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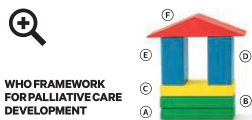


General data

POPULATION, 2023
15,040
SURFACE, KM², 2022
N/A
PHYSICIANS / 1,000 INH, 2022
N/A

Socioeconomic data

COUNTRY INCOME LEVEL, 2022
N/A
HUMAN DEVELOPMENT INDEX RANKING, 2021
N/A
GDP PER CAPITA (US\$), 2023
N/A
HEALTH EXPENDITURE (% GDP), 2021
N/A
UNIVERSAL HEALTH COVERAGE, 2021
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WHO FRAMEWORK FOR PALLIATIVE CARE DEVELOPMENT

- Ⓐ EMPOWERMENT OF PEOPLE AND COMMUNITIES
- Ⓑ POLICIES
- Ⓒ RESEARCH
- Ⓓ USE OF ESSENTIAL MEDICINES
- Ⓔ EDUCATION AND TRAINING
- Ⓕ PROVISION OF PC

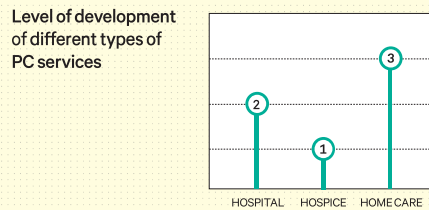
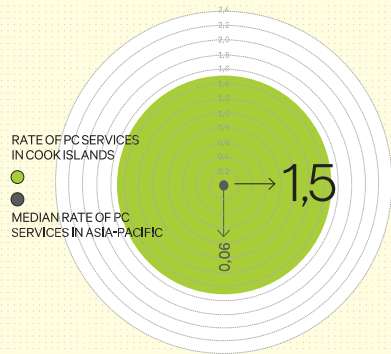


Cook Islands

F Provision of PC (Specialized Services)

Total number of Specialized PC services **3**
Rate of PC services per 100,000 inhabitants **1,5**

Cook Islands in the context of Asia-Pacific regions



Pediatric PC Services

Geographic distribution and integration **1** | Total number **0**

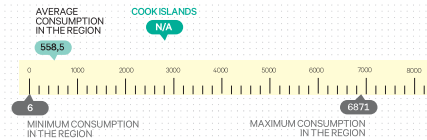
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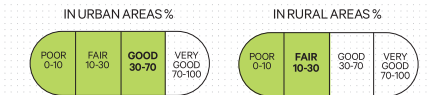
D Use of essential medicines

Opioids consumption (excluding methadone) **N/A**

Cook Islands in the context of Asia-Pacific regions



Overall availability of essential medicines for pain and PC at the primary level



General availability of immediate-release oral morphine at the primary level



C Research

PC-related research articles **2** | Existence of PC congresses or scientific meetings **1**

National Association: — | Data collected: June-September 2024.
Consultants: Ko Ko Lwin. | Report validated by consultants: October - November 2024
Report sponsored by National Association: N/A
Edited by Atlantes Research Team University of Navarra (Spain)

E Education & Training

Medical schools with mandatory PC teaching **0/0**

Nursing schools with mandatory PC teaching **0/1**

Recognition of PC specialty **1**

B Policies

National PC plan or strategy **3**

Responsible authority for PC in the Ministry of Health **3**



Inclusion of PC in the basic health package at the primary care level **3**

A Empowerment of people and communities



Groups promoting the rights of PC patients **2** | Advanced care planning-related policies **2**

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People & Communities





<p>Ind1</p> <p>Existence of groups dedicated to promoting the rights of patients in need of PC, their caregivers, and disease survivors.</p>	 <p>Pioneers, champions, or advocates of palliative care can be identified, but without a formal organization constituted.</p>	<p>In the Cook Islands, palliative care services are supported by several organizations dedicated to patient rights and care. The Ministry of Health's (TMO) Hospital and Community Palliative Team provides essential palliative care services. Additionally, the NGO Te Vaerua assists with mobility support and provides equipment to patients and families. Another key player is the Rarotonga Home Care Team, a private nursing service that cares for palliative patients in the community.</p>
<p>Ind2</p> <p>Is there a national policy or guideline on advance directives or advance care planning?</p>	 <p>There is/are national policies or guidelines on surrogate decision-makers.</p>	<p>The Cook Islands does not have a national policy on advance directives or advance care planning (ACP). While the Ministry of Health recognises ACP in its developed Palliative Care Policy, this policy does not specifically mention living wills. Teams follows ACP guidelines from New Zealand and are trained to discuss ACP with patients; however, not all are comfortable initiating these discussions at an early stage.</p>

Policies

<p>Ind3</p> <p>3.1. There is a current national PC plan, programme, policy, or strategy.</p>	 <p>Actualized in last 5 years, but not actively evaluated or audited.</p>	<p>A National Palliative Care Policy has been established; however, the accompanying palliative care plan is still under development. Additionally, there are currently no indicators in place to monitor the progress of palliative care implementation.</p>
<p>3.2. The national palliative care plan (or programme or strategy or legislation) is a stand-alone.</p>	 <p>A national palliative care plan is in preparation.</p>	


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Policies

<p>3.3. There are indicators in the national plan to monitor and evaluate progress, with measurable targets.</p>	 <p>Not known or does not exist.</p>	
<p>Ind4</p> <p>PC services are included in the list of priority services for Universal Health Coverage at the primary care level in the national health system.</p>	 <p>Included in the essential list of services recognized by a government decree or law but not in the General Health Law.</p>	<p>Palliative care is included in the Cook Islands' National Health Strategy, under the Family Health Services (Public Health Nursing) Strategic Objectives for 2017-2021. The Ministry of Health (TMO) is the primary healthcare provider in the country, including palliative care services. Healthcare services are largely free to citizens and encompass both public health and primary care services.</p>
<p>Ind5</p> <p>5.1. Is there a national authority for palliative care within the government or the Ministry of Health?</p> <p>5.2. The national authority has concrete functions, budget and staff.</p>	 <p>There is a coordinating entity but has an incomplete structure (lack of scientific or technical section).</p>  <p>Does not have concrete functions or resources (budget, staff, etc.)</p>	<p>In the Cook Islands, the Ministry of Health coordinates palliative care through a multidisciplinary team, which includes both hospital and community teams. However, the structure is incomplete, lacking dedicated scientific or technical sections. The Palliative Care Policy outlines this approach but does not define specific functions or allocate resources such as budget or staff.</p>

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Research

<p>Ind6</p> <p>Existence of congresses or scientific meetings at the national level specifically related to PC.</p>	<p></p> <p>There are no national congresses or scientific meetings related to palliative care.</p>	<p>No evidence is available regarding the existence of national congresses or scientific meetings specifically focused on palliative care.</p>
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<p>Ind7</p> <p>Estimation of the level of peer-reviewed articles focusing on PC research published in any language in the past 5 years with at least one author from the country.</p>	<p></p> <p>Reflects a limited number of articles published.</p>	
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Medicines

<p>Ind8</p> <p>Reported annual opioid consumption – excluding methadone – in S-DDD per million inhabitants per day.</p>		<p>No data reported for the Cook Islands.</p>
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Medicines


<p>Ind9</p> <p>9.1. Percentage of health facilities at the primary care level in urban areas that have pain and palliative care medications as defined in the WHO Model List of Essential Medicines.</p> <p>9.2. Percentage of health facilities at the primary care level in rural areas that have pain and palliative care medications as defined in the WHO Model List of Essential Medicines.</p>	<p></p> <p>Good: Between 30% to 70%</p> <p></p> <p>Fair: Between 10% to 30%</p>	<p>Primary care facilities in the Cook Islands provide pain and palliative care medications as listed in the WHO Model List of Essential Medicines, supported by the Cook Islands Essential Medicines List (EML) 2024. While specific medication availability at each facility is not detailed, urban centers like the Tupapa Primary Health Care Centre offer comprehensive services, including pain management. Palliative care services, particularly for older adults, are emphasized, with free care provided for individuals over 60 years. In rural areas, Puna Health Clinics deliver general healthcare services. These clinics are likely to stock some palliative care medications, though exact details are unclear. Public health nurses play a critical role in promoting health by actively reaching out to communities. Training programs have also supported the development of palliative care initiatives across the country.</p>
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<p>Ind10</p> <p>10.1. Percentage of health facilities at the primary care level in urban areas that have immediate-release oral morphine (liquid or tablet).</p> <p>10.2. Percentage of health facilities at the primary care level in rural areas that have immediate-release oral morphine (liquid or tablet).</p>	<p>N/A</p> <p>N/A</p>	<p>The lack of reported morphine consumption suggests limited access in the Cook Islands. However, morphine is included in the Cook Islands Essential Medicines List (EML) 2024 as a controlled drug, indicating its availability within the healthcare system. It is offered in multiple forms, such as injections, oral liquid, and tablets or capsules with modified and immediate-release options. While the EML ensures morphine is accessible in Ministry of Health pharmacies and hospitals, it does not specify its distribution across all healthcare levels, including primary healthcare (PHC) centers. Healthcare services in the Cook Islands are provided through hospitals, the Tupapa Primary Health Care Centre, and Puna Health Clinics.</p>
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AP Cook Islands


Education & Training


<p>Ind11</p> <p>11.1. The proportion of medical schools with COMPULSORY teaching in PC (with or without other optional teaching) over the total number of medical schools in the country</p>	<p>0/0</p>	<p></p> <p>The Cook Islands does not have its own medical schools, and medical professionals from the country typically obtain their education in nearby nations such as New Zealand, Australia, or other Pacific countries with established medical programs. In 2022, the Cook Islands introduced the Bachelor of Nursing Pacific (BNP) program. However, the publicly available curriculum for this program does not explicitly include palliative care as a compulsory neither elective component.</p>
<p>11.2. The proportion of medical schools with OPTIONAL teaching in PC...</p>	<p>0/0</p>	
<p>11.3. The proportion of nursing schools with COMPULSORY teaching in PC (with or without other optional teaching) over the total number of nursing schools in the country.</p>	<p>0/1</p>	
<p>11.4. The proportion of nursing schools with OPTIONAL teaching in PC...</p>	<p>0/1</p>	

<p>Ind12</p> <p>12. Existence of an official specialisation process in palliative medicine for physicians, recognised by the competent authority in the country.</p>	<p></p> <p>There is no process on specialization for palliative care physicians.</p>	<p>There is no officially recognized specialization process in palliative medicine for physicians in the Cook Islands.</p>
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AP Cook Islands

Provision of PC / Services

<p>Ind13</p> <p>13.1. There is a system of specialized PC services or teams in the country that has a GEOGRAPHIC reach and is delivered through different service delivery platforms.</p>	<p></p> <p>Isolated provision: Exists but only in some geographic areas.</p>	<p>Palliative care is considered essential in the Cook Islands and is delivered by a dedicated team from the Ministry of Health (TMO) Hospital and Community Palliative Team. Collaborations with Mercy Hospice Auckland and capacity-building initiatives among community care providers have enhanced these services. Palliative care offerings include personal care, carer support, health education, and pain management, with free healthcare available for individuals over 60 years. NGOs like Te Vaerua provide additional support, such as mobility aids, while private teams like the Rarotonga Home Care Team assist palliative patients in the community. The Cook Islands has an estimated two specialized palliative care teams, including the TMO team and the Rarotonga Home Care Team. This corresponds to a rate of more than 1.5 specialized palliative care services per 100,000 inhabitants.</p>
<p>13.2. Are available in HOSPITALS (public or private), such as hospital PC teams (consultation teams), and PC units (with beds), to name a few examples.</p>	<p></p> <p>Ad hoc/ in some parts of the country.</p>	
<p>13.3. Free-standing HOSPICES (including hospices with inpatient beds).</p>	<p></p> <p>Not at all.</p>	
<p>13.4. HOME CARE teams (specialized in PC) are available in the community (or at the primary Healthcare level), as independent services or linked with hospitals or hospices.</p>	<p></p> <p>Found in many parts of the country.</p>	<p>RATE OF SPECIALIZED PC SERVICES/100,000 INH</p> <p>MEDIAN RATE IN THE REGION</p>  <p>MINIMUM RATE IN THE REGION: 0</p> <p>MAXIMUM RATE IN THE REGION: 2.58</p> <p>COOK ISLANDS: 1.5</p> <p>← SPECIALIZED PALLIATIVE CARE SERVICES</p> <p>3</p>

<p>Ind14</p> <p>14.1. There is a system of specialized PC services or teams for children in the country that has geographic reach and is delivered through different service delivery platforms.</p>	<p></p> <p>No or minimal provision of palliative care specialized services or teams for children exists in country.</p>	<p>Currently, there is no evidence available about a specialized palliative care system specifically tailored for children in the Cook Islands.</p>
<p>14.2. Please enter the total number of pediatric specialized PC services or teams in the country</p>	<p></p> <p>PPC TEAMS</p>	