

# Solomon Islands



# Country Report: Solomon Island

- ▶ Promoting Healthy Communities through community Health Management and Empowerment

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# Greetings from Solomon Islands as one Nation - to RAM and Members today



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1. Geographical Map and general information of Solomon Islands
2. Location of Health Facilities in the Provinces
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- 6. Burden of disease attributable to leading risk factors**
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8. National Health Strategic Plan 2016 - 2020
9. Overview of Settings concept in SI
10. Intersectoral Collaboration for Prevention of Specific Health Problems
11. Current Success and our challenges

# Where is Solomon Island





# The People of the Happy Isles of Solomon Islands

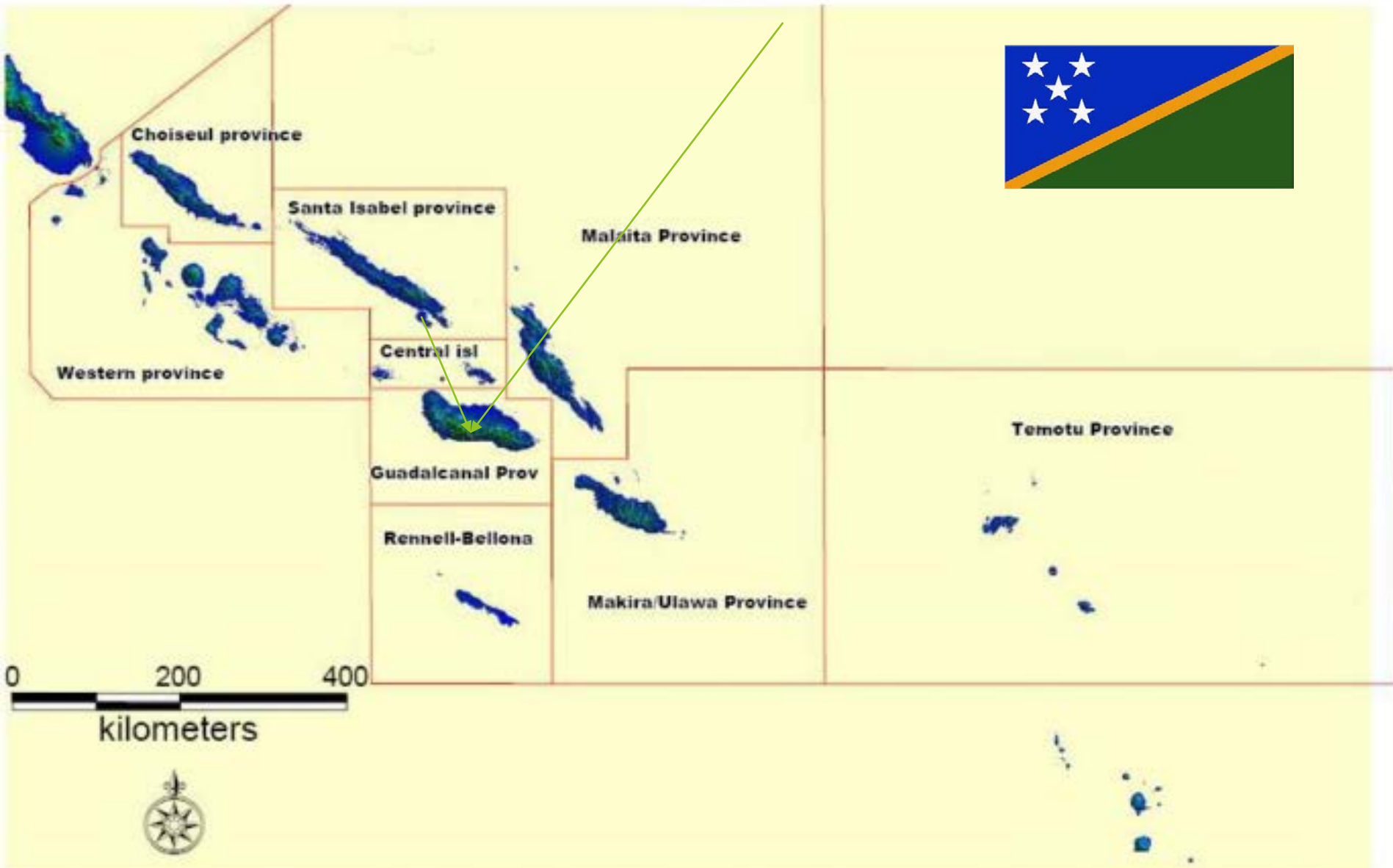




# Solomon Island is full of different Grown Cultures and values/norms

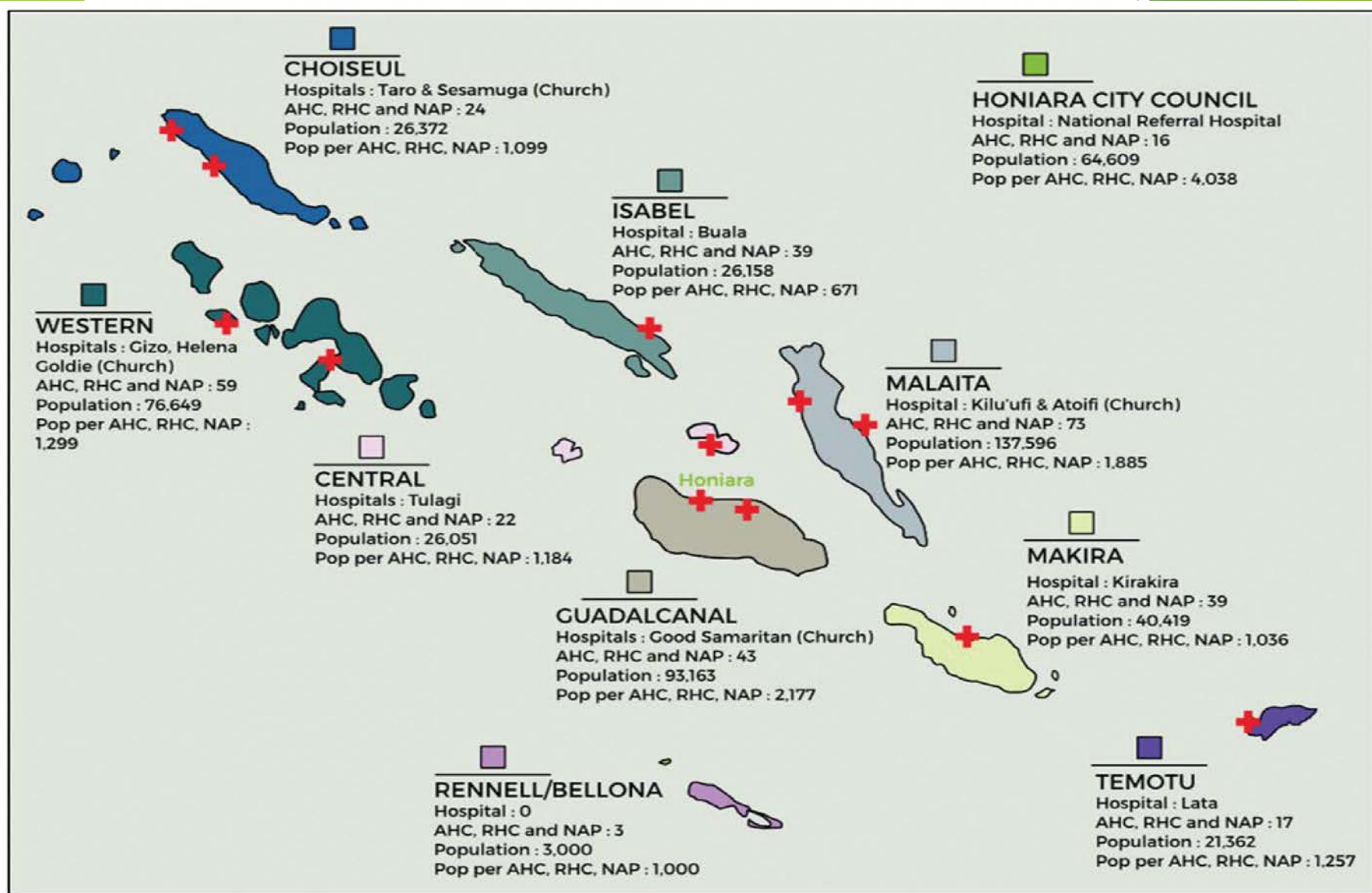


# Solomon Islands Provincial boundary Map: (Honiara)





# Solomon Island map of health facilities



# General Information



- Official name: Solomon Island

- Capital :- Honiara

Form of Government: Constitutional Monarchy with one legislative house (National Parliament with 50 Members)

- Head of state British Monarch Queen Elizabeth II.  
Represented by Governor General Sir. Frank Kabui

Head of Government: Hon. Manaseh Sogavare  
Opposition leader of the government: Hon.

# General information cont.

- ▶ - Monetary Unit - Solomon Island Dollar (SI \$)
- ▶ Population 658,000 2016 estimated -
- ▶ Total Area of Land (SQ KM) 28,370
- ▶ Life expectancy: Men 72 years - Female 77 years
- ▶ GNI per capita (USD \$) 2015 1,960.00
- ▶ Free Health Care services/ Private health clinics

# Fundamental Indicators of Health in Solomon Islands

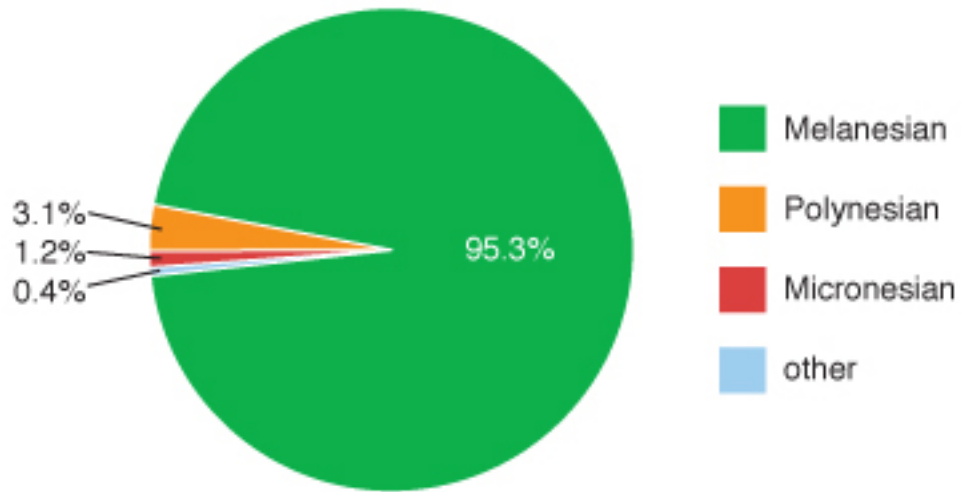
a) Population 515,870 - Growth rate: 3.2% (Classified by Sex and Age)

Age Group	Male	Female
0 - 4 years	39,881	36,619
5 - 9	36,945	34,126
10 - 14	32,540	29,352
15 - 19	26,168	25,003
20 - 24	22,369	23,002
25 - 29	20,774	21,872
30 - 34	18,795	18,777
35 - 39	17,005	16,136
40 - 44	12,070	11,564
45 - 49	10,186	9,523
50 - 54	7,494	6,836
55 - 59	6,110	5,674
60 - 64	4,532	4,379
65 - 69	3,691	3,325
70 - 74	2,402	2,295
75 - 79	1,784	1,590
80 - 84	799	725
85+	910	617
Total male and female	<b>264,455</b>	<b>251,415</b>
<b>Total Population</b>	<b>515, 870</b>	



## b. Ethnics in Solomon island

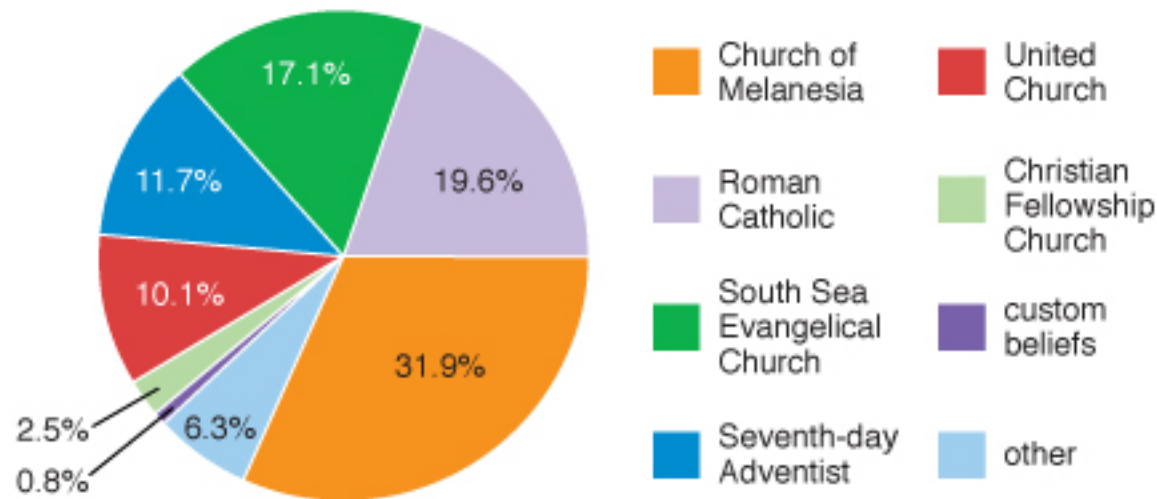
**Ethnic composition (2009)**





# C. Denominations- mainly Christians

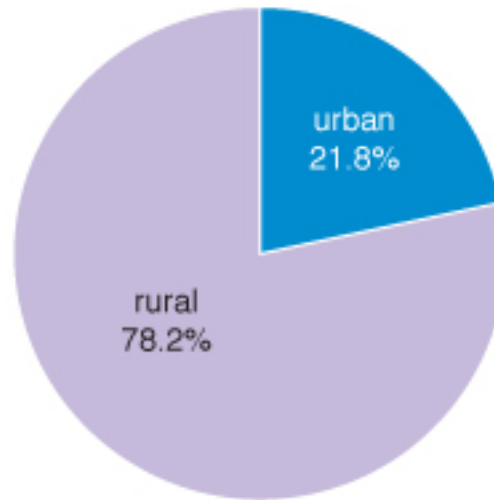
Religious affiliation (2009)





# d., Urban Compare to Rural Population

Urban-rural (2014)

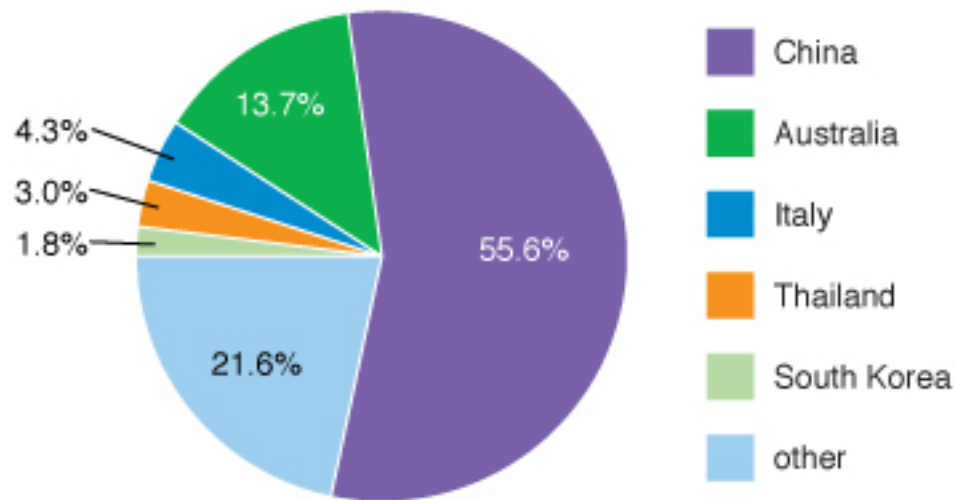




# Major export Products and destination

-Timber, Fish, Copra, cocoa and others

**Major export destinations (2013)**

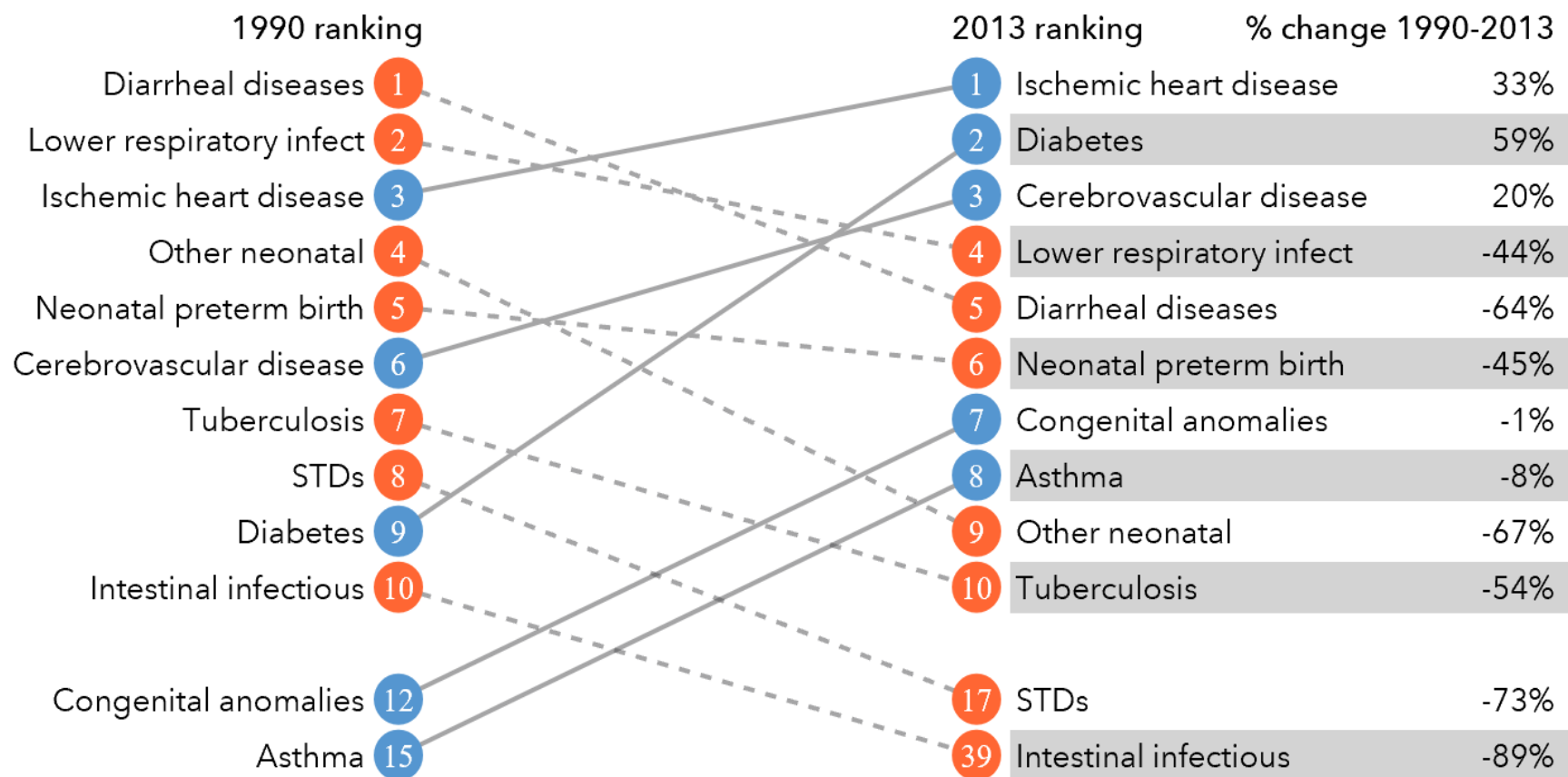




# Leading causes of YLLs to premature death, 1990 and 2013, and percent change, 1990-2013



- Communicable, maternal, neonatal, and nutritional diseases
- Non-communicable diseases
- Injuries



*12 leading causes of early death in the Solomon Islands. Diabetes and stroke are now the leading cause of death and disability in the Solomon Islands 2015*

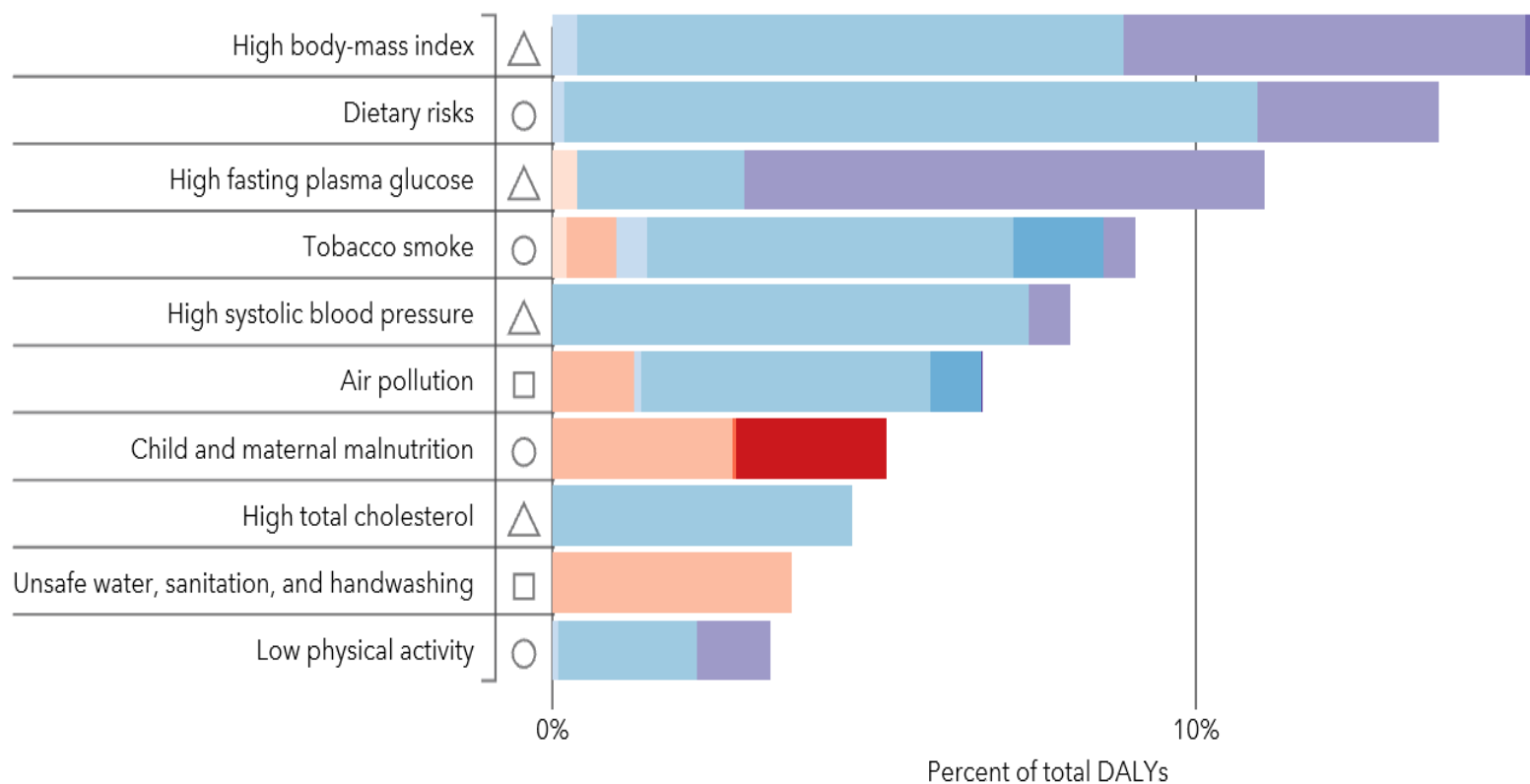


No	Causes of early deaths in Solomon islands	NUMBER OF YEARS OF LIFE LOST (YLL) PER % of Total
1	DIABETES	11,000 YLL (7.0%)
2	STROKE	10,000 YLL (6.6%)
3	LOWER RESPIRATORY INFECTIONS	10,000 YLL (6.4%)
4	ISCHEMIC HEART DISEASE	8,000 YLL (5.4%)
5	TUBERCULOSIS	6,000 YLL (3.6%)
6	PRETERM BIRTH COMPLICATIONS	5,000 YLL (3.5%)
7	DIARRHEAL DISEASES	5,000 YLL (3.0%)
8	MENINGITIS	3,000 YLL (2.1%)
9	ASTHMA	3,000 YLL (2.1%)
10	PROTEIN-ENERGY MALNUTRITION	4,000 YLL (2.2%)
11	NEONATAL ENCEPHALOPATHY	3,000 YLL (2.1%)
12	SELF-HARM	3,000 YLL (2.0%)

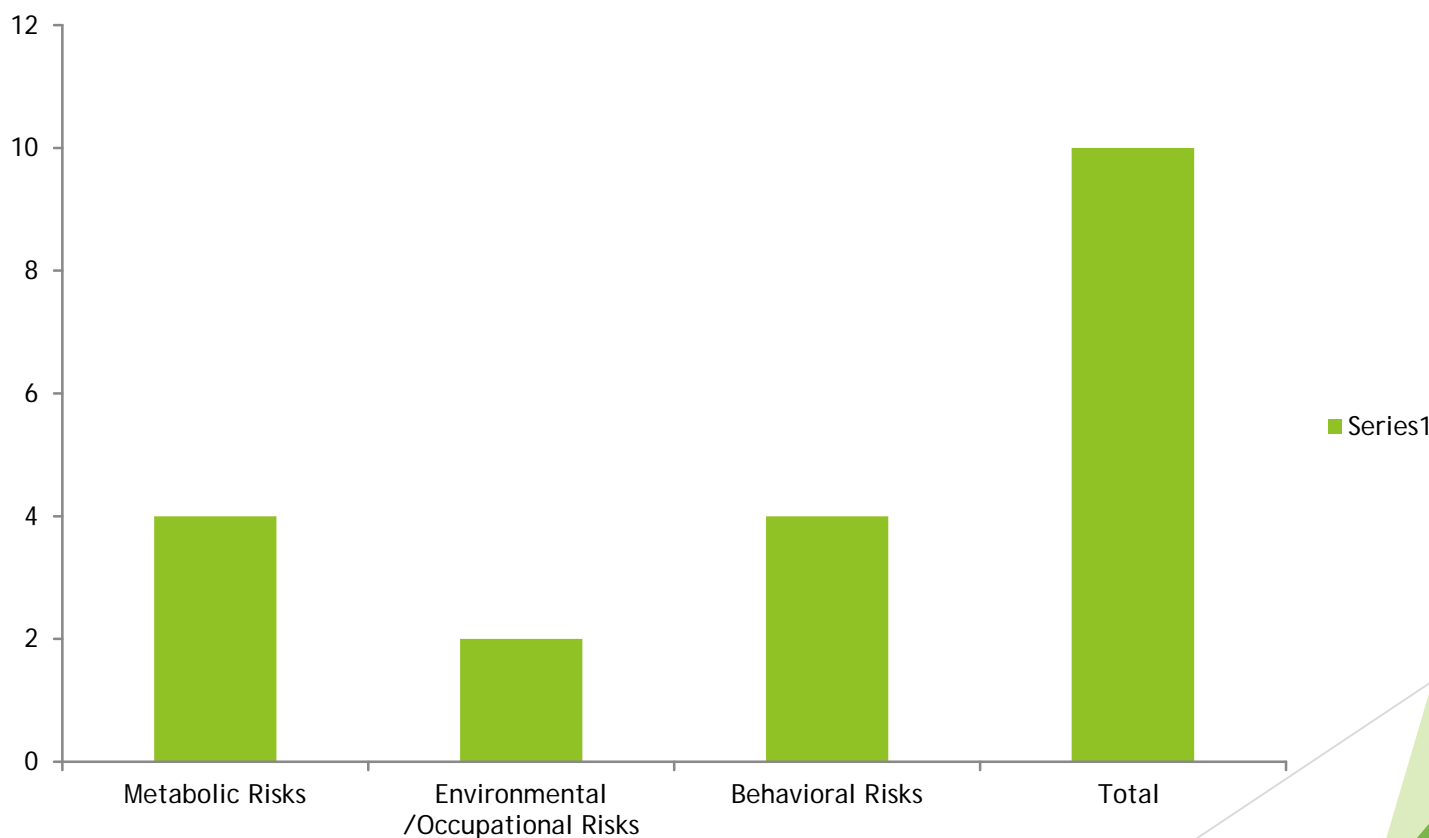
# Burden of disease attributable to leading risk factors, 2013



- △ Metabolic risks
- Environmental/occupational risks
- Behavioral risks

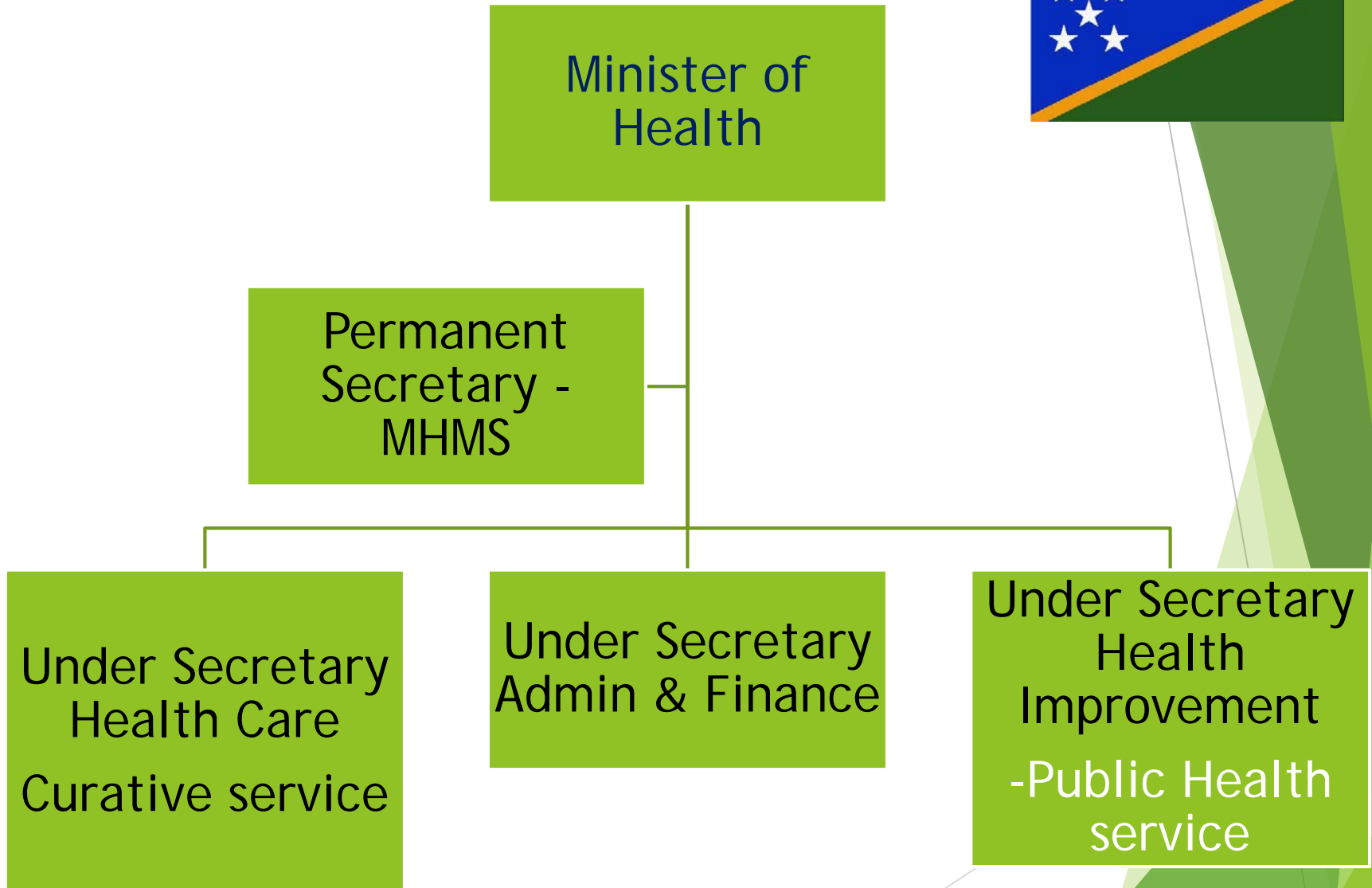


# The context of Risks to attributable disease burdens of YLLs in SI





# Structure of Ministry of Health & Medical services



## Referring system in Solomon Islands



1. Home to First Clinic ( Nurse Aid or Rural Health Clinic)
2. Rural Health Clinic to Area Health Centre
3. Area Health Centre to Provincial Hospital
4. Provincial Hospital to National Referral Hospital
5. NRH to St Vincent Hospital in Australia
6. Transports for referrals - OBMs/Ambulance, Aeroplanes, Helicopter.



# Solomon Islands National Health Strategic Plan 2016 - 2020

## Vision

► “The People of the Solomon Islands will be Healthy, Happy, and Productive!”

Mission: Enhance Health at all levels of communities through Partnership model.

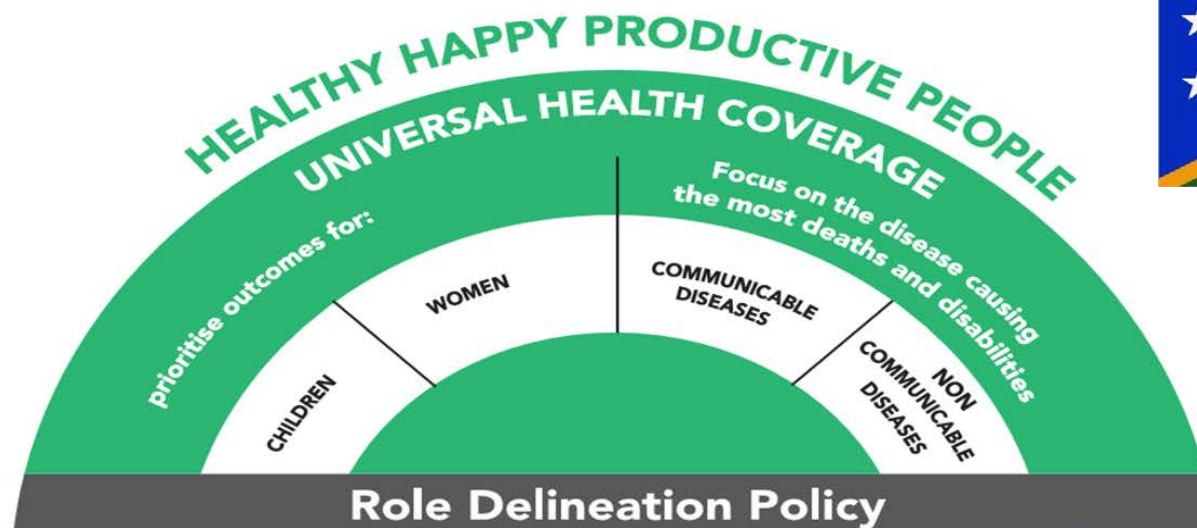
# SI - Regulations & Policies



- ▶ Alcohol regulation
- ▶ Tobacco Act control regulation
- ▶ Family protection acts
  
- ▶ Policies for all specific health programs/services  
-eg. RWASH Policy, Reproductive health, HIV AIDS, Social Welfare, disabilities Nutrition .
  
- ▶ Free health care to all people in Solomon Island
- ▶ Every people in SI have the right to health services



# National Health Strategic Plan 2016 - 2020



Improve Service Coverage	Build Strong Partnerships	Improve Service Quality	Lay the Foundations for the future
<ul style="list-style-type: none"> <li>• Give priority to the most effective interventions</li> <li>• Give priority to the most underserved areas and populations</li> <li>• Give priority to the diseases causing the most deaths and illness</li> </ul>	<ul style="list-style-type: none"> <li>• With the People through healthy Islands/ Villages/ families/Schools/workplaces</li> <li>• With Provincial Government and MPs</li> <li>• With other government departments</li> <li>• With donors</li> <li>• With Churches, NGOs and Private sector</li> <li>• Within the MHMS</li> </ul>	<ul style="list-style-type: none"> <li>• Safety: First do no harm</li> <li>• Effective: Make sure what we do is effective</li> <li>• Efficient: Make best use of resources – money, people, equipment</li> <li>• Make best use of interventions: Prevention, primary care, secondary care, tertiary care</li> <li>• People Centred: Place the people at the centre of all activities</li> <li>• Timely: Deliver the right intervention at the right time.</li> <li>• Equity Ensure health is enjoyed by all</li> </ul>	<ul style="list-style-type: none"> <li>• Build health infrastructure: Train and recruit the health workforce</li> <li>• Develop a sustainable financing mechanism</li> <li>• Build the information system</li> <li>• Prepare for disasters and climate change</li> <li>• Learn from each other</li> </ul>

# KRA 4 The Foundations for the Future.



The global focus on health development has been on the Millennium Development Goals, which:

- ▶ conclude as this planning period starts. Replacing them is the Sustainable Development Goals,
- ▶ which sets more stringent targets than the MDGs, and these are to be achieved by 2030.
- ▶ This KRA outlines activities required in the coming five years, which will help build the foundations that will enable us to attain the SDGs.

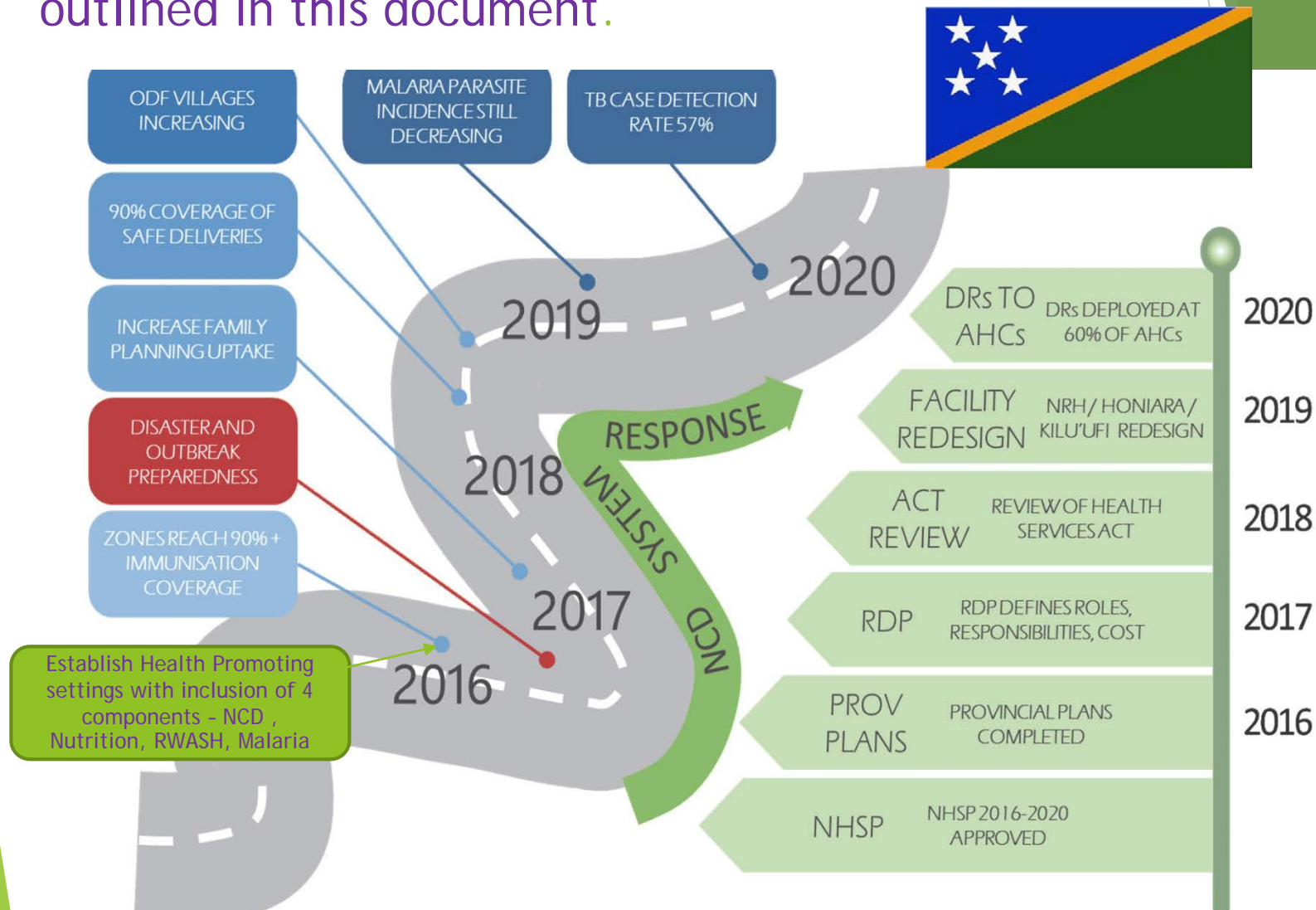
# What is Happening Now? Health Facilities & health workforce - 86 doctors, 1,931 health workers, each doctor -5998 - 2016

Of the 86 practicing doctors, 73 are at NRH, and the other 13 at provincial hospitals, Public Health officers.

Facility	National Referral Hospital	Provincial and Church Hospital	Area Health Centres	Rural health clinics	Community health centres
Number	1	12	27	115	190
No of staff	621 (73) doctors, Nurses, Public health/others	58.5 (13) doctors, Nurses, Public health	8.3 Only Nurses(No doctors)/public health	3.5 Only Nurses (No doctors)/public health	1.5 Only Nurses (No doctors)/public health
Total No of staff	621	643	216	402	135

# The Road Ahead

The “road ahead” is summarised in the diagram Above. Planning, policies, and indicators will support the KRAs outlined in this document.



## 16. Expected Outcome Statements 2020

1	Improved child survival particularly for disadvantaged, remote, hard to reach
2	Improved maternal health across all provinces, especially for high risk mothers and those in hard to reach communities up to 95%
3	Improved health and wellbeing of youth and adolescents 90%
4	Reduction in non communicable disease impacts by 30%
5	Reduced burden of communicable diseases 30%
6	Reduce environmental health hazards 90%
7	Improved health sector responsiveness to gender based violence 80%
8	All health services and facility are accessible to people with a disability .
9	Strengthen Partnerships
10	Strengthen Healthy Families and Villages 60%

# Expected out comes cont.- 2020

11	Achieve Universal Health Coverage 80%
12	Establish a culture of quality improvement
13	Strengthen health system
14	Relocation and devolvment of hospital and health services
15	Solomon Island health is prepare for disasters, outbreaks and emerging Population health issues
16	Strengthen and maintain health research and DHIS



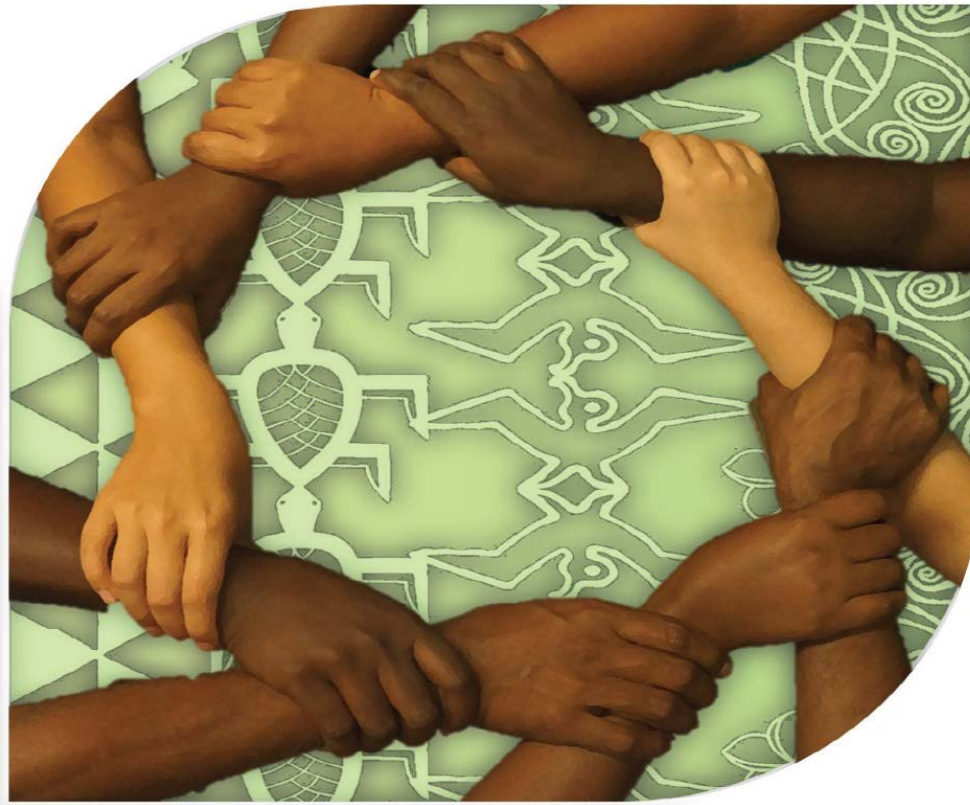
# Solomon Islands developed key result areas

- ▶ This plan has been developed with four KRAs that apply across the health sector. These have a strong implementation focus. All stakeholders, both inside and outside of government, are encouraged to follow these KRAs. The KRAs are designed to encourage working across the organisational siloes.
- ▶ Most parts of the sector have responsibilities across more than one KRA.
- ▶ The four key result areas are:

# KRA 1: Improve Service Coverage



## KRA 2: Build Strong Partnerships



# KRA3: Improve Service Quality

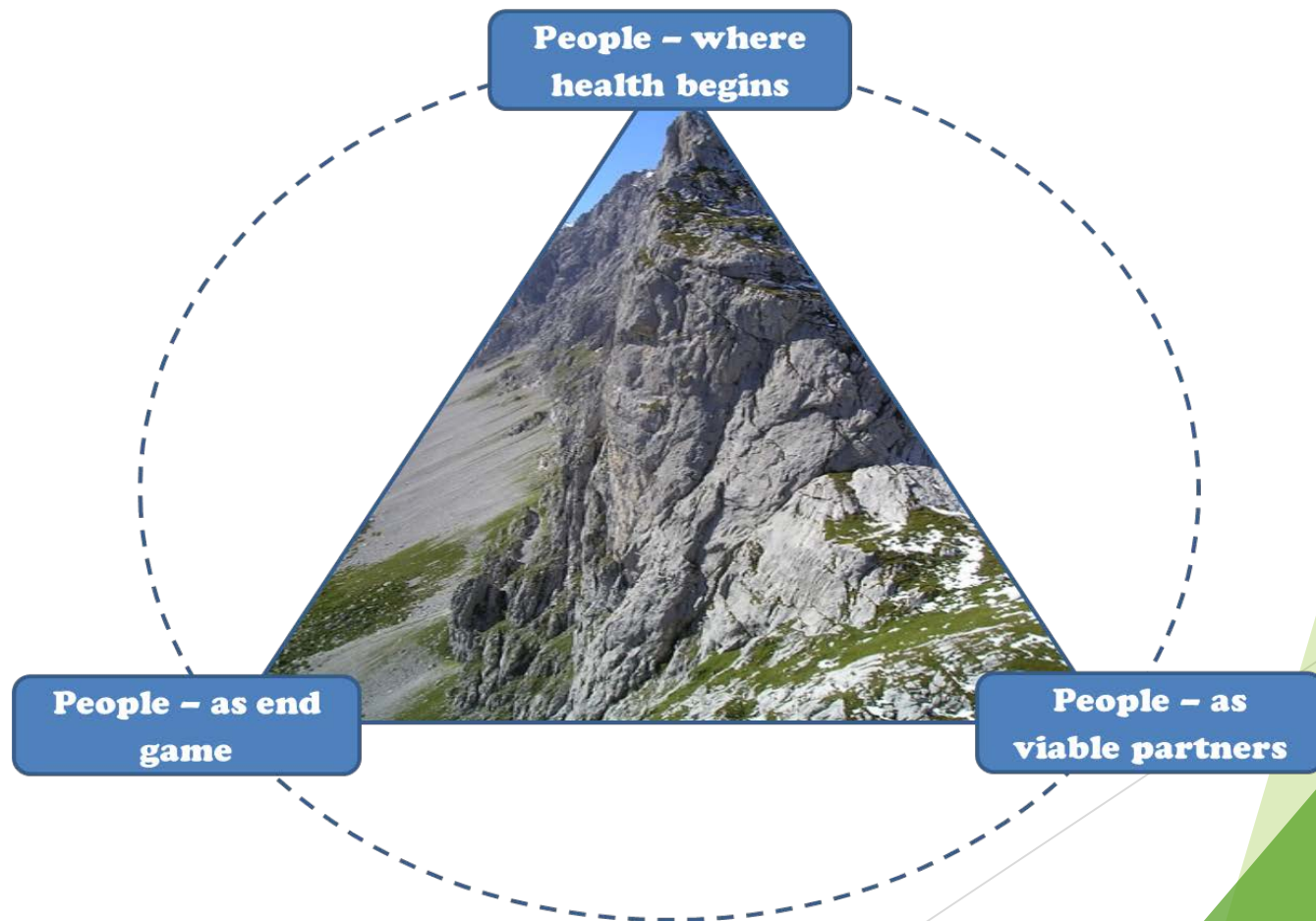




# KRA4: Lay the Foundation for the Future



# Inter-sectoral Collaboration for Prevention of Specific Health Problems





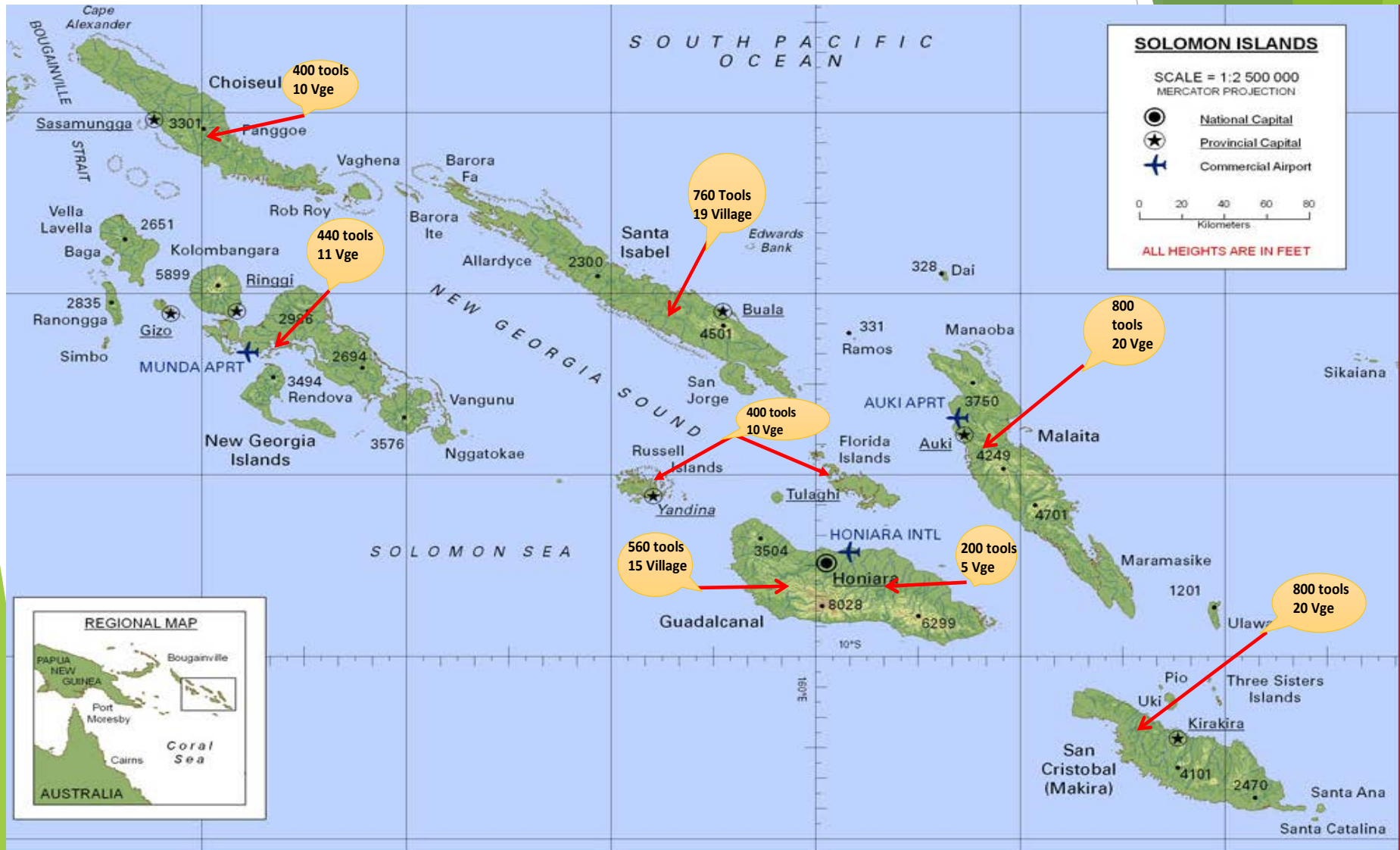
# Overview of Overall Action on Health – H-Settings as target entry points – To provide/Promote H- services in Communities – Solomon Island

- ▶ 1. Health Promoting Village in all provinces -  
HePV-Project  
MHMS/RAM - NGO's  
&  
Other Partners
- ▶ 2. Health Promoting Schools /institutions in all  
Provinces

# Current Successes

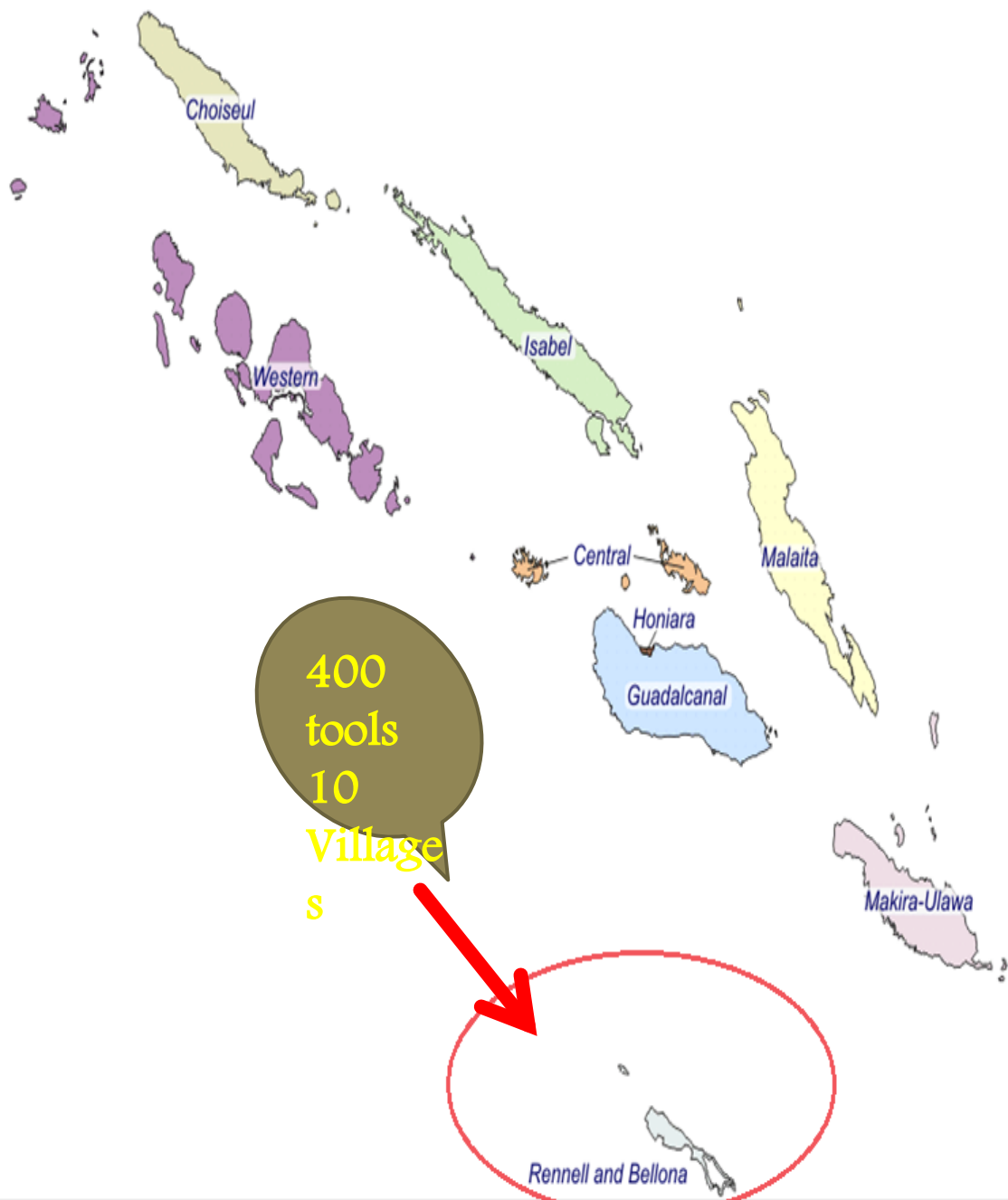
- ▶ The malaria and tuberculosis (TB) and other communicable diseases threats are decreasing.
- ▶ Most women when giving birth are attended by a skilled birth attendant.
- ▶ Also support services show improvement & 200 + village settings and more than 30 school settings established so far in SI.
- ▶ There has been improvement in supplies distribution, audit, financial control and health information systems.

# ROTARY TOOLS DISTRIBUTION IN SOLOMON ISLANDS 2017

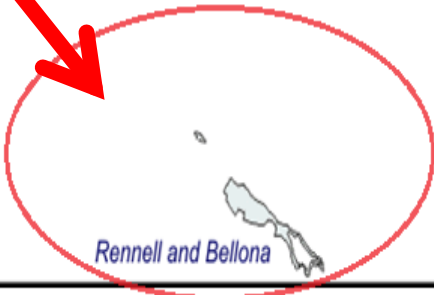


100 km

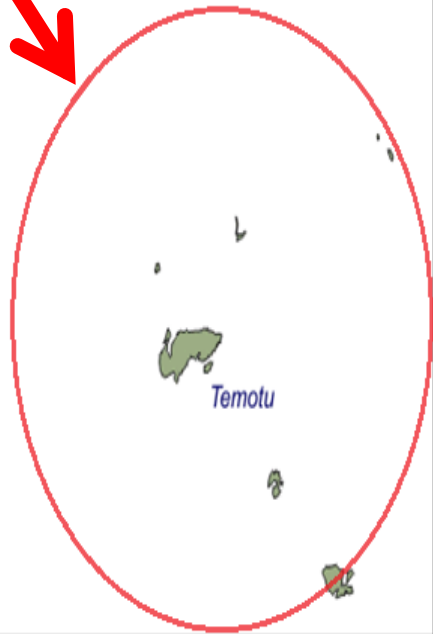
60 mi



400  
tools  
10  
Village  
s



400  
tools  
10  
Village



Temotu

# Challenges

- ▶ Provincial Health clinic facilities are manned by nurses only with no doctors
- ▶ Our rural areas host the most of our population needs human resources
- ▶ NCD's Crisis
- ▶ MHMS is the most largest allocated financial / expended ministry in our government for ( curative health) not public health
- ▶ Lowest sanitation coverage rate 13% (proper toilet facilities/practices)
- ▶ Scattered and geographical status of islands
- ▶ No permanent roads to reach far/mountain communities
- ▶ Accommodation, office space, Logistics and support equipment's to all provincial area health facilities (For Role Delineation Policy)
- ▶ Usual Out breaks during end and early starting of years - dengue, viral diarrhea, and other diseases like ( flue like illness etc).



# Thanks for your time.

- Greetings to you all from Solomon Island

