
National Healthy Settings Policy



Ministry of Health and Medical Services, Solomon Islands

May 2021

Endorsement declaration

This is to officially declare that this National Healthy Settings Policy has been duly endorsed by the Ministry of Health and Medical Services to be used widely in all Provinces and Communities in the Solomon Islands. This document is liable for revision whenever deemed necessary.

19 May 2021



Ms. Pauline McNeil
Permanent Secretary
Ministry of Health and Medical Services
Solomon Islands

Introduction

This policy materialises the Healthy Settings of the National Health Promotion Policy of the Ministry of Health and Medical Services (MHMS), and overarches the Ministry’s specific elemental settings including: healthy village, school, marketplace and workplace settings.

The concept of healthy settings was born during the Ottawa Health Promotion Conference in 1986 and was adapted in Yanuca declaration in 1995. In the Solomon Islands the efforts began in 1998. The country piloted the approach in village and school settings and subsequently in market settings. Over 100 villages, 60 schools and 3 markets were embarked on healthy settings approach. These efforts accumulated sufficient experience and knowledge, and reached a point to be standardised and institutionalised as a national policy and implementation guideline. Institutionalisation will facilitate planning, partnership, coordination, expansion and continuation of the activities.

Healthy Settings approach addresses the most important determinants of health and lifestyle. Behaviours, attitude, practice, beliefs and surrounding environments increase or decrease risk levels of diseases, disorders and injuries. Healthy settings approach focuses on the sources of health problems in target places where people “learn, work, play and live”. In the Solomon Islands, adaptation of the settings approach in villages has shown remarkable impact by reducing the number of outpatient consultations and malaria incidences by 50 percent (%) or more.



The National Health Promotion Policy, the National Healthy Settings Policy and its components

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1. Policy Statement

1.1 Vision

“Healthy, happy and productive people”

1.2 Mission

“People enjoy learning, working, playing and living in peaceful and supportive environment which encourages community engagement and capacity development supported by public policies to promote health and wellbeing”

1.3 Scope

The Solomon Islands Healthy Settings Policy strategically focuses on health promotion, prevention and protection, thus addressing the key determinants of health. The National Health Promotion Department of the MHMS is mandated to make sure that the Healthy Settings program is implemented in all identified settings; including villages, marketplaces, schools, workplaces, facilities and towns.

This policy strengthens and encourages partnership and ties amongst all national and provincial Government Ministries, the United Nations agencies, international organisations, bi-lateral agencies, Non-Governmental Organisations (NGOs), Faith-Based Organisations (FBOs), Community-Based Organisations (CBOs), private sector, civil society organisations and individuals who are involved in the Healthy Settings initiative.

1.4 Purpose

This policy promotes all elemental healthy settings initiatives through the development of healthy public regulations and rules, creating supportive environment, empowering individuals, families, groups and communities. It will further strengthen partnership at national, provincial and community levels to coordinate sustainable resourcing, planning, implementation, monitoring and evaluation of the settings interventions.

1.5 Definition

The Solomon Islands Government adapts the World Health Organisation’s (WHO) definition of a “setting” as “the place or social context in which people engage in daily activities in which

environmental, organisational, and personal factors interact to affect health and wellbeing”.

In principle, healthy settings approach focuses on a place where people “learn, work, play and live”. For instance, villages, schools, marketplaces, workplaces, health facilities and towns. Other target settings identified by WHO include municipalities, homes, islands, prisons and ageing.

1.6 Governance

MHMS through the National Health Promotion Department is mandated to advocate, coordinate, provide technical support and facilitate resources.

The Provincial Health Promotion Department, Area Health Centres and Rural Health Centres are directly responsible for planning, implementation, monitoring and evaluation of the policy.

Effective leadership and commitment are required at the national and provincial level to implement and manage the Healthy Settings approach, integrating activities into the overall health planning, involving different stakeholders and coordinating resources and actions.

1.7 Partnership

Mechanisms including the National and Provincial Healthy Settings Coordinating Committees with wider representation, will be formed at the national and provincial levels to enhance effective collaboration and coordination among stakeholders including key government ministries, the United Nations agencies, international organisations, bi-lateral agencies, NGOs, FBOs, CBOs, private sector and civil society organisations. MHMS through the Health Promotion Department at national and provincial levels will organise the committee’s regular meetings and activities. Subcommittees shall be formed for specific elemental settings: village, school, marketplace and workplace. Taskforces may be formed when deemed necessary.

1.8 Related policies and legislation

The Mandate for this policy comes from global and regional declarations and local appropriate Act of Parliament and Regulations which can differ in each of the Settings. There also exist Provincial bi-laws and ordinances enacted by the Provincial Government. Furthermore, the policy also compliments existing National Health Strategic Plan and policies of MHMS in the

Solomon Islands. The Settings Policy will enhance Universal Health Coverage (UHC) as proposed in the National Health Strategic Plan 2016-2020/2021-2025 and the Role Delineation Policy 2018. Below are some of the global, regional declarations and national Health Policies and Plans:

- The Ottawa Charter for Health Promotion 1986
- Yanuca Healthy Islands Declaration 1995
- MHMS National Health Strategic Plan 2016-2020/2021-2025
- MHMS Role Delineation Policy 2018
- MHMS Rural Water Sanitation Hygiene (RWASH) Policy 2018
- MHMS National Health Promotion Policy 2021

The Ottawa Charter in 1986 defined “Health promotion as the process of enabling people to increase control over, and to improve their health. To reach a state of complete physical, mental and social well-being, an individual or group must be able to identify and to realise aspirations to satisfy needs and change or cope with the environment”. In 1995 the Pacific countries adopted the concept of the Healthy Islands which consists of 1) Children are nurtured in body and mind, 2) Environments invite learning and leisure, 3) People work and age with dignity, 4) Ecological balance is a source of pride, 5) The ocean which sustains us is protected.

MHMS developed the National Health Strategic Plan and Role Delineation Policy incorporating the Healthy Islands vision and specified the health promotion components in the National Health Promotion Policy and the National Healthy Settings Policy. The National Healthy Settings Policy is the overarching policy which encompasses the broad statements and frameworks of the elemental settings. Implementation guidelines and monitoring frameworks are developed to support the roll out of these elemental settings outlined as follows-

2. Healthy Village Setting Component

2.1 Introduction

In the Solomon Islands, about 77% of the population live in local traditional houses in over 5,000 villages. The living conditions in these village present health risks. Among the rural population, about 18% do not have access to safe drinking water and 87% still use bush and seaside as toilets. About 12% of children are malnourished. People still suffer from communicable diseases including diarrhoea and malaria. Non-communicable diseases (NCDs) such as diabetes, heart diseases and cancer are on the increase due to lifestyle changes such as poor diet, lack of physical activities, alcohol drinking, tobacco smoking and betel nut chewing. While the number of health centres increased, outreach by the local health service is limited. Therefore, it is important to promote prevention of diseases and promotion of health at the village level.

Poor living conditions and lifestyles in the villages contribute to persistent occurrence of health problems. Healthy village approach addresses these determinants of health by changing the environments and behaviours. This approach oriented by the local health services empowers community leadership, creates ownership and enhances community participation, so that these self-driven villages are able to promote and protect people's health.

In 1998, the Solomon Islands Government through the Ministry of Health and Medical Services had started rolling out the healthy settings approach developed from the Healthy Island Initiative in 1995. Since then, various provinces have implemented this approach in villages. The Ministry of Health and Medical Services, through this Healthy Village Settings, aims to address changes in determinants of health at the village level to improve the health of the population.

2.2 Vision

“Healthy, happy people living in a clean, peaceful and harmonious environment.”

2.3 Mission

People share interests and values, organise ideas and plans, cooperate with one another and with partners, to improve and support the community with strong leadership, regulations, continuous efforts and supportive environment.

2.4 Scope

The Ministry of Health and Medical Services (MHMS), will support implementation of the Healthy Village Setting in all villages throughout the country.

This Healthy Village Settings encourages all Government Ministries and partners including the United Nations (UN) agencies, bi-lateral agencies, Non-Governmental Organisations (NGOs), Faith-Based Organisations (FBOs), Community-Based Organisations (CBOs), private sector, communities and individuals, to work together to address the healthy village vision.

2.5 Purpose

The Healthy Village Settings promotes health and well-being of people in the villages by enhancing knowledge, informed decision making, positive environmental and behavioural changes. It encourages collaboration between stakeholders to formulate regulations, advocate healthy lifestyles, mobilise resources, empower the community, create sense of ownership and support active participation in healthy village activities.

2.6 Definition

A village - is a group of houses and associated buildings situated in a rural area. In the Solomon Islands context, a village sits on the ward within a constituency in the province. It is administered under the provincial government, the council of chiefs and the churches. Approximately 77% of Solomon Islanders rely on rural livelihoods of subsistence and small-scale commercial farming, forestry and fishing. Each village has cultural particularities in traditions depending on kinship, faith and clan ties. For example, land ownership is inherited by either male or female lineage.

A healthy village is a setting with individual, family and communal well-being, living in a peaceful, harmonious social environment. People experience access to safe drinking water, proper sanitation, organised committees, socio-economical and spiritual support, clean environment, no roaming animals, food security, physical activities, free from violence and substance abuse, basic healthcare services and low disease prevalence. A healthy village continually creates and improves those physical and social environments expanding community resources.

A healthy village - is a process of enabling people to take control of their own health and well-being with mutual support.

2.7 Governance

At the national level, MHMS through the National Health Promotion Department (NHPD) is mandated to advocate, coordinate, provide technical support and facilitate resources. The NHPD establishes the National Healthy Village Committee (NHVC) to oversee and support the implementation of this Policy. MHMS will work with the Ministry of Finance and Treasury (MOFT), other key Governmental Ministries and donor partners to develop a sustainable financial system. For instance, using dedicated taxes on unhealthy products (such as tobacco and alcohol, imported unhealthy foods) and other hazardous goods for promotion of healthy lifestyles.

The Provincial Health Promotion Department (PHPD) is directly responsible for coordination, planning, implementation, monitoring, evaluation and reporting. The PHPD is responsible for organising the Village Health Committee (VHC), to build effective mechanisms for collaboration and coordination with public and private sector, NGOs, FBOs, CBOs and Civil Society Organisations (CSOs) to create and support sustainable Healthy Village actions.

At the community level, Area Health Centres (AHC), Rural Health Centres (RHC) and the village leaders in collaboration with relevant stakeholders, plan, implement, monitor and report healthy village actions. The Health Centre staff organise and facilitate a village health committee, community profiling, training, action planning, implementation, monitoring, evaluation and reporting.

2.8 Partnership

MHMS and the Provincial Health Office through the Healthy Village committees shall strengthen mechanisms for effective collaboration, coordination and mainstream with public and private sectors, non-governmental and international organisations, Community-Based Organisations (CBOs) and civil societies for creating and sustaining healthy village settings activities in the country. MHMS will strengthen collaboration with Provincial Government through its Ward and Health structures (AHC/RHC) to create greater partnership and collaboration with community leaders to share expertise and resources to promote health and wellbeing of communities. Healthy village best practices will be promoted among neighbouring communities, stakeholders and partners at the provincial and national level through meetings and seminars.

2.9 Related policies, legislations and plans

The Mandate for this Healthy Village Settings is delegated in appropriate international and regional declarations and national government legislation and policies under the Healthy Settings Policies:

- Tobacco Control Act 2010
- Environmental Health Act 2016
- Pure Food Act 2016
- Food Safety and Agriculture Act 2016
- MHMS National Health Strategic Plan 2016-2020/2021-2025
- MHMS Role Delineation Policy 2018
- MHMS National Health Promotion Policy 2021
- MHMS National Healthy Settings Policy 2021

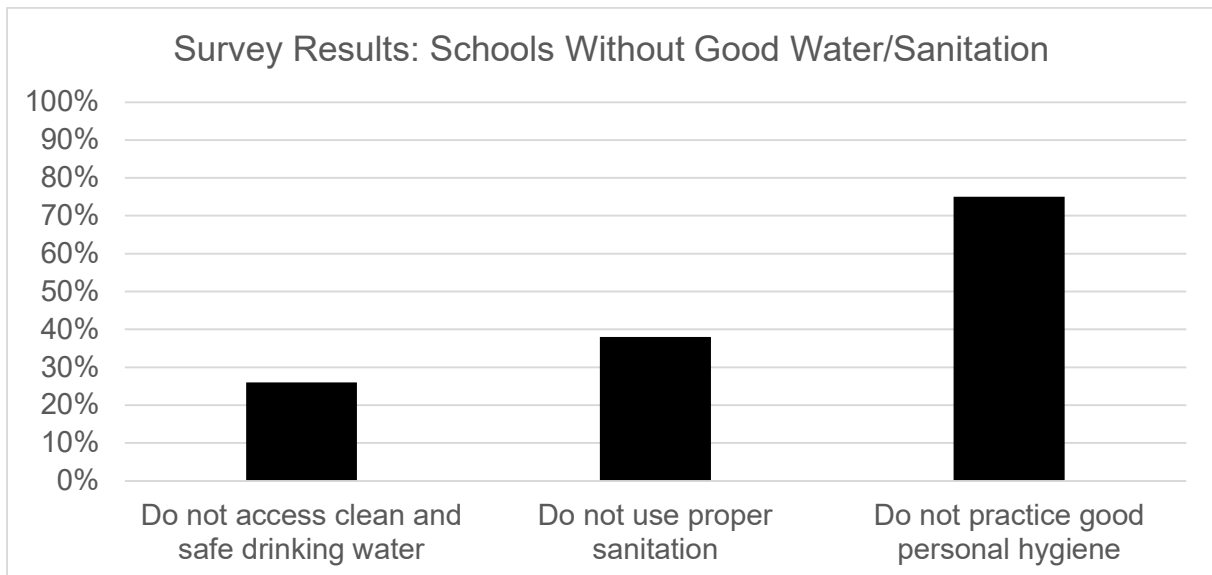
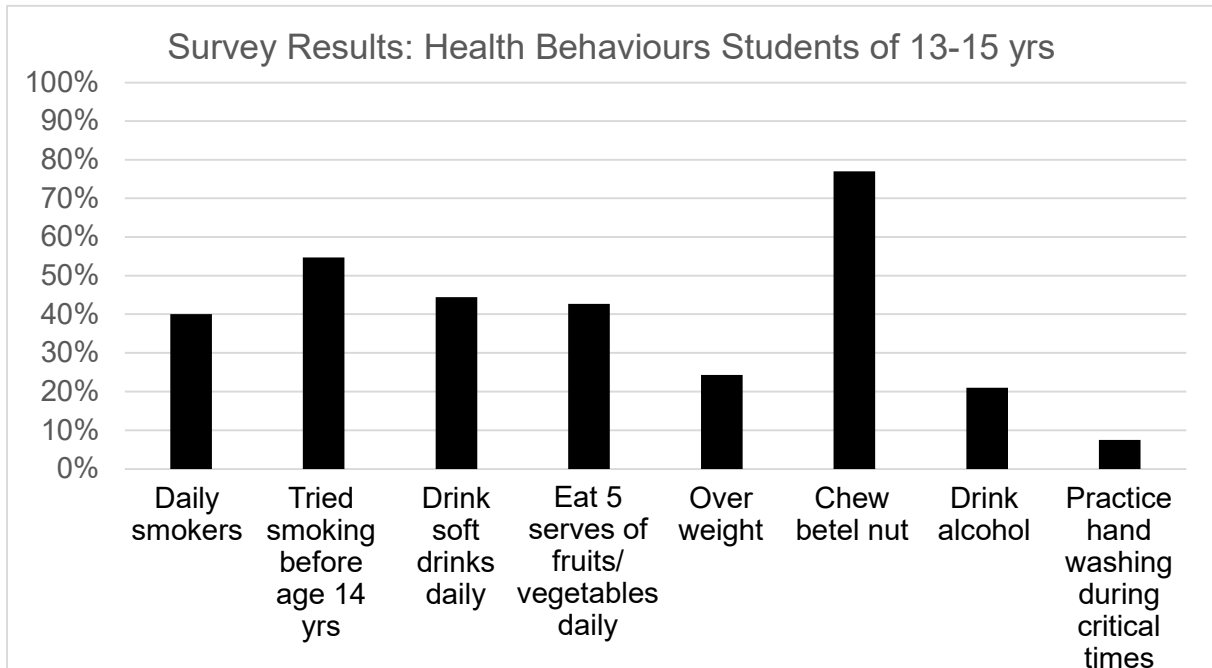
MHMS developed the National Health Strategic Plan (NHSP) and Role Delineation Policy (RDP) incorporating the Healthy Islands vision and specified the health promotion components in the National Health Promotion Policy and National Healthy Settings Policy. The Healthy Village Setting component of the National Healthy Settings Policy which will be supported with Provincial bi-laws and ordinances enacted by the Provincial Government.

The NHPD have made appropriate tools for the Healthy Village program available. They include an Implementation Guideline and a Progress Monitoring Framework to be used in the rollout of the Healthy Village Settings program in the country.

3. Health Promoting School Setting Component

3.1 Introduction

Global Youth Tobacco Survey (GYTS/2008) conducted in Solomon Islands have revealed the following indicators amongst learners in schools.



At present there are no school guidelines to regulate and control selling of unhealthy foods in school compounds including school canteens. Therefore, learners are susceptible to unhealthy behaviours, lifestyles and practices which potentially reduces quality of living in their later years.

In year 1998, Solomon Islands Government (SIG) developed a national health promoting school policy undersigned by three Ministries, Ministry of Health and Medical services (MHMS), Ministry of Education and Human Resources Development (MEHRD) and Ministry of Agriculture and Livestock (MAL). In 2012 a Memorandum of Understanding (MOU) was established between World Health Organisation (WHO), MHMS and MEHRD to further strengthen collaboration, coordination and implementation of HPS initiatives. At the moment 60 schools are implementing HPS initiative in the country.

The development of healthy promoting schools calls for an integrated and holistic approach where learners can be nurtured in body and mind, and environment invites learning and leisure. Developing healthy habits and skills, having adequate recreation facilities, safe drinking water as well as eat nutritious and healthy food, and receive adequate counselling and support. Such investment in schools is one of principle drives to realise the MHMS vision, healthy, happy and productive Solomon Islands.

3.2 Vision

“Empower learners, teachers, parents, guardians and stakeholders to constantly work together to achieve better and quality of health and education through established Healthy School.”

3.3 Mission

Create and promote an inclusive, supportive, safe, caring environment and discipline with opportunities to access proper sanitation, hygiene, nutritious food and other health services.

3.4 Scope

The Health Promoting School Settings in the policy will engage health and education officials, teachers, teachers' unions, learners, parents, guardians, school board, health providers and community leaders in efforts to make the school a healthy place.

The Solomon Islands Government aims to promote healthy environment, health education, and health services in all school settings from kindergartens, primary schools, secondary schools to universities in public and private sectors, including Technical Vocational Education Training, rural training centres (RTCs), and community base centres. These health promotion

activities include community organization canvassing projects and outreach, health promotion programs for school staff, nutrition and food safety programs, opportunities for physical education and recreation, and programs for counselling, social support and mental health.

Implementers of the Health Promoting School Settings will be the National and Provincial Health Promotion Department supported by key Health Programs in the Ministry of Health and Medical Services, the Ministry of Education and Human Resources Development, Education Authorities, Ministry of Agriculture and Live Stock, Ministry of Women, Youth, Children and Family Affairs, Nongovernment Organisations (NGOs) and Faith Based organisations (FBOs).

3.5 Purpose

The Health Promoting School Settings intends to nurture a positive learning attitude and behavioural environment through the formal and informal education, by enhancing the physical, mental, social, spiritual, economic and environmental aspects of health of learners and school staff, with support of families, community members, local health services, the Provincial Government and other stakeholders.

Active learners' participation in the formal curriculum and other mainstream system to develop a range of lifelong health related skills, knowledge and practices. This will also enhance equity in education and health in raising the health standard of learners in a school.

3.6 Definition

A "school" is a collective learning institute for different age groups, and purposes in both public and private sectors, including kindergartens, primary schools, secondary schools, rural or vocational training centres, technical institutes, community learning centres, colleges and universities, and special need (disabilities) schools.

A "healthy school" is a setting where learners benefit from a conducive learning environment with safe drinking water, proper sanitation, hygiene practices, nutritious foods, gender equality, equity and mutual respect. A healthy school is free from discrimination, violence, smoking, drinking alcohol, drug abuse, negative peer pressure and physical bullying. It provides health and physical education, counselling and supportive programs for learners and school staff, as well as training on health education for teachers.

3.7 Governance

The National Health Promotion Department (NHPD) and other departments in the Ministry of Health and Medical Services in collaboration with Education Authorities (EAs), are mandated to coordinate and implement this National Healthy School Policy, with the National Healthy School Coordinator (NHSC) based in the Ministry of Education and Human Resources Development. The NHSC in coordination with the National Healthy Settings Coordinator in the MHMS establishes the National Healthy School Coordinating Committee (NHSCC) involving key Government Ministries and stakeholders, including the School Authorities, the Ministry of Women, Youth, Children and Family Affairs, Ministry of Agriculture and Livestock, Honiara City Council and Faith-based Organisations. This committee will advise on the HPS program in the NHS policy and act as an advocate for Healthy Schools, coordinate activities, disseminate information, support and monitor program implementation.

A similar body “Provincial Healthy School Coordinating Committee (PHSCC) established at the provincial level will coordinate and monitor all Healthy School related activities in the provinces. Provincial healthy school networks will be established to encourage mutual learning, support and stimulus, as well as resource sharing and involvement of new schools.

Each school will establish a Healthy School Committee (HSC) to implement and sustain Healthy School activities, as well as to join the networks to benefit from learning opportunities and resources.

3.8 Partnership

Mechanisms including the National and Provincial Health Promoting School Committees with wider representation to be formed at the national and provincial levels, to enhance effective collaboration, coordination and sharing of expertise and resources to support HPS programs. Key government Ministries, including the MHMS, MEHRD, MAL and other interested international organizations, and School Authorities must be part of the committees. MHMS through the Health Promotion Department and the MEHRD at national and provincial levels to organise the Health Promoting School Committees and coordinate implementation of HPS program activities. Healthy promoting school best practices to be promoted to neighbouring schools, School Authorities, stakeholders and partners at national and provincial level through meetings and seminars.

3.9 Related policies, legislations and plans

The Mandate for the Health Promoting School Settings in the NHS policy is delegated in appropriate International and Regional Declarations and national government legislation and policies:

- National Health Promoting School Policy 1998
- MHMS School Tobacco Control Policy 2011
- MHMS National Health Strategic Plan 2016 -2020
- MHMS RWASH School Policy 2017
- MHMS Role Delineation Policy 2018
- MEHRD National Curriculum Policy 2018
- MEHRD National Health School Nutrition Policy 2019
- MAL National Food Security, Food Safety and Nutrition Policy 2016 -2020
- MHMS National Health Promotion Policy 2021
- MHMS National Healthy Settings Policy 2021

MHMS developed the National Health Strategic Plan (NHSP) 2016 -2020/2021-2025 and Role Delineation Policy (RDP) 2018 incorporating the Healthy Islands vision. The National Health Promotion Strategic Plan clearly mentioned Healthy setting as priority. The Health Promoting School Settings in the NHS policy was built on the Health Promoting School Policy produced in 1998 by the Solomon Islands Government and on the research and consultations by the Health Promotion Department of the Ministry of Health and Medical Services.

An implementation guideline and monitoring framework for the Health Promoting School Setting have been developed jointly by the National Health Promotion Department and the National Healthy School Coordinator (MEHRD) and this will guide the implementation and sustainable management of the HPS program.

4. Healthy Marketplace Setting Component

4.1 Introduction

A marketplace is a setting where vendors, consumers and visitors experience opportunities for healthy nutritious foods, economic activities and social interactions. If marketplaces are safe, hygienic and regulated, people are protected from health risks and engage in healthy market activities.

Marketplaces across the country operate without a structure, infrastructure and facilities such as a market house, tables to display food crops, food storage facilities, waste management, water supply or toilets. The formal markets operated under City Council or Provincial Market Authorities have some of these facilities but the informal markets do not. Often times these marketplaces also lack functional organisation and management. Such marketplaces increase health risks and hygiene issues as well as unpleasant and unfriendly atmospheres, which may trigger anti-social behaviours such as harassment and intimidation, thus affecting overall productivity of the population. Improvement in all marketplaces in the country will make a notable difference in people's health and market activities.

4.2 Vision

"People exchanging quality goods in a healthy, clean and safe marketplace".

4.3 Mission

All market authorities, organisers, managers, vendors, consumers and visitors jointly implement and comply with policies fostering a friendly environment, systems and culture to promote exchange of quality and healthy products in a secure, safe and clean market environment.

4.4 Scope

This Healthy Marketplace Settings in the NHS policy will enhance the rollout of healthy market settings at national, provincial and community level. The National and Provincial Health Promotion Department and key stakeholders will collaborate with the City Council and Provincial Market Authorities to strengthen the structures and mechanisms to make sure that

the healthy market programs are effectively implemented in formal and informal markets in towns, villages, settlements and schools.

4.5 Purpose

This Healthy Marketplace Settings intends to guide the market authorities and organisers at the national, provincial and community level to improve the current market situations. The Healthy Marketplace Setting aims to create a healthy supportive environment for all vendors, consumers and visitors selling and buying of healthy foods and goods as well as to promote healthy environment and behaviour.

4.6 Definitions

A marketplace is a setting where people gather for purchase and sale of varieties of foods and goods. In our context, larger markets in the capital city and provincial towns are regulated by City Council or Provincial Government Authority. Smaller markets at Ward and Community level are operated by the Ward Committee and Village Committee which operate once or twice a week.

A healthy marketplace is a setting which allows vendors, consumers and visitors to actively engage in their economic and social activities in environments protected from discrimination, health risks, accidents and violence.

In a healthy marketplace, stakeholders acquire knowledge, skills and take actions to continuously improve infrastructure, facilities and environments to accomplish the vision.

4.7 Governance

The MHMS through the National Health Promotion Department is mandated to promote health in the marketplace, targeting market vendors, consumers, visitors and those working in the marketplace setting. The National Health Promotion Department shall organise a committee to enhance partnership with other Government Ministries including Ministry of Provincial Government and Institutional Strengthening, Ministry of Commerce, Industry, Labour and Immigration, Ministry of Home Affairs, Ministry of Women, Youth, Children and Family Affairs, Ministry of Agriculture and Livestock and Ministry of Fisheries and Marine Resources and supported by experts from other stakeholders to take full responsibility for creating and sustaining a supportive environment for the implementation of the Healthy Marketplace

Settings across the country.

At the provincial level, the Health Promotion Department in the Provincial Health Offices are responsible for coordinating with the Provincial Government and Market Authorities and for setting up a market committee. The members include representatives from the Town Council, Vendors Association, Fisheries Association, Police, civil societies and other organisations involved in the marketplace activities. This steering committee will be responsible for implementing the Healthy Marketplace Policy by systematically identifying characteristics of marketplaces, programming and organising necessary trainings, providing support, conducting regular monitoring, evaluation and feedback to the stakeholders.

4.8 Partnership

MHMS and the Provincial Health Office through the committees shall strengthen mechanisms for effective collaboration, coordination and mainstream with public and private sectors, non-governmental and international organisations, Community-Based Organizations (CBOs) and civil societies for creating and sustaining healthy marketplace activities in the country. MHMS will collaborate with Provincial Government Authorities and partners to share expertise and resources to promote health and wellbeing of market vendors, consumers, visitors and workers. Healthy marketplace best practices will be promoted to all implementers, partners and stakeholders at the national and provincial level through meetings, seminars and conferences.

4.9 Related policies, legislations and plans

The Mandate for the Healthy Marketplace Settings is delegated in the following International and Regional Declarations and national government legislation and policies:

- Tobacco Control Act 2010
- Honiara City Council Market Ordinance 2009
- National Food Security, Food Safety and Nutrition Policy 2010 -2015
- Tobacco Control Regulation 2013
- National Health Strategic Plan 2016-2020
- Pure Food Act – Environmental Health 2017

- National Waste Management Pollution Control 2017-2026
- Solid Waste Management Policy 2018
- Role Delineation Policy 2018
- RWASH Policy – Environmental Health 2018
- Auki Market Ordinance 2019
- National Health Promotion Policy 2021
- National Healthy Settings Policy 2021

MHMS developed the National Health Strategic Plan and Role Delineation Policy incorporating the Healthy Islands vision and specified the health promotion components in the National Health Promotion Policy and the National Healthy Settings Policy. The Healthy Marketplace Setting was featured prominently with the other elemental healthy settings including the healthy village setting, health promoting school setting and the healthy workplace setting in the NHS policy.

The National Healthy Marketplace seeks to support and complement the existing legislations and bi-laws, including the Tobacco Control Act, Liquor Act, Pure Food Act and Solid Waste Management legislations, to promote and protect health of market users and the general public. There also exist Provincial ordinances and bi-laws enacted by the Provincial Government and enforced across the communities.

5. Healthy Workplace Setting Component

5.1 Introduction

Progressive economic activities in all sectors in the Solomon Islands have resulted in the increasing demand in workload, workforce and workplaces. As a consequence, occupational health became a great concern for the nation.

The International Labour Organisation (ILO) estimates that globally two million women and men die each year because of occupational accidents and work-related illnesses. World Health Organisation (WHO) estimates that 160 million new cases of work-related illnesses occur every year.

In the Solomon Islands, there are a total of 26,000 to 30,000 workers. Approximately 14,000 of them work in the public sector and 15,000 work in the private sector. Roughly 10 percent (3,000) of all workers are in high-risk workplaces and about 1,500 of them work in the logging, infrastructures and fishing industries.

A report on worker's compensation from 2015-2016 revealed that a total of 243 claims were submitted to authorities. This includes 10 work-related deaths per year and temporary, serious or permanent disabilities and diseases. The report also highlighted that there are 9-10 cases of serious injuries per day. Consequently, a sum of SBD\$2.8 million dollars was paid to the victims over that period. The report further revealed that a lot of work-related data for injuries and diseases were not captured.

The Solomon Islands Government have enacted legislations related to occupational health since 1980s. Workplaces in the country, however, are yet to take measures to protect workers' health and provide optimal labour environment. To this end, the Ministry of Health and Medical Services (MHMS) framed the healthy workplace initiative as part of the Healthy Islands Vision of the country.

In collaboration with relevant ministries and stakeholders, MHMS support development and rollout of equitable measures to strengthen work systems to promote wellbeing and minimise work-related health risks, with particular attention to the vulnerable population such as females, youngers, elders and those with disabilities and to gender issues.

5.2 Vision

“Healthy, happy and productive workers (employers, employees, self-employed), all working in a clean, safe and organised environment with dignity, equity and respect.”

5.3 Mission

Workers (employers, employees, self-employed, workers' families) creating and maintaining a safe, healthy and supportive work environment through collective and interactive dialogue, consultation and cooperation with the goal to minimise health risks and adopt a healthy work lifestyle which promotes and protects their health.

5.4 Scope

This Healthy Workplace Settings in the NHS policy advocates that the working population in the Solomon Islands is healthy, happy and productive, by providing a quality, safe and healthy work environment. Dialogue, consultation, coordination and cooperation on all health and safety related matters will be ongoing among all stakeholders including employers and employees in the public and private sectors.

The Ministry of Health and Medical Services (MHMS) through the rollout of the Healthy Workplace Settings will provide opportunity to create a healthy, supportive and safe working environment. Health promotion and health protection become an integral part of the management practices, fostering safe work practices and positive work styles and adapting lifestyles conducive to health. Active organisational participation will have positive impacts on work performance and productivity as well as on surrounding communities.

The Healthy Workplace Settings applies to all male and female employers, employees, self-employed and people with disabilities (PWDs) in any organisation participating in socio economic activity or service delivery.

5.5 Purpose

The Healthy Workplace Setting ensures that all workers have the right to a safe and healthy working environment. Measures are put in place to strengthen and improve the management and control of environmental, occupational and social factors that adversely affect health at the workplace.

It aims at promoting and maintaining the highest degree of physical, mental, social and spiritual wellbeing of workers in all occupations across all sectors. Firstly, to prevent all adverse effects of health of workers caused by working conditions. Secondly, to protect employers and employees from risks resulting from factors adverse to health. Lastly, to provide a suitable work environment that is conducive for the placement and maintenance of health of all workers, accommodating their physical, mental, social and spiritual needs.

5.6 Definition

A healthy workplace is a place where everyone (male and female employers, employees, self-employed with or without disabilities), works together to achieve an agreed vision for the health and well-being of workers and the surrounding community (WHO).

A healthy workplace provides all members of the workforce with a physical, social, mental, spiritual and organisational environment that protects and promotes health and safety. It enables employers and employees to increase control over their own health, to improve it and to become more energetic, positive and contented.

A healthy workplace is managed by integrating a range of individual and organisational interventions. Workers and managers together take a continual improvement process to protect and promote the health, safety and well-being of all workers. The process includes behaviour change; participatory and empowering actions involving all workers regardless of rank, gender, ethnic group or employment status in determining needs and solutions; addressing the multiple determinants of health with support of professionals when necessary; and incorporating changes into the workplace culture and management practices to be sustained over time.

5.7 Governance

The Healthy Workplace Settings is driven by the National Health Promotion and the National Environmental Health Department of the Ministry of Health and Medical Services (MHMS) in close collaboration with the Ministry of Public Services (MPS) and the Ministry of Commerce, Industry, Labour and Immigration (MCILI). Other relevant sectors will be involved in the design, implementation and monitoring of the policy. These stakeholders include the Ministry of Infrastructure and Development (MID), Ministry of Women, Youth, Children and Family Affairs (MWYCFA), Private Sector, Community Based Organisations (CBOs), Faith Based

Organisations (FBOs), Social Welfare, Trade and Employment, Small Business Enterprises and Non-Governmental Organisations (NGOs).

5.8 Partnership

Mechanisms are to be put in place at the national and provincial levels to coordinate and implement the Healthy Workplace program in the workplace. Healthy workplace committees will function as sub-committees of the National Healthy Settings Coordinating Committee (NHPSCC) and the Provincial Healthy Settings Coordinating Committees (PHSCC). The Healthy Workplace Committees will assess and prioritise the issues and develop, implement, monitor and evaluate the workplace action plans. The Ministry of Health and Medical Services (MHMS) through the rollout of the Healthy Workplace Settings will provide opportunity to create a healthy, supportive and safe working environment to ensure that healthy workplace becomes an integral part of the management practices, fostering safe work practices and positive work styles.

5.9 Related policies, legislations and plans

The Mandate and Authority for the Healthy Workplace Setting are assigned in the appropriate Global Conventions and Legislations or laws of the Government, principally in the Policies and Strategic Plans of the Ministry of Health and Medical Services and the Ministry of Commerce, Industry, Labour and Immigration and other relevant key Ministries. They include the following:

- Environmental Health Act 1980
- Shipping Act 1980
- ILO Convention 1981
- Safety at Work Act 1982
- Labour Act 1996
- Employment Act 1996
- Environment Management Act 1998
- The Bangkok Charter for Health Promotion 2005
- Public Service Code of Conduct 2009
- National Health Strategic Plan 2016-2020/2021-2025

- National Health Promotion Policy 2021
- Pharmacy and Poisons Act (Cap 105)

The 1982 Safety at Work Act provides legal requirement to employers to ensure the health, safety and welfare at work of all employees. The employer has the duty to ensure health and welfare of all employees including part time workers and temporary workers. It instructs employees to ensure safety of all plants, machinery, systems and premises, as well as management of hazardous processes and adequate trainings of employees.

In 1995, the World Health Assembly of the World Health Organisation endorsed the Global Strategy on Occupational Health for All. The strategy emphasised the importance of primary prevention and encouraged countries with guidance and support from WHO and ILO to establish national policies and programmes with the required infrastructures and resources for occupational health.

The 2005 Bangkok Charter for Health Promotion made a significant commitment to make health promotion “a requirement for good corporate practice.” For the first time, it was explicitly recognised that employers/corporations should practice health promotion in the workplace. It also noted that women and men are affected differently, and these differences present challenges for creating healthy workplaces for all workers.

Ministry of Health and Medical Services is mandated to accomplish the healthy islands vision agreed in Yanuca Declaration 1995. The National Health Strategic Plan 2016-2020/2021-2025 and National Health Promotion Policy 2021, direct the National Health Promotion Department to collaborate with other line Ministries and partners to ensure that the Healthy Workplace program is implemented in the country.

6. Review of the policy

The National Healthy Settings Policy shall be reviewed as deemed necessary to be in line with future National Health Policies and Strategies, emergency response plans, and with emerging changes or needs.

Annexes

Implementation Guideline – Healthy Village Setting Component

Implementation Guideline – Health Promoting School Setting Component

Implementation Guideline – Healthy Marketplace Setting Component

Implementation Guideline – Healthy Workplace Setting Component



Health Promoting Village Project
Japan International Cooperation Agency