

Nauru Non Communicable Disease

Strategic Action Plan 2015-2020

June 2014

Table of Contents

Abbreviations	3
1. Introduction.....	4
2. Background information	4
3. NCD crisis in Nauru.....	5
4. NCD Action Plan and commitments.....	6
4. Implementation of the Nauru NCD strategic plan	7
5. Goal and objectives of this Action Plan.....	8
6. Action areas and activities	10
6.1. Improve leadership and governance for NCD prevention and control	10
6.2. Strengthen food security	12
6.3. Increase levels of physical activity	17
6.4 Strengthen Health systems to respond to the NCD crisis	20
6.5. Strengthen Tobacco control	23
6.6. Reduce harmful use of alcohol	Error! Bookmark not defined.
6.7 Strengthen and promote healthy settings	29
6.8 Improve monitoring and surveillance of NCDs.....	Error! Bookmark not defined.
7. References.....	32

Abbreviations

CIE	Ministry of Commerce, Industry and Environment
CRP	Crisis Response Plans
DALY	Disability Adjusted Life Year
DPHCW	District Primary Health Care Worker
DPS	WHO Division of Pacific Technical Support
EK	Epon Keramen (Community sport for development programme)
GBD	Global Burden of Disease
GON	Government of Nauru
GSHS	Global School-based Student Health Survey
MDG	Millennium Development Goals
MOH	Ministry of Health
NAQUA	Nauru Aquaculture Association
NNSDS	Nauru National Sustainable Development Strategy 2005-2025
NCBO	Nauru Community Based Organization
NCD	Noncommunicable disease
NGO	Non-governmental organisation
NTV	Nauru Television
PA	Physical Activity
PEN	Package of Essential NCD Intervention for Primary Health Care in Low Resource Settings
RON	Republic of Nauru Hospital
SPC	Secretariat of the Pacific Community
UNICEF	United Nations Children's Emergency Fund
USP	University of the South Pacific
WHO	World Health Organization

1. Introduction

The Pacific has been declared in a crisis due to noncommunicable diseases (NCD). The four main NCDs: cardiovascular disease, cancer, diabetes and chronic respiratory diseases, and their risk factors, pose a significant and growing burden on health and economic development of the region. Nauru is no exception. NCDs are having an increasingly devastating impact on the health of people in Nauru and are a barrier for achieving not only the health-related Millennium Development Goals (MDGs), but also the much broader 'Health Islands' vision.

This draft NCD Strategic Plan 2014-2020 has been developed through a multisectoral consultative process. In October 2013, the first multisectoral stakeholder consultation was conducted. The purpose of the consultation was to initiate the process of developing a Nauru NCD Strategic Plan 2014-2020. The consultation was attended by 28 participants of which the majority was from the health sector. Other participants included community leaders, sport representatives, education, church leaders and the media. The outputs from the consultation included a list of draft strategies and actions to be included in the Nauru NCD Strategic Plan 2014-2020.

In November 2013, the National NCD Committee met to review and amended, as appropriate, the draft strategies and actions proposed by the multisectoral NCD consultation. The Committee prepared a document with five strategies (food security, physical activity, health system, tobacco control and harmful use of alcohol) and 44 related actions.

In May 2014, a second multisectoral NCD strategic planning consultation was conducted with the purpose of finalizing the draft Nauru NCD Strategic plan 2014-2020.

2. Background information

Ministry of Health (MOH) is the sole provider of health care services in Nauru. MOH acknowledges that it is the right of every citizen of Nauru, irrespective of race, sex, colour, creed or socioeconomic status, to have access to a national health system that provides a quality, affordable health service, the principle function of which is to promote and maintain the health and well-being of the citizens of Nauru to the maximum extent possible with available resources.

MOH's goal is to provide quality health services that are accessible by all communities. In doing so, the MOH addresses its goal under four key result areas which are outlined in the MOH Strategic Plan 2010-2015:

1. Health systems strengthening:
2. Primary health care and health islands
3. Curative health
4. Support services and networking

NCDs and nutrition are addressed under key result area 2 of which the goal is to strengthen and improve community preventive and health care services under the principles and concepts of primary health care and healthy islands.

The MOH Strategic Plan 2010-2015 emphasizes on supporting and strengthening ongoing diagnostic, preventive and treatment services for diabetes, hypertension and cardiac diseases as well as ongoing activities against NCD risk factors particularly, tobacco and alcohol use reduction. For nutrition, the Plan emphasizes on supporting and strengthening ongoing school feeding programme; introducing and supporting the Baby Friendly Hospital initiative and promotion of exclusive breast feeding; as well as advocating for good family nutrition through home gardening and healthy food preparation.

The MOH Strategic Plan 2010-2015 is linked to the Nauru National Sustainable Development Strategy 2005-2025 (NNSDS) – Partnership for Quality of Life. The NNSDS highlights promotion of a preventative health focus in the public health system as a key strategy to achieve the vision and goals of the NNSDS. This includes provision of effective preventative health services reducing lifestyle related illness as well as a holistic (whole of government, whole of community) approach to public health and healthy lifestyles. The health-related goals of the NNSDS include:

- A strong institutional structure
- Improved health outcomes
- Skilled workforce serving all health needs
- Appropriate infrastructure required for quality healthcare delivery
- Coordinated sports program for all established

For each of the goals, short-term strategies as well as short-term; medium-term and long-term milestones are defined.

3. NCD crisis in Nauru

Nauru has one of the poorest health indicators for NCDs in the Pacific. For the purpose of this strategic plan, NCDs are defined as those diseases which are associated with lifestyle factors and are inter-related. Poor diet and physical inactivity have been exacerbated by the western affluence enjoyed by Nauruans over several decades.

NCD is the leading cause of mortality, morbidity and disability in Nauru. The main NCDs - ischaemic heart disease, complications of hypertension (including cerebrovascular disease), diabetes, kidney disease, and lower respiratory infection represent approximately 79% of all deaths on the island.

In 2006, Nauru's age-standardized mortality rate for NCDs was 1,132 per 100,000 population which ranks Nauru second in the world behind Afghanistan. The disability-adjusted life year (DALY) combines in a single measurement the time lived with a disability and the time lost due

to premature death. In 2002, Nauru recorded an estimated 19,949 DALYs lost due to NCDs per 100,000 (representing 75% of all DALYs) – the highest in the Pacific region. According to the Nauru NCD Risk Factors STEP Report, 2007 (based on data collected in 2004), the prevalence of NCD risk factors in Nauru is also among the highest in the world.

Table 1: Prevalence of NCD risk factors, 2004

Risk factor	Men	Women
Tobacco use	49.7%	56.0%
Binge alcohol consumption	29.8% of current drinkers	25.6% of current drinkers
Less than 5 serving of fruits and vegetable per day	93.8%	93.6%
Physical inactivity	14.3%	18.5%
Overweight (obesity)	82.1% (55.7%)	82.1% (60.5%)
High blood pressure	23.1%	11.5%
High cholesterol	14.9%	20.8%
Diabetes	16.1%	16.3%

Source: STEPS survey, 2004

The Global Burden of Disease (GBD) study 2010 ranked Nauru number one in the world (30.9%) in terms of prevalence of diabetes in the adult population (20-79 years). In 2030, it is expected that the prevalence rate will increase to 33.4% and Nauru will continue as the country with the highest diabetes prevalence in the world¹.

The Global School-based Student Health Survey (GSHS) of 13-15 years in Nauru 2011 identified a series of health concerns associated with unhealthy lifestyles and behaviours. This included 24.5% of boys who have drunk so much alcohol that they were really drunk at least one time in their life; 44.5% of the students (40.0% of boys and 48.9% of girls) were overweight; and 16.7% (17.8% of boys and 15.7% of girls) were obese. In addition, 22.1% (19.5% of boys and 24.5% of girls) of the student had smoked cigarettes one or more days during the last month and 61.8% of the students were exposed to secondhand smoke. In the area of mental health, 30.5% of the students had seriously considered attempting suicide.

4. NCD Action Plan and commitments

The NCD burden in Nauru is a primary threat to health and well-being of the country. The Government of Nauru is committed to address the NCD crisis through strategic and sustained actions that encompass primary prevention and immediate treatment and tertiary prevention for those with current disease.

The Nauru National NCD Action Plan 2007-2012 was developed through a consultative process in 2006 with contributions from Government departments and the community. The Plan was a guiding document for action to avoid premature death and reduce the disease burden from NCDs. The Plan focused on NCD risk factors including physical activity; alcohol; tobacco; nutrition; clinical management of diabetes, heart diseases, hypertension/stroke and obesity; as

¹ Baker IDI Heart and Diabetes Institute

well as integrated actions to improve coordination and collaboration in the area of NCD prevention and control.

The overall goal of the Plan was to avoid premature death and reduce the disease burden from NCDs in Nauru. Furthermore, the Action Plan outlines the following 3 specific objectives:

1. To reduce NCD related mortality by at least 2% by 2012
2. To improve NCD risk factor profile of the population
 - a. Reduce the prevalence of current smokers by at least 5%
 - b. Reduce the prevalence of binge drinking by at least 5%
 - c. Increase the proportion of the population eating 5 or more servings of fruit and vegetables by at least 5%
 - d. Increase the proportion of the population doing at least 30 min. of physical activity most days of the week by at least 10%
3. To reduce diabetes annual amputation rate by at least 10%

The baseline data used for the Action Plan was the WHO STEPS Report 2007. Monitoring and impact assessment has been limited and as the second STEPS survey is yet to be conducted, it is uncertain whether the objectives have been achieved. Anecdotal evidence and figures from the Republic of Nauru (RON) Hospital indicate that the objectives are unlikely to have been achieved. On the contrary, it seems that the situation may have even worsened within the last 8-10 years.

In order to assist countries and territories in the Pacific in prioritizing action to prevent and control NCDs, WHO Division of Pacific Technical Support (DPS) developed a framework for development of short-term (2 years) NCD Crisis Response Plans (CRP). The CRP builds on the WHO 'Best buys' for NCD prevention and control and outlines three areas of intervention (tobacco control, salt reduction and Package of Essential NCD interventions (PEN) implementation). The CRP for Nauru was developed in 2013-14 and outlines a series of strategies, milestones and actions for each of the three intervention areas.

Globally and regionally, some commitments for NCDs have been made. In 2013, the WHO 'Global action plan on the prevention and control of NCDs 2013-2020' was endorsed by the World Health Assembly and for the Western Pacific Region, WHO has launched its Western Pacific Regional Action Plan for the Prevention and Control of Non Communicable Diseases (2014–2020). The regional action plan is aligned with the global action plan and includes a menu of policy options for countries in the region to prevent and control NCDs. The plan also adopts the global target of a relative reduction in premature mortality from NCDs by 2025, along with nine other targets for NCD risk factors and health system's response. The plan encourages member states to develop national action plans and strategies for the prevention and control of NCDs and to adopt the global targets.

4. Implementation of the Nauru NCD strategic plan

The implementation of this NCD strategic plan for Nauru will require incorporation of action

arising from this plan into annual corporate plans and similar action plans by other sectors. NCD prevention and control is a multisectoral issue and addressing the NCD crisis requires collaboration and cooperation between sectors and between government agencies, NGOs and private sector stakeholders.

MOH will provide support as needed to assist with the operationalization of this plan in other ministries and sectors. Key strategies documented in this plan are expected to be reflected in the next MOH strategic plan as well as in other sectors' strategic plans and overall national development plans for the country.

Within MOH, the Public Health Division will take the lead in working with other concerned divisions; ministries; communities and NGO is the implementation of the plan and in integrating aspects and key strategies of the plan into other sector specific strategic plans and development frameworks. The Public Health division will also provide ongoing monitoring of the implementation of the plan as well as conduct annual reviews to monitor progress towards the goal and objectives identified in the plan.

For each strategy included in the plan, it is expected that the organizations listed under 'responsible stakeholder' will be responsible and take the lead in coordinating implementation of the listed actions.

5. Goal and objectives of this Action Plan

The overall goal of this national NCD action plan 2014-2020 is to reduce the burden of NCDs in Nauru

Based on the 2004 data presented in the Nauru NCD risk factors STEPS report 2007 and the GSHS for Nauru 2011, the overall objectives of this NCD action plan are to achieve the following targets by 2020. The global and Pacific targets for NCD prevention and control by 2025 are included as reference.

Table 2: Targets for risk factor reduction by 2020

Target	2020	2025 ²
Relative reduction of premature mortality from NCD	15%	25%
Relative reduction of harmful use of alcohol in adults	8%	10%
Relative reduction of binge drinking among adolescents	10%	n.a.
Relative reduction of physical inactivity	8%	10%

² Global and Pacific targets for NCD prevention and control

Relative reduction of salt/sodium intake	25%	30%
Less than 5 servings of fruits and vegetables per day	10%	n.a.
Relative reduction of tobacco use (adults)	50%	n.a.*
Relative reduction of tobacco use among adolescents	50%	n.a.*
Relative reduction of raised blood pressure	20%	25%
Increase of diabetes and obesity	0%	0%
Drug therapy and counselling coverage	45%	50%
Essential medicines and technologies coverage	75%	80%

* The Pacific target for tobacco use is “Tobacco Free Pacific” which is defined as a prevalence rate <5%

Applying the relative reduction targets for premature mortality and NCD risk factors to the prevalence rates defined in the 2007 NCD STEPS report, the target prevalence rates by 2020 are shown in Table 3:

Table 3: Target prevalence rates by 2020

Risk factor	Men	Women
Premature mortality from NCDs	61.6%	59.4%
Binge alcohol consumption (adults)	27.4% of current drinkers	23.6% of current drinkers
Binge alcohol consumption (adolescents)	22.0%	14.3%
Physical inactivity	13.2%	17.0%
Sodium intake*	n.a	n.a
Tobacco use (adolescents)	9.75%	12.3%
Tobacco use (adults)	25%	25%
Less than 5 serving of fruits and vegetable per day	84.4%	84.2%
Overweight (obesity)	82.1% (55.7%)	82.1% (60.5%)
High blood pressure	18.5%	9.2%
Diabetes	16.1%	16.3%

* The baseline for sodium intake will be established during the NCD STEPS survey planned for 2014

6. Action areas and activities

6.1. Improve leadership and governance for NCD prevention and control

Action Areas	Activities	Responsible stakeholders	Time frame	Budget				
				2015	2016	2017	2018	2019
Strengthen the high-level political commitment to address the NCD crisis	<ul style="list-style-type: none"> ▪ Declare Nauru in a NCD crisis ▪ Nationalize the nine global NCD targets and the Pacific target of ‘Tobacco free Pacific by 2025 ▪ Reactivate the healthy island council (HIC) and promote it to become a multisectoral NCD coordination committee. Develop the terms of reference of HIC accordingly ▪ Legislate for health impact assessments to be conducted for all new policies and legislation (health in all policy 	<ul style="list-style-type: none"> ▪ President ▪ Ministers /Cabinet ▪ Ministry of Justice ▪ Head of Departments 	By end of 2015					
			By end of 2016	\$34,000	\$20,000	\$20,000	\$20,000	\$20,000
			2016-2018					

	approach)							
Strengthening the governance of NCD prevention and control	<ul style="list-style-type: none"> ▪ Provide human and financial resources to strengthen and facilitate the work of Enforcement Officers ▪ Empower the HIC to take high-level decision in favour of NCD prevention and control ▪ Reactivate Nauru Diabetes Association ▪ Strengthen community leadership ▪ Policy Framework Development – M&E component for Public Health Bills 	<ul style="list-style-type: none"> ▪ President ▪ Minister of Finance ▪ Minister of Health ▪ Faith-based organizations ▪ Community & Youth representatives 	<p>Begin 2nd half of 2015</p> <p>Ongoing during 2015-2020</p>					

6.2. Strengthen food security³

Action Areas	Activities	Responsible stakeholders	Time frame	Budget				
				2015	2016	2017	2018	2019
Promote breast feeding	<ul style="list-style-type: none"> • Re-establish Baby Friendly Hospital Initiative Programme • Establish community support groups for breastfeeding • Conduct strategic health communication activities to: <ul style="list-style-type: none"> - Strengthen the awareness on importance of exclusive breastfeeding for the first 6 months - encourage breastfeeding up to 2 years of life 	<ul style="list-style-type: none"> ▪ Department of Health ▪ Maternity and ANC ▪ Public Health ▪ Nauru Community-based Organization (NCBO) 	2015 and ongoing	\$5,000	\$5,000	\$5,000	\$5,000	\$5,000
			By end 2016	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000
			2015 and ongoing		\$10,000			
Improve the quality and safety of food produced and consumed in schools	<ul style="list-style-type: none"> • Develop and implement a school food policy covering food produced, sold and consumed in schools 	<ul style="list-style-type: none"> ▪ Department of Health ▪ Department of Education 	2016		\$14,000			

³ The World Food Summit 2009 defined food security as existing when all people, at all times, have physical, social and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life.

	<ul style="list-style-type: none"> ▪ Provide guidance to canteen staff on healthy and safe food preparation ▪ Conduct regular inspections of school canteens and premises that prepare food for school canteens as a requirement of the Food Bill ▪ Monitor and evaluate the school feeding programme ▪ Provide guidance to food retailers and vendors on sale of healthy meal and snack options for school children ▪ Introduce a weekly fruit and water day in all schools ▪ Integrate vitamin supplementation and provision of school milk into school feeding programme ▪ Conduct an anaemia baseline survey among school children – NIMS Program ▪ Procurement of a vehicle for Food Safety programme 			<p>\$1,000</p> <p>\$1,000</p> <p>\$1,000</p> <p>\$20,000</p>	<p>\$1,000</p> <p>\$1,000</p> <p>\$20,000</p> <p>\$25,000</p>	<p>\$1,000</p> <p>\$1,000</p> <p>\$20,000</p>	<p>\$1,000</p> <p>\$1,000</p> <p>\$20,000</p>	<p>\$1,000</p> <p>\$1,000</p> <p>\$20,000</p>
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					\$20,000			
Increase consumption of fruits and vegetable	<ul style="list-style-type: none"> ▪ Establish or revitalize school gardens in all primary schools ▪ Explore opportunities for providing subsidies to imported fruits and vegetables (including frozen and canned) through collection of taxes on unhealthy food ▪ Encourage retailers to promote fresh fruits and vegetables ▪ Promote fresh fruits and vegetables as healthy snacks ▪ Develop Health Promoting Schools Initiative 	<ul style="list-style-type: none"> ▪ Department of Education ▪ Department of Finance ▪ Department of Foreign Affairs & Trade ▪ Department of Agriculture ▪ Department of Health ▪ Nauru Community-based Organization 	2015 and ongoing	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
			2016 and ongoing	\$3,000	\$3,000	\$10,000	\$10,000	
Strengthen the legal framework for food quality and safety	<ul style="list-style-type: none"> ▪ Integrate Pacific salt reduction targets into draft food regulations ▪ Include restrictions on marketing of food and non- 	<ul style="list-style-type: none"> ▪ Department of Health ▪ Department of Justice & Border Control ▪ Department of 	2015 - ongoing		\$14,000			

	<p>alcoholic beverages as well as breast milk substitutes into the draft food regulations</p> <ul style="list-style-type: none"> ▪ Include standards for food fortification and max. levels of fat in selected food products ▪ Include measures for mandatory nutrition facts labelling ▪ Implement measures to remove artificial transfat from the food supply ▪ Finalize and endorse the draft food regulations ▪ Strengthening enforcement on food regulations and standards 	Foreign Affairs & Trade						
Promote good health and nutrition	<ul style="list-style-type: none"> ▪ Implement strategic health communication in the promotion of healthy eating ▪ Work with food retailers on establishing and promoting healthy food corners ▪ Establish a demo kitchen to demonstrate healthy 	<ul style="list-style-type: none"> ▪ Department of Health ▪ Nauru Media ▪ Department of Women Affairs ▪ Community ▪ Taiwan Technical Mission 	2015 - ongoing	\$10,000	\$10,000		\$10,000	
					\$5,000	\$2,000	\$2,000	\$2,000
				\$10,000	\$3,000	\$3,000	\$3,000	\$3,000

	cooking practices							
Reduce population salt intake	<ul style="list-style-type: none"> ▪ Develop comprehensive salt reduction strategy ▪ Conduct strategic health communication activities around salt reduction including awareness raising and communication for behaviour change ▪ Implement policy measures for salt reduction ▪ Conduct salt baseline monitoring survey (STEPS Survey) 	<ul style="list-style-type: none"> ▪ Department of Health ▪ Customs and Border Control ▪ Department of Justice 	2015	\$10,000		\$10,000		\$10,000
Increase local food production	<ul style="list-style-type: none"> ▪ Expand existing aquaculture and agriculture establishments through technical guidance and seed money ▪ Provide technical support for establishment of small-scale livestock production ▪ Provide technical 	<ul style="list-style-type: none"> ▪ CIE ▪ Department of Health ▪ Nauru Rehabilitation Corporation ▪ Nauru Community-based Organization ▪ Taiwan Technical Mission ▪ Department of 	2015	\$20,000	\$20,000	\$20,000	\$20,000	\$20,000
					\$14,000		\$14,000	

	<ul style="list-style-type: none"> support and guidance for the establishment of home and community gardens Establish micro-financing system for establishment of small-scale food businesses 	<ul style="list-style-type: none"> Finance NAQUA 		\$14,000		\$14,000		\$14,000
Implement price incentives for health eating	<ul style="list-style-type: none"> Implement and/or raise taxes on processed food high in salt, sugar and fat Provide subsidies to fruits and vegetables Reactivate the Price Control Board and revise list of price controlled products 	<ul style="list-style-type: none"> Department of Finance Department of Health Department of Foreign Affairs & Trade Department of Justice 	2015	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

6.3. Increase levels of physical activity

Action Areas	Activities	Responsible stakeholders	Time frame	Budget				
				2015	2016	2017	2018	2019
Promote use of existing and new recreational areas	<ul style="list-style-type: none"> Provide shaded play areas in all schools in Nauru Open recreational areas in schools to be accessible and available for community use Support and facilitate construction of 	<ul style="list-style-type: none"> NCBO Department of Sports Department of Land Department of Education Department of Health Department of Home Affairs 	2015 On-going		20,000			
					25,000		10,000	

	<p>recreational areas, playgrounds, and parks in schools and communities including exercise stations</p> <ul style="list-style-type: none"> ▪ Improve existing sports facilities around the island 				15,000		15,000	
Create an enabling environment for physical activity	<ul style="list-style-type: none"> ▪ Strengthen enforcement for Dog control legislation ▪ Redo markings along Airstrip island road ▪ Repaint white line for road safety for pedestrians ▪ Initiate Taichi (low-impact exercise) for age above 50 in the community ▪ Increase the number of qualified exercise trainers in the communities ▪ Implement mandatory physical activity for all government departments e.g. Wednesdays from 	<ul style="list-style-type: none"> ▪ Department of Police ▪ Department of Sports ▪ Department of Health ▪ APSOP (Wild Dog Liaisons officers) ▪ Transport Department ▪ K 	2015		10,000	10,000	10,000	10,000
					5,000	5,000	5,000	5,000
					3,000	3,000	3,000	3,000
					20,000		20,000	
					5,000	5,000	5,000	5,000

	<ul style="list-style-type: none"> ▪ 3 – 5pm ▪ Introduce mandatory physical exercises during bingo sessions 							
Promote physical activity among all population groups	<ul style="list-style-type: none"> ▪ Promote Wednesday walks around the airstrip and uphill to the Nauru Phosphate corporation ▪ Promote physical activity programmes for disabled Persons and diabetics ▪ Implement strategic health communication on physical activity including promotion through media ▪ Revive and strengthen national aerobic competitions. ▪ Identify sports champions ▪ Send text messages to promote physical activity throughout the day 	<ul style="list-style-type: none"> ▪ Department of Sports ▪ Department of Health ▪ National Youth Council ▪ Media ▪ Sporting associations 	2015 and ongoing	1,200	3,000	3,000	3,000	3,000
					2,000	2,000	2,000	2,000
					10,000	10,000	10,000	10,000
					25,000	25,000	25,000	25,000
					4,500	4,500	4,500	4,500

	<ul style="list-style-type: none"> Continue the Department of Health's ongoing support to youth sports competitions 				5,000	5,000	5,000	5,000
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6.4 Strengthen Health systems to respond to the NCD crisis

Action Areas	Activities	Responsible stakeholders	Time frame	Budget				
				2015	2016	2017	2018	2019
Incorporate NCD interventions into health systems strengthening	<ul style="list-style-type: none"> Endorse the Public Health Bill (PHA) Ensure NCD included and integrated in PHA Strengthen the health workforce capacity to meet health promotion and protection and continuum of care requirements. Identify workforce capacity needs to provide curative, palliative and rehabilitative care Upgrade and strengthen the role and function of the Healthy Island Coordinator 	<ul style="list-style-type: none"> Department of Health Department of Education Department of Justice & Border Control Department of Foreign Affairs & Trade 	<p>By 2015</p> <p>Ongoing</p> <p>During 2015-2020</p> <p>By 2015</p> <p>By end of 2015</p> <p>Ongoing 2015-2020</p>		8,000	8,000	8,000	8,000

	<ul style="list-style-type: none"> ▪ Train Zone Nurses and the District primary Health Care Workers (DPHCW) on NCD risk assessment and risk factors ▪ Recruit an NCD physician specifically to manage NCD cases at RON hospital GOPD ▪ Provide training and capacity building among health care workers on NCD and research (e.g. through POLHN). ▪ Implement PEN in all health facilities 		By end of 2016		3,000				
			Ongoing 2015-2020	8,800	26,400	26,400	26,400	26,400	26,400
			Ongoing 2015-2020		15,000	15,000	15,000	15,000	15,000
Improve and sustain the continuum of care within health systems (service delivery)	<ul style="list-style-type: none"> ▪ Integrate clinical and public health prevention initiatives to enhance synergies and continuum of care ▪ Improve and sustain management of NCDs and Strengthen early 	<ul style="list-style-type: none"> ▪ Clinical services ▪ Public health ▪ Support services-physiotherapy ▪ Communities and support groups 	2015 On-going						

	<ul style="list-style-type: none"> ▪ detection ▪ Provide health screening for 14 years and above ▪ Ensure constant availability of consumables and medication supplies ▪ Improve laboratory and diagnostic services to cater for NCD ▪ Improve domiciliary and home-based care ▪ Assist in developing a Building Code Policy for easy access of people with disabilities to all public buildings ▪ Strengthen Monitoring and Evaluation processes age above 50 in the community 				5,000	5,000	5,000	5,000
					15,000	15,000	15,000	15,000
					14,000			
Analyse the health and economic impact of NCD crisis and improve efficiency in use	<ul style="list-style-type: none"> ▪ Conduct a study on the long and short-term economic impact of NCDs 	<ul style="list-style-type: none"> ▪ Department of Health ▪ Department of Finance ▪ Commerce, 	Complete study and report by early 2017		15,000	10,000		

of limited resources.	<ul style="list-style-type: none"> ▪ Identify options for reverting trend and cover for costs including establishment of health promotion foundation, trade measures and taxation policies ▪ Minimise wastage of health resources and improve patient compliance for NCD treatment and care 	<p>Industry and Environment</p> <ul style="list-style-type: none"> ▪ Planning and Bureau of Statistics ▪ Department of Justice 	<p>By 2016</p> <p>Ongoing 2015-2020</p>					
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6.5. Strengthen Tobacco control

Action Areas	Activities	Responsible stakeholders	Time frame	Budget				
				2015	2016	2017	2018	2019
Strengthen the legal framework for tobacco control	<ul style="list-style-type: none"> ▪ Review current legislation and/or develop new regulatory measures to strengthen tobacco control and align with Framework Convention for Tobacco Control (FCTC) ▪ Ensure inclusion of tobacco control 	<ul style="list-style-type: none"> ▪ Department of Health ▪ Department of Justice & Border Control ▪ Department of Foreign Affairs & Trade 	2015 On-going	2,000	2,000			

	<p>in Public Health Act</p> <ul style="list-style-type: none"> ▪ Introduce and continuously on a yearly basis increase taxes on tobacco by min. 20% ▪ Make all public places and buildings smoke free ▪ Ban tobacco advertisement and promotion ▪ Reduce the permitted quota for duty free tobacco by 50% 				4,000	4,000	4,000	4,000
Strengthen enforcement of tobacco control legislation	<ul style="list-style-type: none"> ▪ Enforce legislation on smoke free areas e.g. schools, health facilities, restaurants, entertainment centres ▪ Establish an Enforcement Unit ▪ Train Enforcement officers in tobacco control enforcement ▪ Establish community-based enforcement arrangements ▪ Empower 	<ul style="list-style-type: none"> ▪ Department of Health ▪ Department of Justice & Border Control ▪ Department of Foreign Affairs & Trade 	2015 On-going		2,000	2,000	2,000	2,000

	<p>community liaison officers to implement tobacco control measures in communities</p> <ul style="list-style-type: none"> ▪ Scale-up black-market raids ▪ Ban the importation of e-cigarettes 							
<p>Improve cessation services for tobacco use and alcohol abuse</p>	<ul style="list-style-type: none"> ▪ Develop a programme to help or assist with alcohol and tobacco abuse ▪ Recruit two officers (male & female) to facilitate the QUIT smoking programme ▪ Train community leaders & health workers (e.g. District Primary Health Care Workers) to implement cessation programmes through technical advice and funding ▪ Introduce youth friendly services and use of trained 	<ul style="list-style-type: none"> ▪ Department of Health ▪ Nauru Community-based Organization ▪ Members of Parliament ▪ Regional Processing Centre (RPC) ▪ Save the children 	<p>2015 On-going</p>		14,000	5,000	5,000	5,000

	peer educators to support community initiatives <ul style="list-style-type: none"> ▪ Identify high-level and community champions, sports champs to cessation of tobacco use 							
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6.6. Reduce harmful use of alcohol

Action Areas	Activities	Responsible stakeholders	Time frame	Budget				
				2015	2016	2017	2018	2019
Strengthening the legal framework for alcohol sale and consumption	<ul style="list-style-type: none"> ▪ Review existing legislative framework and identify opportunities for extending and updating legislation relating to alcohol sale and consumption ▪ Implement controls on alcohol licensing and marketing of alcohol ▪ Reduce the quota for duty free alcohol by 50% ▪ Implement yearly 	<ul style="list-style-type: none"> • Department of Health • Department of Justice & Border Control • Department of Foreign Affairs & Trade • Police 	2015 – ongoing					

	<ul style="list-style-type: none"> tax increases on alcohol by minimum 20% ▪ Establish alcohol free zones & activities • Strengthening regulations and penalties for drinking and driving 				5,000	5,000	5,000	5,000
Strengthen enforcement of alcohol legislation	<ul style="list-style-type: none"> ▪ Provide training, resources and equipment for enforcement officers ▪ Strengthen enforcement of legislation on alcohol sales after hours and under age purchasing ▪ Strengthen enforcement of concerned Motor Traffic Acts and Regulations ▪ Make bars and restaurants responsible for not serving alcohol to people who are drunk. 	<ul style="list-style-type: none"> ▪ Department of Health ▪ Department of Justice & Border Control ▪ Department of Foreign Affairs & Trade ▪ Nauru Police Force 	2015 – ongoing		14,000			
					3,000	3,000	3,000	3,000
Promote a conducive	<ul style="list-style-type: none"> ▪ Introduce school centered 	<ul style="list-style-type: none"> ▪ Department of Health 	2015 – ongoing					

<p>environment to reduce alcohol consumption</p>	<p>approaches to reduce alcohol consumption among minors</p> <ul style="list-style-type: none"> ▪ Establish alcohol free environments such as sports grounds, communities, schools and workplaces ▪ Organise alcohol free recreational activities for young people ▪ Organize alcohol free government functions ▪ Organize/scale up black market raids on alcohol 	<ul style="list-style-type: none"> ▪ Department of Education 						
<p>Strengthen the awareness of the health impact of tobacco use including e-cigarettes</p>	<ul style="list-style-type: none"> ▪ Inform about ways of quitting tobacco use & e-cigarette ▪ Provide information about the health impact of using e-cigarettes ▪ Engage with community and church leaders about informing about health risks associated with 	<ul style="list-style-type: none"> ▪ Department of Health ▪ Department of Home Affairs-family liaison officer ▪ Department of Education ▪ National youth council ▪ Department of youth 	<p>2014 – ongoing</p>					

	tobacco use							
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6.7 Strengthen and promote healthy settings

Action Areas	Activities	Responsible stakeholders	Time frame	Budget				
				2015	2016	2017	2018	2019
Implement programmes on health promoting workplaces	<ul style="list-style-type: none"> ▪ Train concerned Department of Health staff on aspects of health promoting workplaces and develop a programme for good health in the workplace ▪ Identify workplaces to participate in the programme incl. government workplaces ▪ Implement a healthy meetings policy for all government meetings, workshops and functions ▪ Develop and implement a healthy food policy for 	<ul style="list-style-type: none"> ▪ Ministry of Health ▪ Ministry of Labour ▪ Workplaces 	2015 – ongoing		5,000	5,000	5,000	5,000

	<ul style="list-style-type: none"> ▪ workplaces ▪ Implement mandatory physical activity sessions for all government staff 				3,000	3,000	3,000	3,000
Implement health promoting schools settings	<ul style="list-style-type: none"> ▪ Declare all schools smoke and alcohol free ▪ Develop healthy school food policy including canteen guidelines ▪ Revisit and improve the existing school feeding programme ▪ Increase the number of school-based sports tournaments ▪ Strengthen the school curriculum on health and NCD prevention in school curriculums 	<ul style="list-style-type: none"> ▪ Ministry of Health ▪ Department of Education ▪ Department of Sports 	2015 – ongoing		3,000	3,000	3,000	3,000
Implement a health promoting churches initiative	<ul style="list-style-type: none"> ▪ Declare all churches smoke and alcohol free ▪ Identify churches willing to participate in the initiative ▪ Develop a health promoting 	<ul style="list-style-type: none"> ▪ Department of Health ▪ Faith-based organizations ▪ Churches ▪ Department of Sports 	2015 – ongoing		2,000	2,000	2,000	2,000

	churches programme <ul style="list-style-type: none"> Develop and implement guidelines for healthy food in churches 							
Implement health promoting districts initiative	<ul style="list-style-type: none"> Organise district competitions on health promoting initiatives Identify a health promoting district Champion Establish alcohol and smoke free zones in districts 	<ul style="list-style-type: none"> District leaders Department of Health 	2015 – ongoing		10,000	10,000	10,000	10,000

6.8 Improve monitoring and surveillance of NCDs

Action Areas	Activities	Responsible stakeholders	Time frame	Budget				
				2015	2016	2017	2018	2019
Improve NCD risk factor surveillance	<ul style="list-style-type: none"> Conduct a STEPS survey in 2015 including the modules on salt and health systems Conduct GSHS in 2016 	<ul style="list-style-type: none"> Ministry of Health Ministry of Labour Workplaces 	Aug – Sept 2015 2016	300,000	10,000			
Strengthening health information systems and the	<ul style="list-style-type: none"> Improve the systems of civil registration and 	<ul style="list-style-type: none"> Department of Health Nauru Bureau 	2015					

use of information for policy and decision making	vital statistics ▪ Conduct training of doctors on cause of death certification and registration ▪ Improve record management system	of Statistics			1,000			
					5,000			

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- WHO ‘Global action plan on the prevention and control of NCDs 2013-2020’
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