

Evidence That Matters: Pacific-Led Research, Implementation, and Sustaining the Health Workforce

Fiji National University (FNU) & Pacific Sexual and Reproductive Health Research Centre (PacS-RHRC)



What Constitutes "Evidence That Matters"?

Defining Meaningful Pacific Evidence:

- Pacific-led, locally relevant, and culturally responsive
 - Co-designed with communities and frontline health workers
 - Context-specific vs. external models
- “But generating meaningful evidence is only the first step. The real question is: what do we do with that evidence once we have it?”

From Research to Implementation in Action

Translating Evidence into Clinical Practice

The pathway: Research question → Pacific evidence → Partnerships
→ Implementation

This is the health crisis of our time

A Rapid Assessment of
Injecting Drug Use and
HIV in Suva, Fiji

Report prepared by:

Lisa Maher, Angela Kelly-Hanku, Bradley Mathers, Virginia Macdonald, Donald Wilson, John Gobeil, Ele Morrison, Kesaia T. Nawaqaliva, Kelera Naivalu, Nadine Ezard and Rachel McCleave.

The views expressed are those of the authors and do not necessarily reflect the views of the Fiji Ministry of Health and Medical Services, WHO, UNDP, or the Global Fund.

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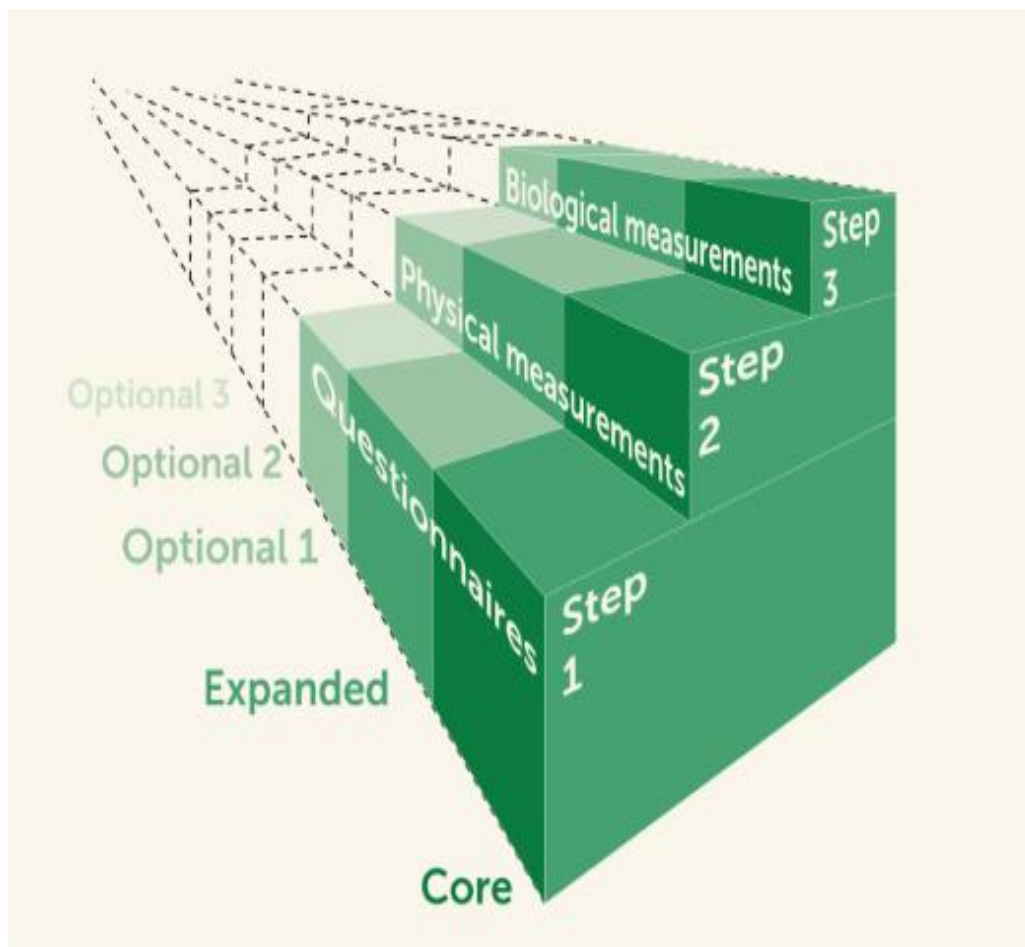
Needle and syringe programme to be introduced as Fiji declares HIV a national crisis

Rashika Kumar · 16/09/2026

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Minister for Health Dr Atonio Lalabalavu



- Informs National Strategy to fight non-communicable diseases (NCDs) such as diabetes, heart disease, and hypertension by measuring behavioral and metabolic risk factors like obesity, tobacco use, high blood pressure, and poor diet.

Research as Health Workforce Development

Building People, Partnerships, and Systems

Research as a vehicle for mentorship and analytical skill-building

Linking academic institutions directly with Ministries of Health



Solomon Islands



Kiribati



Tuvalu

Research as Health Workforce Development

Building People, Partnerships, and Systems

Case Study: PEMNeT (Pacific Emergency Maternal and Neonatal Training)

Multidisciplinary simulation training & national credentialing



The Ripple Effect of Local Solutions



35+
Training
Courses
Conducted

600+
Multidisciplinary
Participants
Trained

8
Pacific Nations
Reached

"Integrated into credentialing programs as a core component—ensuring that all midwives, not just in hospitals but in local clinics, are up to date and competent in conducting safe deliveries."

PROPOSED SITUATIONAL ANALYSIS OF HEALTH RESPONSE TO GENDER-BASED VIOLENCE (GBV)

- **AIM** - Understand Health Systems Response Strategies to GBV in Fiji, Kiribati, the Solomon Islands, and Tonga.
- **METHOD** – Qualitative Interviews
- **PARTICIPANTS**
 - Health Staff in selected health facilities
 - Senior Managers of Health and relevant sectors / NGOs
 - Persons with GBV lived experience who sought health care
- **FRAMEWORK**
 - Health Systems Building Block (WHO)
 - Health Systems Access
- **STUDY SITES**
 - Plan is to cover all Provinces
 - All levels of care – Primary, Secondary, Tertiary
 - Facilities likely to encounter GBV cases – GOPD, ED, FP, ANC, SOPD (Mental Health, OBGYN)
- **STUDY BENEFITS**
 - Contextualise Health Services for GBV
 - Identify areas needing strengthening
 - Increase health-seeking behaviour

Pacific Islands Health Research Symposium (PIHRS)



Conclusion & Future Priorities

What Evidence Leaves Behind

- Better practice
- Stronger systems
- Local leadership
- Skilled workforce

Sustaining Pacific research capacity & regional partnerships



Vinaka Vakalevu

