

Suva Declaration on Improving Oral Health in the Pacific Islands Region

Background and context

Almost ten years after the adoption of the *Suva Declaration on Improving Oral Health in the Pacific Islands Region*, the Oral Health Pacific Alliance (OPIA), in collaboration with Fiji National University, the Pacific Community (SPC), and the World Health Organization (WHO), hosted the 6th meeting of heads of oral health services¹ and stakeholders² on the 17-20 July 2023 in Pacific Harbour, Fiji. The meeting participants from 13 countries and territories of the Pacific Islands Region welcomed and aligned themselves to the new international and regional momentum to address oral diseases and strengthen oral health systems; and commended the WHO for developing comprehensive global policy guidance aiming at Universal Health Coverage (UHC) for oral health by 2030. Delegates took note of the WHO Global Strategy on Oral Health³, the WHO Global Oral Health Action Plan (2023-2030)⁴ and its monitoring framework, as well as the WHO global and regional Oral Health Status Reports.⁵ They critically reviewed country and regional progress in addressing oral diseases since the last meeting in 2014; and discussed how the global oral health policy guidance and other emerging developments in the context of non-communicable diseases (NCDs) and UHC can support and strengthen national and regional responses to oral diseases.

After review of the 2014 *Suva Declaration*, participants confirmed that the key challenges identified are still relevant today. While some of the issues highlighted in the declaration have been addressed, others remain major barriers to improving population oral health and some have even been exacerbated due to the Covid-19 pandemic and natural disasters that particularly affected the region.

The participants therefore resolved:

- To re-endorse the *Suva Declaration* (2014) without major changes; and
- To accelerate action through commitments and recommendations on oral health for all regional countries and territories as well as for partners and OPIA.

¹ List of countries and territories represented: American Samoa, Cook Islands, Fiji, French Polynesia, Kiribati, Marshall Islands, Niue, Palau, Papua New Guinea, Samoa, Solomon Islands, Tonga, Vanuatu.

² Stakeholders represented: Australian Research Center for Population Oral Health (Australia), Medical Sailing Ministries (Australia), National Dental Directors (Australia), University of Sydney (Australia), Fiji Institute of Pacific Health Research (FIPHR, Fiji), Pacific Community (SPC, Fiji), WHO South Pacific Office (Fiji), Pasifika Dental Association (New Zealand), Youth With A Mission (New Zealand), Pacific Basin Dental Association (Palau), WHO Oral Health Programme (Switzerland), WHO Collaborating Center College of Dentistry, New York University (U.S.)

³ World Health Organization (WHO). Draft Global Strategy on Oral Health (WHO EB150/7 Annex 3). Available from: https://apps.who.int/gb/ebwha/pdf_files/EB150/B150_7-en.pdf.

⁴ World Health Organization (WHO). Draft Global Oral Health Action Plan (2023-2030). Available from: [https://www.who.int/publications/m/item/draft-global-oral-health-action-plan-\(2023-2030\)](https://www.who.int/publications/m/item/draft-global-oral-health-action-plan-(2023-2030)).

⁵ World Health Organization (WHO). Global Oral Health Status Report (2022). Available from: <https://www.who.int/team/noncommunicable-diseases/global-status-report-on-oral-health-2022>

Commitments for accelerated action on oral diseases

Participants agreed to focus on the six strategic objectives of the WHO Global Oral Health Action Plan (2023-2030) and, as heads of oral health services, committed to accelerate action on the following:

Strategic objective 1 – Governance

- Review existing or develop new national oral health policies integrated with relevant NCD and UHC planning frameworks by 2025;
- Focus on building and strengthening health service capacities to address oral diseases by expanding and broadening of the oral health workforce, fostering competencies in public health and planning, as well as leadership and succession planning.

Strategic objective 2 – Oral health promotion & prevention

- Advocate for inclusion of essential oral medicines in national essential medicines lists and to improve their affordability through appropriate measures, such as bulk purchasing and fiscal measures by 2030;
- Develop, review and evaluate new and existing community-based oral health promotion programmes along the life course, such as integrated mother-child health, school health, workplace, special needs and aged care, by 2025.

Strategic objective 3 – Oral health workforce

- Review the existing and establish new integrated national workforce plans that include the oral health workforce by 2025;
- Reconfirm and align with all measures outlined in the Suva Declaration related to oral health workforce and strengthen action on them.

Strategic objective 4 – Oral health care

- Advocate for countries to become parties of the Minamata Convention on Mercury and to develop a national plan to phase-out the use of dental amalgam by 2029;
- Commit digital health resources to strengthen oral health service delivery by 2025;
- Integrate essential oral health services as part of primary health care and Universal Health Coverage.

Strategic objective 5 – Oral health information

- Advocate for integration of oral health information in the Healthy Islands Monitoring Framework⁶.
- Reconfirm and align with all measures related to oral health information outlined in the Suva Declaration and strengthen action on them;

⁶ <https://pacificdata.org/topic/health>

Strategic objective 6 – Oral health research

- Strengthen research through pragmatic data collection, analysis, and impact evaluation of programmes and policies, and evidence-generation to inform decision making and planning at all levels;
- Develop national oral health research priorities and a plan on how to address them by 2025;
- Promote and seek research opportunities and partnerships to enhance regional research capacities and translation into action.

Recommendations for regional partners and OPIA

Participants requested regional health and development partners, including the World Health Organization, the Pacific Community (SPC) and others, to:

- Advocate for the establishment of a technical oral health focal point at the regional level (WHO/SPC) to coordinate and strengthen regional action;
- Include measures to improve prevention and control of oral diseases in current and future bi- or multilateral country cooperation agreements;
- Advocate for dental curriculum reform to eliminate the use of amalgam as a restorative filling material and teach the use of alternative non-mercury containing materials to enhance environmental sustainability of oral healthcare;
- Strengthen technical support, research capacities and policy guidance for oral health as part of NCDs and UHC; and aligned with the *Bridgetown Declaration on NCDs and Mental Health*⁷, agreed by the Small Island Developing States (SIDS) in June 2023.

Participants requested OPIA to:

- Ensure oral health input at the upcoming SPC Directors of Clinical Service Meeting (August 2023), and other relevant occasions, using the Suva Declaration as a basis;
- Urge Ministries of Health to use the Suva Declaration as a basis to raise the oral health agenda at the seventy-fourth session of the Regional Committee for the Western Pacific (16-20 October 2023, Manila, Philippines) and to consider a resolution on oral health in 2024;
- Thank His Excellency Ratu Wiliame Katonivere, President of the Republic of Fiji, for agreeing to be the patron of OPIA and to encourage him to champion oral health as a priority health matter in the region;
- Advocate and promote the oral health agenda outlined in all regional fora, including WHO, SPC and others;
- Monitor and report progress in implementing the WHO Global Oral Health Action Plan;
- Include high-level political representatives in upcoming OPIA meetings;
- Provide relevant training, mentoring, and continuing education opportunities in connection with future OPIA meetings;
- Lobby for a name change of FNU's College for Medicine, Nursing and Health Sciences to *College for Medicine, Dentistry, Nursing and Health Sciences*;
- Strengthen organization and institutional capacities of OPIA to effectively serve its members.

Participants resolved to report progress on these commitments at the next OPIA meeting in Port Vila, Vanuatu, in June 2025.

⁷ https://cdn.who.int/media/docs/default-source/ncds/sids-event/2023-bridgetown-declaration-on-ncds-and-mental-health.pdf?sfvrsn=5feda33f_11

The Heads of Dental Services of 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.

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 diseases

- Develop or strengthen national planning for oral health, aligned and integrated with national planning for prevention and controls of NCDs and Universal Health Coverage;
- 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.

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;
- Make existing data available in a timely and transparent manner so that they can be used for planning and service improvement; and to

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.

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 Alliance (OPIA) 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.

Reviewed and adopted by the participants of the *Pacific Islands Heads of Dental Services/Oral Health Pacific Islands Alliance (OPIA) Meeting* in Pacific Harbour, Fiji, on 20 July 2023.