



SAMOA–WHO

Country Cooperation Strategy 2018–2022

OVERVIEW

Samoa was home to 192 126 people in 2016, residing on two main islands (Savaii and Upolu) and several smaller islands. Samoa has a relatively young population, of which 46% is aged 19 years or younger. Village communities and the extended family or *aiga* are central to the organization of Samoan society, and they are the foundation of *Fa'a Samoa*, the traditional way of life in Samoa. Samoa has a stable political environment operating under a parliamentary democracy, with Prime Minister Tuilaepa Aiono Sailele Malielegaoi holding office continually for 18 years.

Samoa is a lower-middle-income country with an economy that is highly vulnerable to external shocks due to its small population size, limited resources and exposure to disasters. A large number of Samoans residing abroad continue to send financial remittances back to their extended families. The economy relies on these remittances in addition to tourism, fisheries and external development assistance.

In 2017, the Cabinet took a decision to merge the National Health Services and the Ministry of Health to improve coordination of the health sector. It also aims at strengthening the provision of public health and primary health care in rural areas.

HEALTH AND DEVELOPMENT

Samoa ranks 105 out of 187 countries on the Human Development Index 2015, placing it in the medium category in terms of standard of living.

noncommunicable diseases (NCDs) are the main cause of premature mortality and morbidity, linked to a high prevalence of key risk factors. In 2013, half of the adult population between the ages of 18 and 64 years were at high risk of developing an NCD. Dietary risk factors are a major contributor to NCDs in Samoa; close to 85% of adults are overweight or obese, and around 62% of adults regularly consume processed foods high in salt. The escalating costs associated with treating end-stage NCDs impose a major financial burden on the health system and broader society. There is limited service provision for cancer screening, registry or treatment. The dialysis centre has seen an increasing number of patients in all age groups.

Samoa has made a number of attempts to curb rising rates of NCDs, including through tobacco and food reforms. WHO has been supporting Samoa in delivering a unique community-led approach to NCD prevention, detection and management through PEN Fa'a Samoa. Early analysis of this programme shows strong community participation, while highlighting ongoing challenges faced in relation to health literacy, case management and access to medicines. Mobilizing communities to take a more formal role in primary health care is a top priority.

The dangers of emerging and re-emerging communicable diseases, including dengue, chikungunya and Zika, highlight an ongoing vulnerability to outbreaks. Lymphatic filariasis remains endemic, with management through intensive mass drug administration campaigns. Vaccine-preventable diseases have rarely been reported, and Samoa maintains its polio-free and measles-free status. Recent evaluations, however, have shown a need to increase measles, mumps and rubella (MMR) coverage and reduce dropouts from immunization services. Prevention and management of sexually transmitted infections (STIs) remain a challenge due

to poor commodity distribution and low uptake of voluntary counselling and testing. While HIV prevalence is low, behaviours that put people at higher risk of acquiring and transmitting STIs and HIV are still common, confirmed by high rates of chlamydia, with a prevalence of 26% in 2015 and 40% among young women.

The health sector has established accreditation and registration mechanisms for traditional birth attendants. There have been concerted efforts to address workforce shortages. Ongoing workforce planning and forecasting, however, might better assist policy-makers in directing skills to where they are most needed.

NATIONAL STRATEGIC PRIORITIES WHO AND THE GOVERNMENT 2018–2022

The World Health Organization (WHO), working with partners, will support the Government in pursuing its national strategic priorities. Each strategic activity is linked to at least one of the subregional focus areas that are detailed in the *Pacific Island Countries and Areas–WHO Cooperation Strategy 2018–2022*:

1. To strengthen health systems towards UHC

- 1.1 Participate in high-level policy dialogue on the pathway to achieving the Healthy Islands vision, Sustainable Development Goals and universal health coverage.
- 1.2 Support development of a framework for the institutionalization of health information and national health accounts for planning and resource allocation
- 1.3 Amend legislation to provide opportunities for the implementation of Samoa's *eHealth Policy and Strategy (2016–2021)*.
- 1.4 Support improvements to the health information system through eHealth development, the Demographic and Health Survey and STEPS surveys.
- 1.5 Undertake analytical work for policy options for the revitalization of primary health care, and support for institutional development, including the proposed merger of National Health Services and the Ministry of Health.
- 1.6 Define and cost a standard service delivery package at village level, and for health centres and district hospitals.
- 1.7 Implement participatory conciliation and resolution mechanisms for medical errors and grievances.
- 1.8 Support the establishment of a pharmacovigilance system to improve the quality and safety of medicines.
- 1.9 Use health workforce projections to determine fellowship and training opportunities, including expanding Pacific Open Learning Health Network.
- 1.10 Support national health education and training institutions to achieve accreditation
- 1.11 Promote a team approach to manage chronic patients through a partnership of doctors, nurses, allied health and community health workers, and patients and their families.

2. To reduce avoidable disease burden and premature deaths, particularly NCDs

- 2.1 Support evidenced-based best practice and surveillance for prevention, control and management of NCDs.
- 2.2 Review and develop a high-level multisectoral NCD strategy, with focus on controlling consumption of tobacco and alcohol and unhealthy diets.
- 2.3 Develop and implement legislative reforms including ratification of the WHO FCTC, restrictions on marketing of alcohol and unhealthy food to children, and increased excise taxes.
- 2.4 Scale up PEN Fa'a Samoa geographically and horizontally, with improved links between community education, case detection and NCD case management, and development of communications protocols used to address health literacy and self-management.
- 2.5 Update treatment guidelines and protocols across the continuum of care for management of cardiovascular diseases and diabetes, and integration of rehabilitation and palliative care.
- 2.6 Involve traditional healers in the prevention and management of NCDs.
- 2.7 Use the WHO Mental Health Gap Action Programme (mhGAP) to ensure patients with mental, neurological and substance use disorders are identified, assessed and managed through the system of referrals.

3. To control communicable diseases and protect the health of women and children

- 3.1 Amend legislation to provide greater protection of children from exposure to unhealthy substances and behaviours, particularly in the education and home environments.
- 3.2 Update treatment guidelines and protocols for management of STIs and HIV, TB and emerging diseases.
- 3.3 Conduct mass drug administration and transmission assessment surveys for the Lymphatic Filariasis Elimination Programme.
- 3.4 Improve capacity for planning and sustaining routine immunization and the introduction of new vaccines.

4. To protect Samoan people from public health events including disease outbreaks

- 4.1 Introduce and use Asia Pacific Strategy for Emerging Diseases and Public Health Emergencies III as a framework for building national capacity to detect, prepare for and respond to public health emergencies under International Health Regulations (2005).
- 4.2 Review and test disaster risk management plans through simulation exercises.
- 4.3 Continue to implement the *National Action Plan for Antimicrobial Resistance* including carrying out the annual Antibiotic Awareness Week and Hand Hygiene Day and antimicrobial consumption surveys.

NATIONAL HEALTH POLICY

The vision of the *Strategy for the Development of Samoa (SDS) 2016/17-2019/20* is “an improved quality of life for all: accelerating sustainable development and broadening opportunities”. Promoting health and well-being is a key outcome of the plan, which emphasizes prevention, health protection and inclusive people-centred health through increased focus on primary health care; revitalization of traditional roles in village health care; and quality health service delivery. Addressing NCDs remains a priority in Samoa’s development plans, in addition to the health and well-being of women and children.

The vision of the *Samoa Health Sector Plan 2008–2018* is “a healthy Samoa”. Its mission is to “regulate and provide quality, accountable and sustainable health services through people working in partnership”. Key priorities in this plan include addressing rapidly increasing levels of NCDs and their impact on mortality and morbidity, the health system and the economy; improving reproductive and maternal and child health for the long-term health of the community; reducing risks from emerging and re-emerging infectious diseases; and reducing injury as a significant cause of death and disability. Key strategies of the Health Sector Plan are strengthening health systems and health governance, facilitating improved collaboration, partnerships and donor coordination, enhancing quality service delivery and strengthening primordial prevention.

The Health Sector Plan has led to some important legislation including the National Health Service Act 2014, the Health Promotion Foundation Act 2015, the Allied Health Professions Act 2014, the Food Act 2015, the Healthcare Professions Registration and Standards Act 2007, and the Tobacco Control Act 2008. A new health sector plan is currently in development.

PARTNERS

In implementing this strategy, WHO and the Ministry of Health will work with other government ministries, other sectors, academia, civil society, other United Nations agencies, bilateral development partners, regional and global health initiatives, philanthropic foundations and others in support of planned national health priorities.

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