

Point of Entry Designation

The Challenge for Pacific Island Countries



This Presentation



- Setting the scene – the Pacific Island Countries & Territories (PICs)
- A case study of one of the PICs
- IHR Core Capacity Building in the Pacific – there are Challenges
- Proportionality – the key to providing effective solutions
- But firstly

A Disclaimer of sorts

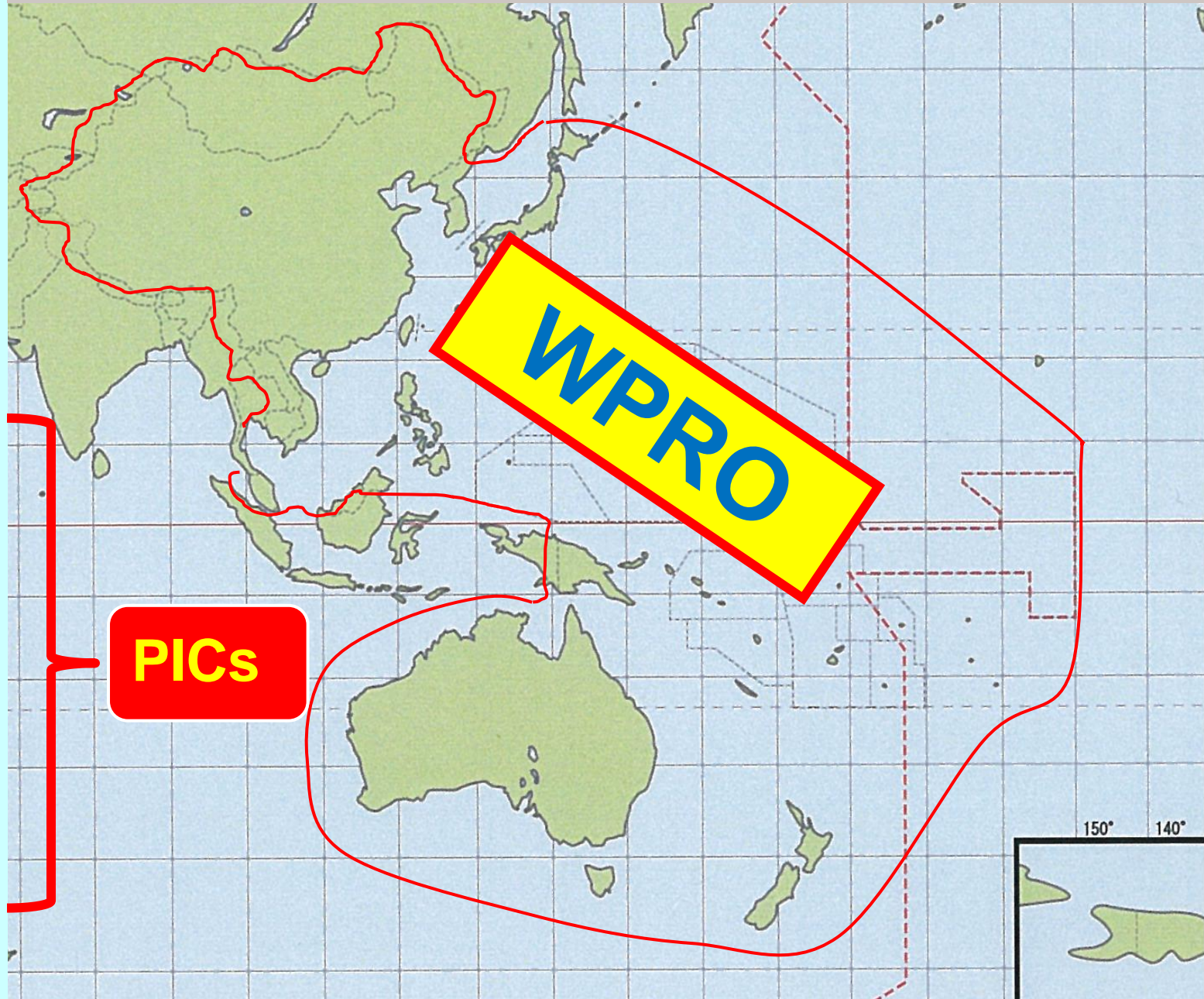
- I work for the New Zealand Ministry of Health
- On occasion I have been tasked by WPRO to assist countries with their Point of Entry core capacity building
- Today my comments are my own opinion not necessarily that of the NZ MOH or WPRO

Background

- WHO's Western Pacific Regional Office (WPRO) is responsible for one of the most diverse regions in the world, consider the disproportions amongst the states:
- Populations – States range from one billion to 1500
- Geography
- Governance structures
- Health Infrastructure development
- Economic Development
- Climate – Arctic to Tropical
- Cultural differences
- Endemic disease threats
- Environmental threats

WPRO MEMBER STATES

China
New Zealand
Australia
Philippines
Korea
Cambodia
LAO PDR
Viet Nam
Japan
Malaysia
Mongolia
Singapore
Brunei
Darussalam
Fiji
Samoa
Tonga
PNG
Vanuatu
Solomon Islands
Cook Islands
Kiribati
Marshall Islands
Micronesia
Tuvalu
Tokelau* (NZ)
American Samoa* (USA)
New Caledonia* (Fr)







A Case Study - Kiribati

- Small Population – no more than 120,000
- Very large territorial area of the Pacific Ocean
- Extreme distances between the islands
- Low economic base- income from remittances and foreign aid
- Two International Airports
- Government provides 85% of the paid employment
- Pollution Problems
- So many Health Challenges
- High STD rates
- Diabetes epidemic
- Hypertension
- Tuberculosis
- Gastro Enteric Outbreaks
- Alcohol abuse
- Smoking (54% addiction rate)
- Domestic Violence
- Cholera
- Arboviruses
- Life Expectancy 60
- High Infant Mortality rates



**Tarawa
(TRW)
Capital**

**Christmas
Island
(CXI)**

3000Km

The fine dashed lines shown thus ----- are only interpretations to assist the map user and do not purport to represent official boundaries.

2242Km

3457Km

**Nadi
(NAN)
FIJI**

**To get from Tarawa to
Christmas Island**





Kiribati – The Transport Infrastructure is limited

CHECK IN PASSENGERS ONLY

OUTWARD

Keep your
wallet with
you!

Entry by
Pass ONLY
A valid Pass
is required for
entry.

NEVER
Use a
Mobile
Phone
While
Driving

Get Your Kicks
On Route 66

21/1



23/12/2013

BONRIKI INTERNATIONAL AIRPORT



23/12/2013





The Health Infrastructure is Weak

- There are about 500 health workers, many of whom have no formal qualifications scattered throughout the islands
- There are 34 Physicians
- One Referral Hospital
- One ambulance
- There are very very limited resources available

Downside for many PICs

- Smaller scale – limited resources
- Tyranny of Distance
- Underdevelopment of health infrastructure which is burdened by:
 - Endemic communicable diseases
 - The NCD Crisis
- Legacy Legislation focusing on colonial quarantine rules
- Struggling to utilise over complex guidelines
- Being stressed to meet high international expectations

There is an Upside

- Tight knit and resilient communities
- Low Traffic Volumes
- End Point Destinations
- Absence of Ground crossings
- Less sophistication can mean greater robustness and flexibility
- External support from the “Big Brothers”, e.g.
 - Australia, NZ, USA, China, & France
- The Aviation Sector is more efficient than the other agencies/stakeholders

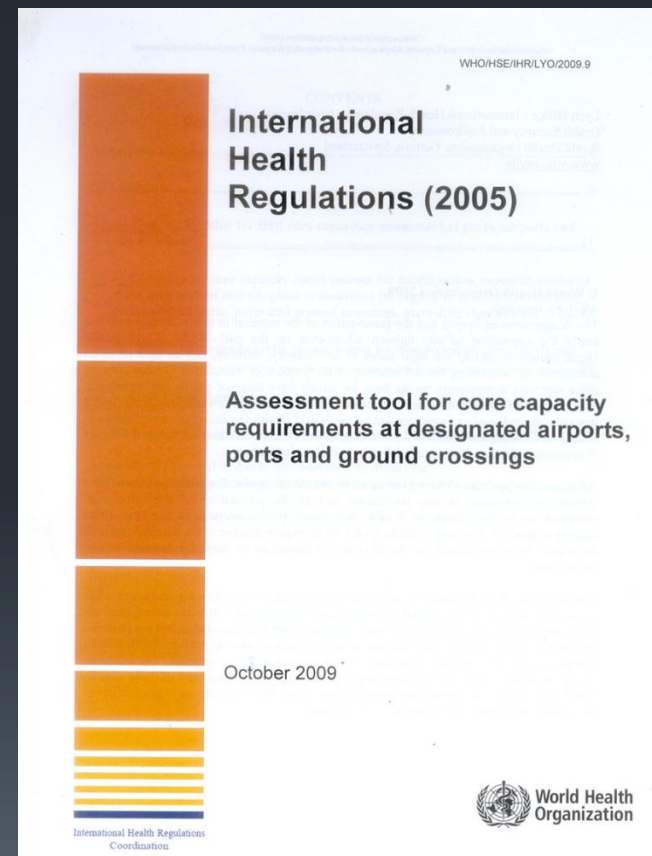
A Risk for the International Health Community



- Is not that the PICs will not achieve their POE core capacities; but
- That they will under-report their core capacity “gaps” and as a consequence
- The International Health Community will make incorrect assumptions as to the states core capacity development
- And therefore their ability to respond to Public Health Emergencies

One Size Does Not Fit All!!!

- PICs struggle to comply with Core Capacity building
- The WHO Assessment IHR Tool
- Too Complex
- Many Parts Irrelevant



Proportionality



- When developing the Border Health Management Strategy due care needs to be taken to ensure that the
- The limited resources that are available are allocated to be proportional to the risk. For example in a PIC
- What is the risk of a Chemical Event?
- What is the risk of a Radiological Event?
- What are the risks of Vectors of Human Health significance becoming established or exported?
- What are the pathological Risks – Endemic, Regionally & Internationally?

PICs must do the best that they can with the resources they have got



- **They will try to ensure that the traveling public will receive the medical support that any of their own citizen are entitled to – no more & no less**
- **They should strengthen their governance by developing effective response plans utilising the resources that they have and ensuring they test these plans**
- **They need to strengthen regional coordination; and**
- **They need to look to the Aviation Sector to provide support and Leadership**

Remember This



- Resources are wonderful and we would all like more of them however;
- If your organisation has:
 - Developed a good Plan
 - Has tested that Plan to ensure it will work
- If you have the confidence of your stakeholders
- If you have very strong leadership, then
- The impossible can become possible

What we must do



- Provide guidance and encouragement
- Assist with training
- Give them “workable” tools to use



The End