

From the Editor

This is the last PHD issue for 2005 and thanks to the Secretariat of the Pacific Community (SPC) and its staff for organising it. This is the twenty fourth issue of PHD over the last 12 years. It is also the sixth issue in which the SPC have been central to its production and the second issue to be available in French and English. The first issue that SPC (the then South Pacific Commission) in Noumea had been central to its production was in 1994 "Pacific Child Health." The other SPC produced issues included 1995 "Population, Women and Development" and "AIDS, STD and Sexuality in the Pacific"; and in 2000 "Telehealth in the Pacific." The latter PHD issue is available from the SPC Website: www.spc.int in both English and French. So thank you very much and malo aupito again SPC!

Pacific health surveillance have been a poorly understood and implemented health activity in the Pacific. This had been mainly due to expatriate dominance of the disciplines with little local Pacifican capacity development in epidemiology, biostatistic and health information management. The re-surgence of new and old infectious diseases have prompted a panic response to surveillance and systems development, still with minimal emergence of Pacificans as epidemiologists, biostatisticians and information managers. Without belabouring the point, the panic reaction to the disease burden have elevated the importance of epidemiologists beyond rationality and into the areas of incompetence.

The Pacific needs to have an excellent surveillance and response system that is controlled by appropriately trained Pacificans and supported by a global network of competencies where in the social, cultural and economic realities of the Pacific are central. This of course includes a rational approach to epidemics instead of the panic diversion of resources form urgent and existing health priorities of the day to questionable strategies for the management of epidemics that the risk of which has been disproportionately weighed to elevate the status of epidemiologists. The Pacific countries still do not have the expertise to do rational evidence based risk assessments, in response to panic merchants with self-fulfilled prophecies for self aggrandisement, creating continual and continuous dependency and distance from self-determination.

This calls for an urgent capacity and capability development using Pacifically appropriate methods recognising the epistemology and pedagogy of the peoples of the Pacific

For appropriate Pacific health surveillance and response, Pacificans must rise above the positive and negative discriminations to their becoming the custodians of their own health information system. This calls for an urgent capacity and capability development of in-country personnel with a credible accredited institution using Pacifically appropriate methods recognising the epistemology and pedagogy of the peoples of the Pacific.¹

This issue of PHD contributes to this medium. Many Pacificans have participated and national talents aptly represented. Many more participation from the countries would have been preferred. There is a need to move forward from this tentative efforts to make locally build and controlled health information system central to a country's health activity.

It is essential to note that health surveillance and response is a medium and tool for all diseases including non-communicable diseases, mental illness, drug use, injuries and health service utilization. It is not confined to infectious epidemic management and panic reactions.

It is such a pleasure to give you another issue of PHD. With all its limitations and blemishes we at PHD continue to foster Pacificentric research and thinking. It will be a real treat to be on time with Volume 14 Number 1 in March 2007. Within the next few months Volume 13, No. 1 & 2 will come your way, with all the labour of love that has been backbone of PHD since its inaugural issue from the Pacific Basin Medical Officer Training Program in Pohnpei in 1994. Those were the days that laid the foundations of the PHD "Labourers of Love". Interestingly enough the struggle for Pacificentricity and against imperialism is still the sensitivity of the day. The continuous reminder of Pacificans need for self determination is what makes PHD matters!

Reference:

1. Finau SA. and E. Finau. Cultural democracy: the way forward for primary care of hard to reach New Zealanders. *NZ Family Physician*, 2006, 103(1): 313-318

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