:

1. Advocacy for sound public health policy for the prevention of diseases, promotion and protection of health of all peoples in Fiji.
2. Support and complement health education and health promotion activities.
3. Support and conduct health research promoting knowledge relating to local health priorities, which may include studies in the following areas:
  - epidemiology of diseases especially those affecting women, children and the adolescent;
  - contributory factors to chronic diseases including disabilities in local communities;
  - the impact of the social and physical environment including climate change on health;
  - the economic, social and personal resources required for the optimum health of individuals;
  - the structure and organisation, and function, planning and management of public health services; and
  - health systems issues especially on human resources in public health and primary care.
4. Supporting and providing a forum for the regular exchange of views and information, and developing policies, in relation to the areas set out above.
5. Supporting and promoting excellence in public health through development and education of workforce in health and primary care.
6. Develop a strong, capable and effective organisation through which the association's aims can be achieved.

## Guiding Principles of PHAF

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### Vision

Healthy people and communities living in an inclusive and equitable society supported by healthy and sustainable environments.

### Mission

To advance better health outcomes through healthy life choices, informed policies and equitable access to health care services.

### Values

**Quality:** We will deliver quality outputs to our undertakings including the utilisation of high-quality evidence-based research.

**Equity:** We will strive to be fair and impartial in the conduct and delivery of our services.

**Integrity:** We will be honest and open in all our actions, adhering to strong moral and ethical principles and values.

**Partnership:** We will work in partnership with all stakeholders and communities in advancing health issues and agenda of mutual interest and benefits.

**Respect and Cultural humility:** We will respect all people and observe cultural humility acknowledging the ethnic and cultural diversity in communities we work with.

## Priorities and Early Term Policy Focuses of PHAF

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### Priority Areas of Strategic Plan 2023 – 2026

1. Association building and development
2. Advocacy for health system strengthening
3. Health awareness and health promotion
4. Primary health care and community engagement

### Early term policy activity focus list for 2023 / 2024

Working with Government and Stakeholders in the following areas;

- a) Support actions that strengthens Public Health and Primary Care management structures at national and divisional levels.
- b) Advocate and contribute to the formulation of a National Preventive Health Strategy and Action Plan.
- c) Support and promote actions on preventable causes of ill health through policy, advocacy, social marketing, research and other means.
- d) Advocate for and support actions that improve human resource capabilities for public health and primary care especially in training, career positions and opportunities, remuneration, allowances and work environment and conditions.
- e) Contribute to public discussion and actions on general health issues such as non- communicable diseases, climate change and environment, and infectious diseases including the COVID-19 pandemic.

## Special Interest Groups

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Within the PHAF Constitution (PART VI; 23 & 24), the establishment of Special Interest Groups (SIGs) by members of the Association is enabled and promoted.

All health professionals and stakeholders applying for membership to PHAF are invited to register their special areas of interest in public health services and functions. As provided for in our Constitution, registered members to a SIG shall appoint a Convenor and Committee that will be responsible for their objectives. All PHAF members may choose to join any of the established SIGs by applying to the Convenors for inclusion.

SIGs are more activity-based, expertise-based, and interest-based grouping of PHAF members. Maintaining vibrant PHAF SIGs is a major organisational priority. SIGs should include objectives that will develop professional skills, manage public health projects, exchange views and information, and guide the career aspirations of members.

As the activity based grouping of the Association, each SIG and with the support of the Executive Council will be responsible for fundraising, project bidding, implementation, monitoring and reporting of their activities and interventions.

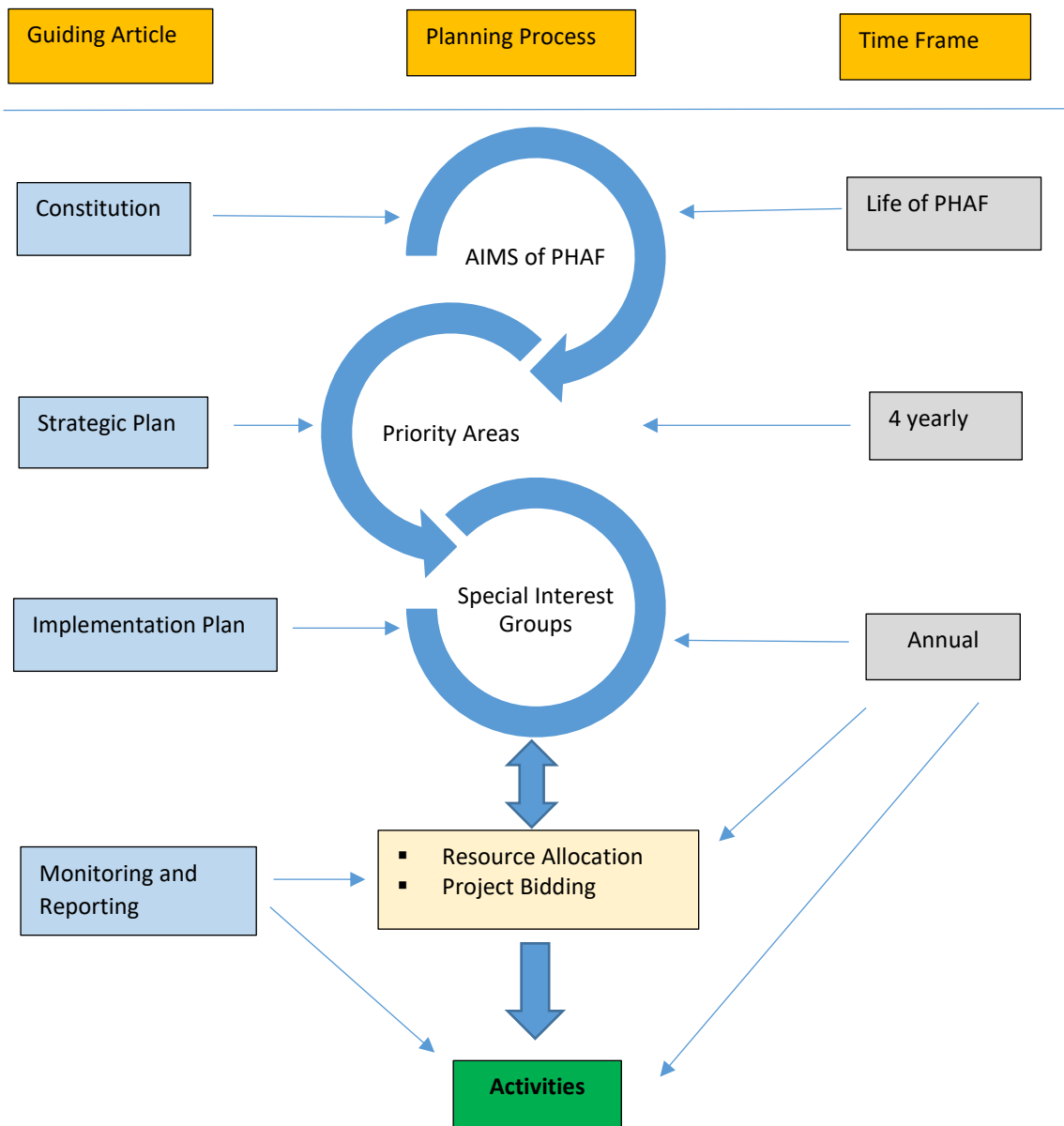
| <b>Proposed Focus Areas of Special Interest Groups</b>  |
|---|
| <p>1. Governance</p> <ul style="list-style-type: none"><li>▪ Policy Planning</li><li>▪ Public health organisation / delivery structure</li><li>▪ Health Strategy planning</li><li>▪ Public health legislation</li><li>▪ Monitoring and Evaluation</li></ul>   |
| <p>2. Health System Strengthening</p> <ul style="list-style-type: none"><li>▪ Research, health impact assessment</li><li>▪ Health information</li><li>▪ Human resource – education, training, advocacy on engagement and retention</li></ul>  |
| <p>3. Health Promotion and Health Protection</p> <ul style="list-style-type: none"><li>▪ Disease prevention (CD and NCD), mental health</li><li>▪ Risk factors reduction – physical activities, nutrition, tobacco, alcohol</li><li>▪ Emergency preparedness; occupational health; environmental health; climate change and sustainability.</li></ul> |



## Planning, Implementation and Monitoring Process

The Executive Council will be responsible and will supervise the implementation of the strategic plan. Oversight actions of the Council will include the following;

- facilitate establishment of Special Interest Groups
- assist SIG is proposal writing and fundraising activities
- formulate programme measures and targets when needed.
- establish annual and other timelines for meeting of priorities
- establish an efficient progress reporting mechanism
- support monitoring activities for resources and programmes
- undertake mid and end of term review of strategic plan



## Principles and Basis of Public Health Actions

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### Primary Health Care

The 1978 Alma-Ata Declaration on Primary Health Care was the first document to set out a holistic view of health and put an emphasis on the contribution of health to economic and individual development. Primary health care called for “Health for All”, and was the first declaration of health as a fundamental human right. Primary health care enables health systems to support a person’s health needs – from health promotion to disease prevention, treatment, rehabilitation, palliative care and more. This strategy also ensures that health care is delivered in a way that is centred on people’s needs and respects their preferences.

### Universal Health Coverage

The World Health Organisation (WHO) defines UHC as *‘means that all people have access to the full range of quality health services they need, when and where they need them, without financial hardship’*. The right to health is the core value of WHO and universal health coverage, to be promoted and protected without distinction of age, ethnic group, race, sex, gender, sexual orientation, language, religion, political or other opinions, national or social origin, economic position, birth, or any other status. Achieving UHC is one of the targets the nations of the world set when they adopted the 2030 Sustainable Development Goals (SDGs) in 2015.

### Social Determinant of Health

A healthy community does not exist solely based on the quality of its healthcare system, but rather based on a range of social and economic factors and resources needed for the health and well-being of its residents in all aspects of their lives. The social determinants of health (SDH) are the non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, traditions, social policies and political systems.

### Sustainable Development Goal

The SDGs are a universal call to action to end poverty, protect the planet and ensure that all people enjoy peace and prosperity. The current Agenda 2030 for Sustainable Development adopted by the United Nations General Assembly has 17 objectives and 169 targets for eradicating poverty, reducing inequity and fighting climate change over the next 15 years. Unlike the previous Millennium Development Goals (MDG), none of the SDGs mentions a specific medical condition, and only one (SDG 3) is explicitly focused on health. However, together, they provide a broad framework for addressing public health problems more holistically, recognizing the evidence that we cannot separate ill health from climate change, adequate housing, gender issues and economic hardship.

## International Health Regulation (2005)

Recent global health crises, including H1N1 influenza (2009), Ebola (2014), Zika (2016) and Covid-19 (2019) have led to questions about the ability of the national and international public health community to deal with such threats. Different hazards and threats, and in particular with emerging or re-emerging infectious diseases that threaten to break out of established patterns of prevalence or virulence into new areas and new victims. Such episodes are described as outbreaks, epidemics or pandemics depending on their severity, temporal or geographic reach, or their ability to capture our attention and threatened our livelihood.

In the face of these threats, a health protection response from the public health authorities is expected. Regardless of the different definitions, health protection is one dimension of public health that is well recognized and accepted. Within this function is the unavoidable responsibility of the health authorities to alert, respond to and control the health risks that may arise from health emergencies. In short, everything that falls under emergency preparedness and health security.

To formulate an appropriate response to any of these challenges, it is necessary to draw on the IHR, which have been at the heart of global health security since 1969. These regulations aim to prevent, protect against, control and provide a response to public health threats through improved surveillance, reporting and international cooperation, and to do so in ways which avoid unnecessary interference with international traffic and trade.

## Essential Public Health Functions

WHO recognizes that the EPHFs are important to achieving universal health coverage, and they also align closely with the United Nations Sustainable Development Goals (SDGs) and integrate key actions that underpin global health security, including surveillance and the implementation of the International Health Regulations

Essential public health functions, WHO (Western Pacific Region, 2000)

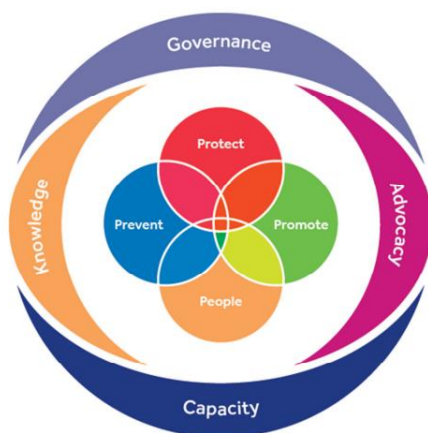
1. Health situation monitoring and analysis
2. Epidemiological surveillance/disease prevention and control
3. Development of policies and planning in public health
4. Strategic management of health systems and services for population health gain
5. Regulation and enforcement to protect public health
6. Human resources development and planning in public health
7. Health promotion, social participation and empowerment
8. Quality assurance in personal and population-based health services
9. Research, development and implementation of innovative public health solutions

## Global Charter for Public Health

The Global Charter for the Public Health (GCPH) is a collaborative plan of the World Federation of Public Health Associations (WFPHA) with the World Health Organisation (W.H.O) mainly to adapt today's public health to its global context in the light of and in conjunction with the Sustainable Development Goals (SDGs).

The GCPH consists of two groups of seven functions and services.

- (1) Services: a group of three core services—Protection, Prevention and Promotion
- (2) Functions: a group of four enabler functions—Governance, Advocacy, Capacity and Information



### Public Health Focus Areas under the Global Charter for Public Health

PHAF concurs that specific public health topics require components drawn from the stated range of services and functions. Components of these seven services and functions include:

- (1) Governance: public health legislation; health and cross-sector policy; strategy; financing; organisation; assurance: transparency, accountability and audit.
- (2) Information: surveillance, monitoring and evaluation; monitoring of health determinants; research and evidence; risk and innovation; dissemination and uptake.
- (3) Protection: international health regulation and co-ordination; health impact assessment; communicable disease control; emergency preparedness; occupational health; environmental health; climate change and sustainability.
- (4) Prevention: primary prevention: vaccination; secondary prevention: screening; tertiary prevention: evidence-based, community-based, integrated, person-centred quality healthcare and rehabilitation; healthcare management and planning.
- (5) Promotion: inequalities; environmental determinants; social and economic determinants; resilience; behaviour and health literacy; life-course; healthy settings.
- (6) Advocacy: leadership and ethics; health equity; social-mobilization and solidarity; education of the public; people-centred approach; voluntary community sector engagement; communications; sustainable development.
- (7) Capacity: workforce development for public health, health workers and wider workforce; workforce planning: numbers, resources, infrastructure; standards, curriculum, accreditation; capabilities, teaching and training.

## KEY RESOURCES

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Canadian Public Health Association

Constitution of the Public Health Association of Fiji

Essential public health functions, health systems and health security: developing conceptual clarity and a WHO roadmap for action © World Health Organization 2018

International health regulations (2005) 3<sup>rd</sup> ed. WHO Library Cataloguing-in-Publication Data

Public Health Association of Australia

Public Health Association of New Zealand

Strategic Plan 2020 – 2025. Fiji Ministry of Health and Medical Services.

The World Federation of Public Health Associations developed *A Global Charter for the Public's Health*