

# Fiji MOHMS NCD Strategic Plan 2015-2019

## Background

The Fiji Ministry of Health & Medical Services NCD Strategic Plan 2015-2019 focused on the prevention and treatment of NCDs, including mental health and violence and injuries. The strategy was structured into parts tackling each of the key areas: tobacco, alcohol, diet, physical activity, clinical and public health services, mental health, injuries and violence and a more general overarching section. For the first time the NCD strategic plan included mental health and stress management which are important health problems in their own rights, but also closely linked with the other NCDs. The plan therefore took a more Wellness centred approach to NCDs, in line with the focus of the Ministry of Health and Medical Services and its Wellness Unit.

For the purposes of the strategic plan NCDs were defined as those diseases which are associated with lifestyle factors and are inter-related. These are: all categories of illness and injury that are not communicable or infectious in nature including preventable blindness, asthma, mental health disorders, environmental and inherited cancers, injuries, drowning, and other related accidents.

## Action Areas & Values

There are overall 5 areas of action under the plan , with particular focus on I-III:

- I. Wellness Fiji at Community Health Worker Level
- II. Wellness Fiji plus NCD toolkit at Nursing Stations and Health Centre Levels
- III. Wellness Fiji plus NCD Toolkit and PEN at the SOPD Levels
- IV. Complication management at specialist SOPD
- V. Rehabilitation services

The values of the NCD Strategic Plan 2015-2019 were:



## Overall Goal & Objectives

### Goal:

To contribute to the overall goal of a healthier Fiji, and specifically to achieve a 25% reduction in premature mortality from the four key NCDs by 2025.

### Objectives:

Reduced intake of salt per person aged 18+ years by 20% by 2019  
Increased daily average serves of fruit and vegetables among adolescents and adults by 10% by 2019  
No increase in obesity prevalence in adults or adolescents  
No increase in diabetes prevalence in adults  
Prevalence of insufficiently physically active adolescents reduced by 5% by 2019  
Prevalence of insufficiently physically active persons aged 18+ years reduced by 10% by 2019  
Reduced prevalence of current tobacco use among adolescents by 10% by 2019  
Prevalence of current tobacco use among persons aged 18 years+ reduced by 10% by 2019  
Increase in number of settings-based tobacco-free policies by 20% by 2019.  
Prevalence of heavy episodic drinking among adolescents and adults reduced by 5% by 2019  
Reduced annual per capita intake of alcohol per person aged 15years+ by 5% by 2019  
To reduce number of suicides by 20% by 2019  
To reduce cases of attempted suicide by 20% by 2019  
To reduce the prevalence of violence and injuries by 5% by 2019  
To reduce reported cases of violence and injuries related to alcohol by 10% by 2019  
Increased resources allocation for NCDs that is in line with the scale of the crisis.

## Intervention Areas

### Diet

- Age standardized mean population intake of salt, per day in grams per person aged 18+ yrs reduced by 20% by 2019 (and by 30% by 2025)
- Increased daily average serves of fruit and vegetables among adolescence and adults by 10% by 2019
- No increase in obesity prevalence in adults or adolescents
- Adopt and implement draft regulations to control the marketing of foods and non-alcoholic beverages to children

### Physical Activity

- Prevalence of insufficiently physically active adolescents (defined as less than 60 minutes of moderate to vigorous intensity activity daily) reduced by 5% by 2018 (and by 10% by 2025).
- Age-standardized prevalence of insufficiently physically active persons aged 18+ years (defined as less than 150 minutes of moderate-intensity activity per week, or equivalent) reduced by 5% by 2018 (and by 10% by 2025).

### Tobacco

- Reduced prevalence of current tobacco use among adolescents by 10% by 2019 (and by 30% by 2025).
- Reduced age standardized prevalence of current tobacco use among persons aged 18 yrs+ by 10% by 2019.
- Increase in the number of settings-based tobacco-free policies by 20% by 2019.

### Alcohol & Kava

- Age-standardized prevalence of heavy episodic drinking among adolescents and adults reduced by 5% by 2018 (and by 10% by 2025).
- Reduced annual per capita intake of alcohol per person aged 15years+ by 5% by 2019

### Clinical & Public Health Services

- By 2019, 50% availability of affordable basic technologies and essential medicines required to treat NCDs in public and private facilities (and 80% by 2025)
- Identify high risk population for stroke and heart attack and treat 30% of them by 2019, and 50% of them by 2025.

### Mental Health & Stress Management

- To reduce number of suicide cases and attempted suicide cases by 20% by 2019

### Violence & Injuries

- To reduce the prevalence of violence and injuries by 5% by 2019
- To reduce cases of violence and injuries related to alcohol by 10% by 2019

### 'Cross-cutting' Targets

A number of Cross-cutting and cross sector targets under the strategic plan were also stated, including as examples:

- Establish a National taskforce for NCDs that is focused on innovative avenues to address the crisis.
- Continue efforts to inform key stakeholders and leaders of the scale of the NCD/mental health/injuries and violence crisis: including regular briefings for key stakeholders
- Identify champions for NCDs
- Pursue share of taxes from revenue on tobacco/alcohol/'unhealthy' food for health promotion
- Improving human resource capacity for NCDs in MoHMS in response to training needs assessment
- Healthy settings including workplaces, communities, schools, churches, islands, cities to be utilized. (Award programmes to be developed to recognize achievements)
- Planned and proactive engagement with appropriate private sector and civil society organisations including faith-based organisations
- Capacity-building available for key community members, faith-based organization leaders and community health workers to support and empower a greater role in NCD activities.
- Development of communication plan including regular newsletter, to update stakeholders regarding NCD strategy and activities
- Relevant curricula for health professionals, teachers and FBO leaders should be reviewed and revised if needed to ensure relevance to NCD strategy (including behavior change/motivational interviewing)

### More Information - MOHMS NCD Strategic Plan 2015-2019