Launched in 1995, the Pacific Islands Program (PIP) has allowed Fellows to help train and mentor a new generation of surgeons across the region and conduct thousands of life-saving operations in host countries while developing the ability of the College to deliver world-class international medical assistance through its Global Health department.

Since the College commenced management of the Australian Government-funded program, Fellows and other medical professionals working through the PIP have:

- Conducted more than 680 service-delivery visits to Pacific Island nations delivered by more than 2,700 volunteer contributions across a range of specialties;
- Provided more than 83,000 patients with specialist consultations and medical assistance;
- Given 22,200 people potentially lifesaving surgical treatment otherwise unavailable in-country; and
- Delivered more than 200 training activities with recorded attendances by more than 2,700 Pacific medical personnel.

In the 20 years of its operations, the PIP has progressed through three defining stages from a focus on the delivery of surgery by specialist teams, to education and capacity building across the region to the modern era in which PIP activities are increasingly determined by surgeons and medical leaders from the Pacific Islands.

In the process of that progression, the College has developed expertise unmatched by any other Australasian medical college in the delivery of international medical aid and training and now acts as a conduit for engaging other specialist medical skills by working with other colleges and societies.

In the beginning the PIP had no money allocated for training, yet now almost every PIP team visit is designed around working with other colleges and societies.

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The relationships developed through this long-standing collaboration have also enabled graduates from a number of Pacific Island nations to access College scholarships to help them further their training in New Zealand or Australia or to attend international medical conferences.

And while the Australian Government has contributed an estimated $30 million over the life of the project, the value added from pro bono contributions by specialist teams, project coordinators and directors has now been estimated to be worth an equivalent amount.

The former PIP Project Director and current Vice-President and soon to be President of the College, Professor David Watters, described the PIP as “‘the most successful health project ever delivered through foreign aid in Australia’.

He said there was now a highly trained and competent specialist medical workforce spread across the Pacific Island region, which had been developed, in part, through the College’s involvement in the Fiji School of Medicine Project (FSMP) coupled with the on-going professional support provided through PIP visiting teams.

The FSMP, which ran from 1997 to 2002, was designed to assist medical leaders in Fiji to develop a postgraduate training program under the leadership of the esteemed orthopaedic surgeon, Professor Eddie McCaig.

Although managed by the RACS, the FSMP also included input by the Royal Australasian College of Physicians, the Australian and New Zealand College of Anaesthetists, the Royal Australian and New Zealand College of Obstetricians and Gynaecologists and the Universities of Otago and Melbourne.

Professor Watters said the combination of local support and international assistance for specialist medical education meant that there were 30 Masters of Medicine (Surgery) graduates now working in Fiji, Kiribati the Solomon Islands, Vanuatu, Samoa and Tonga.

“It is wonderful to see these surgeons now working to such a high level, helping their colleagues in smaller countries that cannot sustain a specialist medical workforce and becoming health leaders in their home nations,” Professor Watters said.

“Yet all that has been achieved is a credit to so many people, not least Professor McCaig who was last year chosen to receive the ESR Hughes Medal in recognition of his outstanding contribution to surgery.

“The contribution of Gordon Clunie was also instrumental in the development of surgery in the Pacific region. He was Dean of Medicine at Melbourne University who chose, upon his retirement, to work at the Fiji National University to assist in the FSMP project.

“The success of the PIP is due in large part to those two Fellows along with Dick Bennett who wrote the winning project tender and former President David Theile who had the foresight to promote the project as a way for the
College to support our colleagues in the region and help improve the lives of patients in poorer countries.

Professor Watters said it was a testament to the commitment of FRACS volunteers and the skills of College support staff that the PIP had never again been put out to tender since the RACS took on the project, despite changes in government and shifts in spending priorities.

He also said one of the keys to the success of the program was its longevity which had enabled deep professional relationships to be formed between Pacific Island medical leaders and surgeons and Fellows of the College which allowed for frank discussions and practical assistance.

“For a relatively small investment the PIP has delivered huge returns,” he said.

“It takes more than 10 years to train a surgeon so now we are in a position to support our regional colleagues as they do wonderful work.”

Yet while more and more Pacific Island surgeons are completing their training in Fiji or doing post-graduate placements elsewhere, the medical workforce in the region still has gaps such as in anaesthesia while some of the smaller nations will always need specialist team visits because of small populations or their remoteness.

“The RACS has always been very proud to offer this assistance and support to our regional neighbours.”

Professor McCaig said the support of Australian and New Zealand Fellows through PIP had been instrumental in training the new generation of surgical leaders through the Fiji National University.

He said that local graduates had now taken leadership roles in Fiji, the Cook Islands, Tonga, Samoa, American Samoa, Tuvalu, Kiribati, Pohnpei, the Solomon Islands and Nauru.

“I think that the first time surgeon to the Pacific is often surprised with the standard of the work done by our people,” Professor McCaig said.

“However, this level and quality of training would not have achieved its present standing without the networking, support and mentoring provided through the PIP.”

Associate Professor Hamish Ewing, the Chair of the PIP Evaluation and Monitoring Committee, said the PIP was also successful because open communication channels allowed for a clear understanding of the skills that medical personnel in Pacific Island nations wished to learn.

He said that while the majority of Pacific Island surgeons were general surgeons, visiting Fellows helped younger surgeons begin subspecialist training in such fields as urology and paediatrics while anaesthetists also delivered specialist training packages.

Some PIP team visits also include radiologists, physiotherapists, optometrists, audiologists and specialist nurses—all of whom conduct training while there.

“Fiji now has a paediatric surgeon and a neurosurgeon, both of whom are now teaching a new generation of specialist surgeons,” Associate Professor Ewing said.

“Now, it is the local Pacific Island surgeons and trainees who tell us what they want to learn and on many team visits, it is the local surgeons who take the lead in theatre, which is a way to ensure that capacity building continues.”

Associate Professor Ewing said that such a successful collaboration was only possible through time, commitment and the development of relationships.

The current Director of the PIP, Mr Kiki Maoate, works out of the Christchurch Hospital, was born in the Cook Islands and returns there frequently.

In the role since 2011, Mr Maoate said he believed the PIP in future could expand beyond service delivery, training and skills development, to providing assistance and advice to help Pacific Island nations to develop complete health systems.

“I think the most important priority for the PIP in coming years will be to provide support for the new post-graduate surgeons returning home from their training,” Mr Maoate said.

“Then, I think we need to become more intimately involved with the Ministries of Health in the various countries so that they feel a greater sense of ownership over their health systems and they decide the priorities and strategies to achieve the outcomes they seek to achieve.”

“The expectation of the College through the PIP is to ensure that the people of Pacific Island countries get the best possible outcome from the program.”