

Suva Declaration on Improving Oral Health in the Pacific Islands Region

Background and context

The Heads of Dental Services of 14 Pacific Island Countries and Territories¹, coming together for their 5th Regional Meeting hosted by the Department of Oral Health, Fiji National University, on 25th-27th August 2014 in Suva, Fiji, concerned about the status of oral health in the Pacific Islands Region, mindful of regional and international framework policies, conference declarations and the emerging NCD movement, reviewed their respective oral health care systems and adopted the *Suva Declaration on Improving of Oral Health in the Pacific Islands Region* in order to advocate for better prioritisation of oral health in the context of comprehensive prevention and control of non-communicable diseases (NCDs).

The Heads of Dental Services of 14 Pacific Island Countries and Territories

Recognize:

The changing burden of oral diseases as a growing public health problem

The oral health status of many populations in the Pacific Islands Region is in a phase of rapid transition as a consequence of changes in the broader determinants of general and oral health, such as the exposure to risk factors like unhealthy diets, tobacco use or alcohol consumption. The burden from the two priority conditions, dental caries and periodontal diseases is generally high, despite broad variation of prevalence and incidence. Oral diseases rank among the top 10 causes for consulting primary health care services and complications of untreated oral diseases can be life-threatening.

The priority oral diseases in the Pacific Islands Region are:

- Dental Caries (tooth decay) shows generally high prevalence, particularly in young children, and remains largely untreated. This leads to serious negative impacts on quality of life, education attainment and work performance from chronic inflammation, pain and psycho-social effects.
- Periodontal diseases mainly affect adults and can lead to significant impacts on systemic health conditions such as diabetes. They also result in high rates of tooth loss and edentulism, which in turn complicates nutrition and social interaction.
- Oral cancer has very high incidence rates in a number of regional countries, though absolute case numbers are low due to their small population size. Nevertheless, an increase in incidence has been observed. Oral cancer mortality rates are generally high due to late diagnosis and the quality of life of survivors is severely compromised.

Other oral conditions of relevance for the region include oro-facial trauma, congenital malformations and orthodontic problems, all of them with less public health priority, but still relevant.

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The challenges to oral health care systems

Most countries in the region have achieved a functioning integration of oral health into primary health care and rely predominantly on public service provision; yet, significant problems remain and need to be addressed urgently in order to cope with current needs of populations and to prepare for the challenges ahead:

- Shortage of a skilled oral health workforce, complicated oftentimes by current staff reaching retirement age and further aggravated by migration;
- Geographic isolation and dispersion, leading to inequalities in access to essential health care services as well as difficult and costly procurement of supplies;
- Small population numbers, not always allowing for provision of a full range of health care services in all countries and thus requiring complicated patient referral;
- Generally weak clinical facilities and difficulties with provision of supplies and technical maintenance; and
- Almost all countries lack current epidemiological data on disease burden; as well as lack of monitoring systems to evaluate service performance, which challenges planning, decision-making and advocacy.

Furthermore, the United Nations Minamata Convention (September 2014) on Mercury will impose restrictions on the use of dental amalgam as a filling material, while at the same time requesting governments to place more emphasis on prevention of oral diseases and promotion of oral health.

Recommend:

To strengthen prevention and control of oral diseases²

- Develop or strengthen national planning for oral health, aligned and integrated with national planning for prevention and controls of NCDs;
- Focus on upstream population-wide strategies for oral disease prevention, emphasising risk reduction measures such as tobacco and alcohol control or regulations to protect healthy diets;
- Implement, review or strengthen effective and integrated school health programmes using skills-based education and integrating oral health activities with other interventions;
- Improve access to affordable and appropriate fluorides through reduction of taxes and strengthening consumer protection by ensuring product quality; and to
- Improve capacities for screening and early detection of oral cancer, together with timely referral to specialist care.

To strengthen and improve the provision of oral health care

- Ensure equitable access to basic oral health care for all populations, even in remote locations, building on the principles of Primary Health Care and Universal Health Coverage and using innovative models of delivery of care;
- Make basic services as affordable as possible by reducing patient co-payments;
- Develop and support functioning referral pathways for advanced and specialist care within the primary health care system; and to
- Develop and support functioning regional and international referral pathways for specialist care that is not available on the national level.

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To strengthen and retain a skilled oral health workforce

- Strengthen the training of the different professions and specialists within the oral health workforce in the Pacific Islands Region as part of national and regional health workforce planning;
- Develop and offer on-the-job training for allied oral health workers with a standardised curriculum depending on country needs;
- Put in place effective professional regulations and institutions to safeguard the principles of professional conduct, to define roles and responsibilities and to ensure patient rights and protection;
- Encourage national accreditation schemes through mandatory continuing professional education of oral health professionals;
- Explore models of mutual recognition of programs and degrees to facilitate post-graduate education and specialisation; and to
- Balance staff retention incentives and measures to discourage international migration, while at the same time encouraging regional exchange to cover short-term workforce needs, in full respect for the right of free movement.

To strengthen surveillance, monitoring and evaluation of oral health

- Integrate oral health surveillance in general health surveillance mechanisms;
- Utilize existing survey tools for inclusion of oral health indicators, such as WHO STEPS surveys;
- Monitor and evaluate service performance, quality and effectiveness of oral health care services and programmes; and to
- Make existing data available in a timely and transparent manner so that they can be used for planning and service improvement.

To promote intersectoral and interprofessional collaboration and other partnerships

- Integration of oral health promotion and prevention in all relevant policies and programmes;
- Intensify interprofessional and intersectoral collaboration in order to address oral diseases and improve oral health in a holistic way, including the wider social determinants of health;
- Liaise closely with the World Health Organization at the regional and national level;
- Engage with the corporate sector in sustainable long-term partnerships aiming at improving oral and general health; and to
- Work closely with communities to design services and programmes that meet their needs.

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To foster regional co-operation and exchange

The Heads of Dental Services recognized that international and regional contexts present favourable opportunities for re-launching and strengthening oral health-related activities and emphasized their leadership role at country level. The participants agreed to join forces and to collectively engage with national, regional and international health authorities, professional organizations, universities and research institutes, governmental and non-governmental organizations, donor agencies, and communities in the process of advocating for better priority of oral health. To this end they established the Oral Health Pacific Islands Advisory Forum (OPIA) ³ and committed to

- Strengthen the Forum and to develop an organisational setup appropriate for the region;
- Continuously facilitate and coordinate regular exchange among Pacific Island Countries and Territories;
- Improve communication and access to support clinical, research and policy needs for all Pacific oral health professionals; and to
- Improve leadership skills, networking and cooperation among Heads of Dental Services.

Urge governments, WHO, professional organisations, NGOs and other stakeholders to:

- Recognize oral diseases equally with all other NCDs;
- Integrate and prioritise oral health in relevant national policies and programmes;
- Emphasize upstream policies and regulations to protect populations from risks to health and oral health;
- Ensure the provision of an appropriate workforce for oral health;
- Provide facilities, equipment and dental supplies that allow for equitable access to the best quality of care;
- Support evidence-based and cost-effective prevention and health promotion interventions;
- Ensure access to and affordability of fluorides for all populations through appropriate delivery modes; and to
- Support and strengthen regular and routine surveillance of oral health as part of general health surveillance to inform decision-making and planning.

Adopted by the participants of the *Pacific Islands Heads of Dental Services Meeting* in Suva, Fiji, on 27 August 2014.

¹ Countries and Territories represented: American Samoa, Cook Islands, Federated States of Micronesia, Fiji, Kiribati, Marshal Islands, Nauru, Niue, Samoa, Solomon Islands, Tonga, Tokelau, Tuvalu, Vanuatu. All other countries and territories of the region not present at the meeting are invited to join the Oral Health Pacific Islands Advisory Forum (OPIA) and to align themselves with this declaration

² Detailed disease-specific recommendations are outlined in the full meeting report

³ Members of the Interim Executive Committee: Chief Dental Officer American Samoa, Chief Dental Officer Fiji, Director Dental Services Solomon Islands, Chief Dental Officer Tonga; Head of Department Oral Health Fiji National University; Ex-officio members: Executive Secretary, Policy Adviser