Title: Oceania

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Oceania

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Oceania is ecologically, culturally, geographically, socially and politically diverse (Woinarski, 2010; Jupiter et al., 2014). Oceans connect this complex region together across the islands of Melanesia, Polynesia and Micronesia with water being a core feature (McMichael et al., 2003; Burns, 2002). Thousands of islands cover Oceania, which range for large countries like Australia to small island nation such as Tuvalu. Stark differences in social (for example wealth, governance structures and cultural groups) and ecological (including topography, ecosystem degradation and susceptibility to natural disasters) realities characterize this unique place on the planet (Wardell-Johnson et al., 2011; Jenkins et al., 2011; Grantham et al., 2011). Such a complex region holds key learnings to not only improve public health but ecosystem approaches to health and sustainability research and action (Kingsley et al., 2015).

Understanding the Oceania region can play a fundamental role in ecosystem approaches to health research and practice for two reasons. Firstly, the diversity of Indigenous social, cultural and ecological knowledge held in the region provides important lessons on how to develop integrated practices and research. An illustration of this diversity is highlighted by the number of Indigenous languages in the region, with for example 760 different languages spoken in Papua New Guinea; 110 in Vanuatu; and 63 in the Solomon's (Tryon, 2009). Due to colonial neglect and historical isolation, the Pacific Islands, home to the world's most diverse range of Indigenous cultures, continue to sustain many ancestral life-ways possessing a vast repository of cultural traditions and ecological adaptations (Lindstrom et al., 1993). Indigenous peoples lives, economic practices and the ecologies of Oceania are

inextricably linked. Worldviews from this region are *all-encompassing*, fully absorbing the natural world within them, providing both the view of the whole, and a penetrating image of their personhood within Oceania's ecology (Sullivan, 2001). Indigenous people's ecological knowledge provides useful frameworks through which to cultivate purposive transformations capable of generating greater human and ecosystem health across generations. Indigenous knowledge is particularly useful for developing ecologically sensitive models of public health and ecosystems wellbeing.

Secondly, Oceania's vulnerable and diverse ecosystems and compounding issues such as natural disasters and geographical isolation provides a case study for other regions that will face similar concerns in the future (Kingsley et al., 2015). Oceania has the most to lose, from the pressures of global political, environmental and economic change. Whilst the region is rich in beauty, there are often limited economic resources and opportunities for development within Small Island States in Oceania. Factors that contribute to this lack of opportunity include mining, de-forestation, nuclear mining dumping schemes and environmental pollution impact on industries such as tourism, the growing numbers of under employed youth throughout Oceania with some governments hard pressed to provide basic services (DESA, 2013; Lindstrom et al., 1993). Whilst there are particular causes and solutions of crises around environmental change and associated public health concerns being debated by politicians, scientists, economists and policy makers; the facts of unsustainability are causing alarm in many quarters. Progress toward sustainability targets has been uneven and insufficient. Current trends mean that regional targets are unlikely to be reached with 'business as usual' scenarios (Cruz et al., 2015). The health issues associated with environmental challenges in the region are undeniable and extreme, with a range of problems linked to food insecurity, non-communicable disease, vector born diseases and poverty (Hanna & McIver, 2014).

EcoHealth scholars in Oceania identified regional approaches to environmental change, sustainability and its nexus with health and wellbeing as a major concern in 2012 when attending the 4th Biennial International Association for Ecology and Health (IAEH) Conference in Kunming (China). At this conference these scholars became committed to ensuring that voices, concerns and ideas of the region are translated into global efforts to achieve shared prosperity and ecological sustainability. Around a dining room table on the final day of the conference, the Oceania EcoHealth Chapter was formed by activating a

component of the IAEH constitution which states that regional approaches to achieving human and ecosystems health could be recognised in the Association structure. This was the first time this aspect of the Constitution was triggered, culminating in a signed agreement being reached between signatories to the Oceania EcoHealth Chapter and the IAEH in 2013. A range of the authors from this Special Feature have strong ties with the Oceania EcoHealth Chapter and aim ensure a continued focus on this diverse region.

The specific mandate of the Oceania EcoHealth Chapter is to consult, engage and advocate for local and regional issues of IAEH members that represents the diversity of the region and the missions of this international organisation. Activities of the group include regular meetings, social media actions, webinar series, short courses, conference proceeding and a range of publications including the ones in this Special Feature. A welcome addition to this is the focus on co-creation, collaboration and relationship building as the 2016 congress marks the integration of the 4th International One Health Congress and The 6th Biennial Conference of the IAEH. Special efforts have been made to provide infrastructure and supports for focused regional discussions through activities, demonstrations, short courses, student activities and place-based strategic engagements across institutions and Indigenous communities with an interest in collaborating on Oceania focused initiatives.

Since the inception of the Oceania EcoHealth Chapter, a range of challenges and opportunities have emerged when applying ecosystem approaches to health at a regional level. The challenges include identifying an approach that represents the diversity of the region and local places-based examples appropriately. Currently, the Chapter's membership consists predominantly of Australia and New Zealand representatives; therefore, we invite other like-minded scholars to join and extend the work of the Oceania Chapter. Further, there have been efforts made to appropriately engage Indigenous peoples in the region. Whilst there is strong Indigenous peoples' leadership in the Chapter – more can be done to build alliances and involve Indigenous knowledge holders in setting the direction. What the Chapter has provided is a platform through which scholars and students can integrate ecosystem approaches to health in Oceania that merges public health and environmental stewardship (Kingsley et al., 2015).

We are an evolving group and require innovation to ensure we continue. All people in the Oceania EcoHealth Chapter work on a volunteer basis because we believe in the principles of applying ecosystem approaches to health across local, regional and global scales

to tackle future ecological and public health issues. We invite delegates at the upcoming One Health EcoHealth Congress to come join us in the co-creation space so we can grow the Chapter into a sustainable entity. If you can not to join us in Melbourne in December 2016 we urge you to become involved in the many activities the Oceania EcoHealth Chapter run. For further information go to: <https://ecohealth.net/ecohealth-2/regional-chapters/oceania-chapter/>

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