

## **SSA Terms of Reference**

This consultancy is requested by:

Unit:	NCD Unit/Cook Islands Health Department- Te Marae Ora( TMO)
Division:	NCD/HSS- WHO Country Office Samoa

## 1. Purpose of the SSA

Non-communicable diseases (NCDs) pose a significant public health challenge, and TMO has prioritized the enhancement of promotional and preventative efforts, focusing on both primary and secondary prevention activities to mitigate and manage the incidence of NCDs. The NCD Coordinator is entrusted with the primary responsibility for this endeavour. This position will address the management of four prevalent non-communicable diseases – cardiovascular diseases, cancers, chronic respiratory diseases, and diabetes – along with the common risk factors such as tobacco use, alcohol abuse, unhealthy diet, physical inactivity, and environmental risk factors by:

- a. Raising awareness about the substantial impact of NCDs on the health of Cook Islanders.
- b. Disseminating information on NCD risk factors and prevention.
- c. Encouraging Cook Islanders to initiate positive changes to enhance their health.

The recruitment of an NCD Coordinator for a 12-month term underscores the critical significance of this role and that of TMO in spearheading and advocating for policies and actions to combat NCDs beyond the domain of the health sector. It is anticipated that this role will transition into a permanent position within the organizational structure of TMO.

## 2. Background

The vision of Te Marae Ora Ministry of Health is to enable all individuals living in the Cook Islands to lead healthier lives and achieve their aspirations. Non-communicable diseases (NCDs) have persisted as a significant challenge in the Cook Islands for many years, primarily stemming from unhealthy individual behaviours and dietary habits. These issues give rise to health risks, resulting in premature illnesses, fatalities, and long-term disabilities, persisting as a national concern and economic burden.

As of the June 2024 quarterly update on NCDs by the Te Marae Ora Ministry of Health, the percentage of deaths attributed to NCDs remains notably high, with rates of 69% in 2019, 79% in 2020, 83% in 2021, and 72% in 2022. One of the six targets in the Te Ara Akapapa'anga Nui NSDA 2020+ initiative, "Te Akapapa'anga Uki: One Generation: 25years," focuses on NCD reduction, aiming to decrease NCD rates by 25% from the 2020 levels. This objective is further detailed in the Te Kaveinga Iti 5-year scorecard goal 7, which aims to reduce the rate of premature deaths from NCDs.

The current health trends and threats indicate that the future health systems may face financial unsustainability, primarily due to the escalating burden of NCDs, which account for up to 75% of all deaths in the Pacific. This is exacerbated by limited access to healthcare services for many individuals due to cost or geographical constraints, increasing healthcare expenses, and continuous fiscal strain on economies.

The Te Marae Ora Ministry of Health recognizes that the primary health issue for the Cook Islands is the growing impact of NCDs. Data from 2019 revealed that 26% of premature deaths resulted from NCDs, with at least 50% attributed to cardiovascular disease, 27% to diabetes,



and 22% to cancers. The financial cost of NCDs was estimated to be between 5 and 8 million NZ dollars, with non-financial costs estimated at 11.7 million NZ dollars (Years of Life Lost).

The rise and prevalence of non-communicable diseases represent a global challenge. The World Health Organization has been dedicated to reducing NCDs since it first endorsed a global strategy and action in 2008. Various global forums, including the WHO global ministerial forum in Moscow in June 2011 and the High-Level Meeting of the United Nations in September 2011, have further emphasized the urgency for action in addressing NCDs, urging the Cook Islands to take proactive measures. The Ministers of Health of Pacific Islands also advocated for increased emphasis on combating NCDs at a meeting in Solomon Islands in June 2011.

Reducing the incidence of NCDs has become a primary focus of the Cook Islands Government, and consequently, the Te Marae Ora Ministry of Health has been tasked with prioritizing NCD prevention and management. The Seventy-third session of the Western Pacific Regional Committee in 2022 highlighted the recognition by Member States that primary health care is fundamental for building resilient health systems and achieving Universal Health Care.

The Te Marae Ora Ministry of Health is steadfastly committed to making progress in the fight against NCDs. This commitment has led to the necessity of engaging the services of an NCD Coordinator to be affiliated with the Primary Health Care Directorate.

### 3. Work to be performed

**Objective 1:** Strengthen advocacy, leadership, governance, and capacity within the Ministry and the community for NCD prevention and control.

- i. Take the lead to work with TA to develop a new National Action Plan to prevent and control NCDs 2025+.
- ii. Develop or strengthen national multi-sectoral policies and plans for NCD prevention and control including taking the lead to meet and provide regularly updates to the National NCD Taskforce
- iii. Work with Hospital and Primary Care team to finalize and adopt NCD guidelines;
- iv. Work with the Public Health Team (Health Promotion) to work towards achieving the targets set in the MANA Dashboard

**Objective 2:** Promote the benefits of a healthy population as major contributors to economic development.

- i. **Tobacco control:** Accelerate implementation of the WHO Framework Convention on Tobacco Control (FCTC) and its protocols
- ii. Reducing harm from alcohol prioritizing:
  - a. Work with Restrict access to retailed alcohol
  - b. Enforce bans on alcohol advertising
  - c. Raise taxes on alcohol
- iii. Monitoring and Evaluation of the implementation of work outstanding in the MANA Dashboard
  - a. Updating the Mana Dashboard
- iv. **Promoting healthy diet and physical activity** prioritizing:
  - a. Reduce salt intake
  - b. Replace trans-fat with polyunsaturated fat
  - c. Promote public awareness about diet



- d. Promote physical activity
- e. Create enabling environments through settings-based approaches: Implement and scaleup the healthy settings approaches (such as healthy islands/villages, workplaces, schools, etc.) to promote healthy behaviours.
- f. Strengthen community/mobile NCD clinics and "healthy villages".

**Objective 3:** Prevent and control NCDs through health systems strengthening using a primary health care approach and the *Te Kupenga* Model.

- i. Strengthen package of essential interventions for NCD (PEN), including appropriate referrals as part of universal health coverage.
- ii. Strengthen the role of hospitals and hospital referral systems in overall efforts to prevent and control NCD.
- iii. Take the lead role to review and develop clinical management guidelines, procedures and protocols including directory of wrap around services to support NCD patients;
- iv. Support appropriate staff to undertake capacity building and up-skilling to manage and treat NCD patients.
- v. Strengthen healthcare systems and services through improved coordination, collaboration and partnerships with community groups, national, regional and global institutions;
- vi. Produce power point presentations to aid training and education of staff/patient (including family members) in NCDs.
- vii. Work closely with the National Taskforce to establish mobile/community NCD clinic(s) aimed at early identification of at-risk patients and effective patient management.

**Objective 4:** Strengthen surveillance systems to monitor compliant and non-compliant patients, and to report reliable and timely data on mortality from NCD, adult and youth NCD risk factors.

- i. Coordinate surveillance and use data for action at local and national levels for NCD prevention and control.
- ii. Review current surveillance of NCDs in the country and ensure that this surveillance feeds into regional and international surveillance.
- iii. Monitor and evaluate prioritized activities in the Cook Islands National Strategy and Action Plan for Prevention and Control of NCDs.

## **Outcomes:**

- a) Develop a one-year plan with key milestones
- b) Review the clinical management guidelines for NCD patients.
- c) Report on the review the current services provided for NCD patients and make recommendations to improve service delivery.
- d) Reports on periodic surveys to measure and strengthen surveillance systems to monitor compliant and non-compliant patients.
- e) Promote the benefits of a healthy population as major contributors to economic development.
- f) Well established mobile/community NCD clinics promoting the "healthy islands initiative" objectives.
- g) Established or strengthened cancer registries and other NCD related registries.
- h) At least one community workshop carried out on how to read nutritional values on food packaging for healthy meal choices for family and patients
- i) New National Action plan to prevent and control NCDs 2025+;
- j) Increased community screening programs and develop early intervention plans;
- k) Increased presence of health promotion teams/health improvement teams and community health nurses amongst the community.



- I) Established registers for patients classified in the Te Kupenga Model
- m) At least 80% staff on Rarotonga trained on the PEN Guidelines;

# 4. Delivery and payment schedule:

The payment will be made according to the proposed schedule of deliverables below; the actual date, however, may vary depending on the most recent discussion with the supervisor:

## 5. Direct Technical Supervision

The selected SSA will work on the supervision of:

Responsible Officer:	Ms Kolisi Viki Alofaituli	Email:	vikik@who.int
Responsible Supervisor	Dr Kim Eva Dickson WR Samoa CO		dicksonk@who.int

## 6. Specific requirements

#### **Education:**

#### **Essential:**

Post Graduate Diploma in Family Medicine or in Non Communicable Diseases or Public Health

# **Desirable:** (for recruitment purposes)

Masters in Family Medicine in Non Communicable Diseases or Public Health

### **Experience:**

- i. Experience resulting in the knowledge and skills to perform as an NCD specialist.
- ii. A strong commitment to ongoing professional and personal learning with consistent motivation to achieve high quality results.
- iii. Proven ability to contribute and participate supportively in a multi-disciplinary team environment.
- Effective listening skills and verbal, non-verbal and written communication skills.
- v. Organisational ability to manage time effectively and meet deadlines.
- vi. The commitment to model professional behaviour and guide others to achieve high quality results.
- vii. A commitment to participate in the training and development of Registrars.
- viii. Be able to work productively and collegially with other members of the Clinical Department.

### **Knowledge and Skills:**

- i. Shows a caring but professional manner in all aspects of work and is aware of and sensitive to all cultural issues.
- ii. Time management skills and ability to effectively prioritise.
- iii. Demonstrates initiative and flexibility and is computer literate
- iv. Experience in providing professional advice
- v. Workforce planning experience, indicator and monitoring development skills.

#### Languages:

High level of written and spoken English is required.



# 7. Place of assignment

Cook Islands

## 8. Contract duration

January 2025-December 2025

## 9. Medical clearance

The selected Consultant will be expected to provide a medical certificate of fitness for work.

# 10. Travel

The SSA may travel within the Cook Islands depending on the request of TMO.

All **travel arrangements** will be made by WHO – WHO will not be responsible for tickets purchased by the Consultant without the express, prior authorization of WHO.

Visas requirements: it is the consultant's responsibility to fulfil **visa requirements** and ask for visa support letter(s) if needed.