TE MARAE ORA
COOK ISLANDS Ministry of Health

Cook Islands National Health Information Bulletin

2025

Turanga Ora 2025 Ripoti Mataiti
Te Marae Ora Annual Report 2025



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Aim of this Report

The 2025 Health Bulletin provides an overview of health statistics, service delivery, and key indicators in the Cook Islands. It supports evidence-based decision-making by identifying trends, highlighting emerging issues, and informing policy and planning. The report also enables monitoring of health outcomes and service use over time, and supports coordinated, targeted actions to improve population health across Te Marae Ora (TMO).

Whom this report is for

This report is intended for policymakers, health professionals, stakeholders, development partners, government and non-government agencies, researchers, and all individuals with an interest in health statistics in the Cook Islands. It serves as a key reference document for TMO staff and partners, providing baseline data to inform planning, programme development, research, and strategic decision-making across the health sector.

How this report was made

This report uses routinely collected data from TMO systems and partners, which were cleaned and analysed for consistency and accuracy. Graphs present aggregated trends over 2-, 5-, and 10-year periods. Descriptive statistics (frequencies and percentages) are used to summarise findings, supported by tables and figures for clarity. Some limitations may exist due to reporting delays or incomplete data.

The information presented in this report covers a 100% reporting rate, primarily from all reporting health facilities (public and private), health systems, and other verified data sources.

Note that birth and mortality figures may differ from those reported by National Statistics due to differences in data sources and methodology. TMO uses raw line list data based on the recorded time of birth and death, and excludes visitors. In contrast, figures from the Ministry of Justice and the National Statistics Office are registry-based and only captured upon official registration, which may result in variations.

For further details on annual figures, age, sex and location - please refer to the appendix, which covers the methodology, exemptions, limitations, definitions and standard formulas.

What this report contains

1. Population Health Indicators: Key measures of population health and wellbeing.
2. Healthcare Services and Facilities: Overview of health services, workforce, financing, and infrastructure.
3. Notifiable Diseases: Surveillance data on priority diseases identified by health professionals.

Please note that some data from the previous bulletin has been updated, and the information provided in this release may differ accordingly. The 2025 data presented are provisional and may be subject to change in future editions of the national health bulletins.

Foreword

Kia Orana tatou katoatoa i te aroa ranuinui o to tatou Atu, ko Iesu Mesia. Te rauka nei iaku ite akameitaki atu ia kotou katoatoa no te tauturu ite atu anga i teia ripoti mataiti te Turanga Ora' anga 2025.

I am pleased to present the 2025 National Health Information Bulletin, highlighting our collective work and achievements in health across the Cook Islands.

The 2025 Bulletin provides a comprehensive overview of key health indicators, service utilisation, and disease trends across the country. It serves as an important tool to guide policy development, strategic planning, and evidence-based decision-making as we work towards achieving improved health outcomes for all.

I would like to sincerely acknowledge and thank all TMO staff, in the Pa Enua and Rarotonga, and our private and community health partners for their dedication and professionalism in delivering quality health services. Your ongoing commitment ensures that essential services remain accessible across our geographically dispersed islands.

As we move forward, this Bulletin highlights both our achievements and the areas requiring special attention, particularly in addressing non-communicable diseases while maintaining strong communicable disease surveillance and prevention efforts.

Meitaki ranuinui,



Mr Bob Williams
Secretary of Health
Te Marae Ora – Ministry of Health

Acknowledgements

TMO extends its sincere appreciation to everyone who supported the completion of the 2025 National Health Information Bulletin.

TMO acknowledges the contributions of the Ministry of Justice (MOJ) and National Statistics Office (MFEM-NSO). Moreover, appreciation goes to all doctors, nurses, allied health professionals, and staff across all directorates who contributed in data entry and report. Your dedication and hard work have been fundamental to this publication.

TMO also acknowledges the valuable contributions of private health clinics and non-government organisations that utilize MedTech Evolution (MedTech Evo) for entering data from their respective services. These clinics operate under an Agreement of Operation (AOC) with TMO, and their participation strengthens the overall quality and completeness of national health information.

TMO also extends its appreciation to the Information and Communication Technology (ICT) team for their technical support throughout the process. Special thanks are given to the Policy and Planning Manager, Abegail Tuazon, for her support toward the HIS team in completing this report, and to the Director of Planning and Funding, Roana Mataitini, for her continued guidance and oversight.

Gratitude is extended to all individuals who provided supplementary materials, enriching the content and visual appeal of the National Health Bulletin. Their contributions also included additional data, enabling the HIS team to compare and analyze information more effectively. Among these contributors were: Dr Teariki Faireka, Dr Kirianu Nio, Dr Koko Lwin, Dr Hannah Cummings, Dr Lagaau Vaevae Uele, Vaine Ngatokorua, Tereapii Nimerota, Roger Nehemia, Karen Ngamata, Rangi Tairi, Ligipati Dowling, Pa Tauakume Pepe, Tuine Ngatokorua, Theresa Tatuava, Geoffrey Wuatai, Moana Michaela Tangimetua, Rufina Tutai, Norma Tairi, and Teaukura Puna.

TMO extends a Meitaki Maata to all other contributors whose efforts, though not explicitly mentioned, were instrumental in bringing together the comprehensive insights presented in this report. Your collective contributions have been invaluable in shaping the National Health Information Bulletin.

Finally, special recognition and appreciation goes to the HIS team, Maina Tairi Mataio, Dennise Nanai, Grace Matenga, Edith Tangaroa, Daniel Thompson, and Grace Rea, for their leadership, commitment and passion, which have been instrumental in the development of this bulletin.

Executive Summary

The 2025 Health Bulletin provides an overview of the health status of the Cook Islands, offering insights into population health, disease patterns, service delivery, and emerging challenges to guide future policies and interventions.

Life expectancy at birth remained higher for females at 78.7 years (2024: 79.1 years), although a slight decline from prior year while males slightly improved at 73.3 years (2024: 72.5 years). The crude birth rate continues to decline to 12.1 per 1,000 from 13.1 per 1,000 in 2024. Fertility rates (TFR) declined slightly to 1.9 births per woman from 2.0 births per woman in 2024, while contraceptive prevalence rate dropped from 33.2% in 2024 to 29.3% in 2025.

Mortality rates in 2025 for fetal, neonatal, infant, and under-five deaths stabilized at approximately 5.4 per 1,000 live births. No maternal, malaria, dengue, or AIDS-related deaths were recorded. The leading cause of death remained consistent with 32% being attributed to the circulatory system (heart disease and hypertension) followed by cancer (25%) as the second highest cause of death.

Overall notifiable diseases have increased with a total of 7,431 cases reported in 2025 since last year (2024: 5,868). Acute respiratory infections, influenza-like illness, gastroenteritis, dengue fever, and asthma accounted for 86% of cases. STI testing increased by 10%, with 3,533 tests (2024: 3,216) resulting in less than 1% (103 cases) of positive cases. No reported cases of malaria or other communicable diseases such as filariasis, chikungunya, zika, yaws, and measles since 2016.

People diagnosed with non-communicable diseases (NCDs) slightly increased from 5,663 in 2024 to 5,756 in 2025. NCDs remain the leading underlying cause of death in the Cook Islands, with an annual average of 77.4% with 31.5% of this occurring prematurely; a reduction from the prior year at 36.5%.

Patient referrals reported a decrease from 936 referrals in 2024 to 881 in 2025. Immunisation coverage at birth remained high, at over 96%. Outpatient services increased by 15% from 34,000 in 2024 to 39,000 in 2025. Oral health services have seen a 39% increase in dental services from 9,000 in 2024 to 12,000. Access to mental health services slightly decreased from 3% in 2024 to 2.4% in 2025.

An increase of total injuries was recorded, from 407 in 2024 to 437 injuries in 2025.

Further investigation is needed to conduct an in-depth review of the reported trends.

This report highlights priority areas for targeted action, emphasizing both short-term interventions and long-term programmes to strengthen health outcomes across the Cook Islands.

Our Ministry

The Government of the Cook Islands, through Te Marae Ora Ministry of Health, serves as the nation's primary provider of healthcare service, is responsible for setting national health policies and managing the delivery of health services in the country. TMO operates through five key directorates: Public Health, Oral Health, Primary Health Care, Hospital Health Services, and Planning and Funding. Under the leadership of the Secretary of Health and the Executive team, TMO is committed to upholding its Vision, Mission, and Core Value, ensuring accessible, equitable, and quality healthcare for all.

Our Vision | To Tatou Orama

All people living in the Cook Islands, living healthier and achieving their aspirations.

Iti tangata Kuki Airani katoatoa, e ora'anga matutu, e te au orama ki mua.

Our Mission | To Tatou Akakoro'anga

To provide accessible, affordable health care and equitable health services of the highest quality, by and for all, to improve the health status of the people living in the Cook Islands.

Kia oronga i te tauturu note ora'anga kia tau, e note katoatoa, note akameitaki'anga i te tu ora'anga o te iti tangata e noo ki te Kuki Airani.

Our Values | To Tatou Turanga Tau



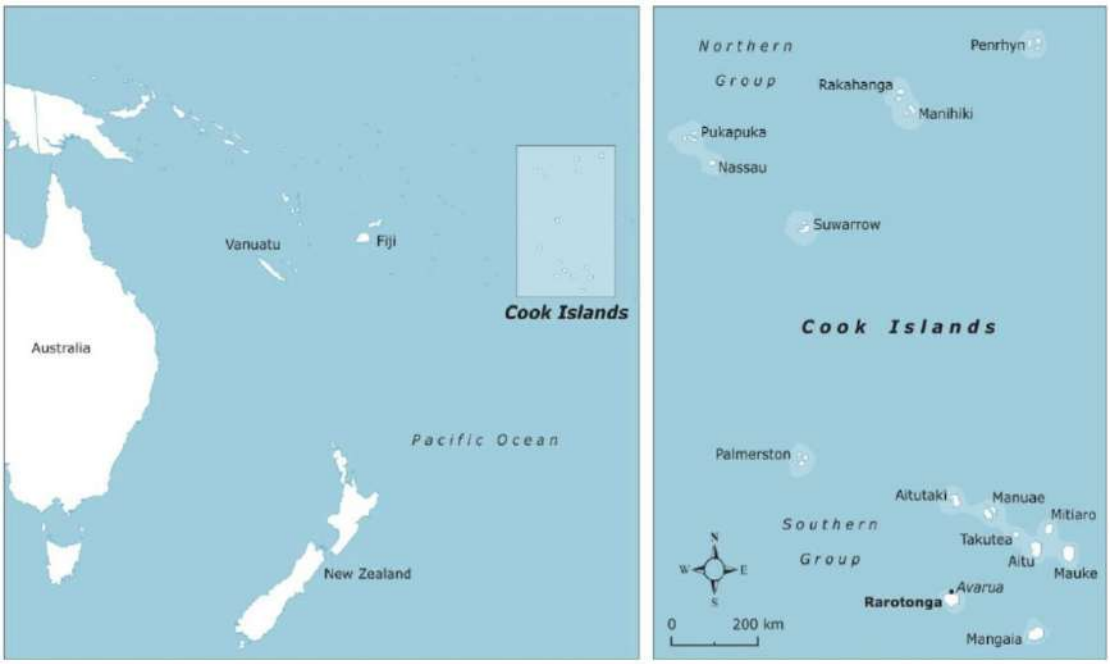
Introduction

The Cook Islands is a small island developing state located in the South Pacific Ocean, comprising 15 islands scattered across approximately 2 million square kilometers of ocean. Among these, only 13 islands are regularly inhabited. The islands are geographically divided into two main groups; the Northern Group and the Southern Group, collectively known as the Pa Enua.

The Northern Group consists of Manihiki, Rakahanga, Pukapuka, Nassau, Penrhyn, and Suwarrow. Suwarrow does not have a permanent population but is intermittently occupied by park rangers from the National Environment Service for conservation and monitoring purposes. The Southern Group includes Aitutaki, Atiu, Mangaia, Mauke, Mitiaro, Palmerston, Manuae, Takutea, and Rarotonga. Takutea and Manuae remain uninhabited and are designated conservation areas without permanent settlement.

Rarotonga is the largest and most populous island and serves as the political, administrative, and economic centre of the Cook Islands. It is also home to the capital, Avarua, and the country's main health and government institutions.

Figure 1: Cook Islands Map



[1]

[1] Blacka, M. J., et al. 2013. "Coastal Adaptation Needs for Extreme Events and Climate Change, Avarua, Rarotonga, Cook Islands - Project Stage 1: Scoping and Collation of Existing Data." Water Research Laboratory [WRL] Technical Report 2013/11. Sydney: University of New South Wales School of Civil and Environmental Engineering.

Health System Overview

Te Marae Ora (TMO) serves as the principal provider of public health care in the Cook Islands, delivering a comprehensive range of public health, primary, and secondary hospital services. The Government provides free health services to eligible populations, including students aged 18 years and under and pensioners aged 60 years and over. Service delivery is supported by visiting specialist teams conducting scheduled outreach clinics across the country. Tertiary care follows a structured referral pathway, with patients referred from Pa Enua facilities to Rarotonga, and where necessary, onwards to overseas providers — primarily in New Zealand. A small number of private providers also operate within the Cook Islands, complementing public service delivery. Despite the country's geographic dispersion, the health system remains adequately resourced to deliver essential care across the population

Information Provision

MedTech Evolution serves as the primary patient management system nationwide, supporting longitudinal patient records, clinical management, reporting, and national-level health data consolidation. Several private providers operating under an Agreement of Cooperation (AOC) with TMO also utilise MedTech Evolution, contributing to a more comprehensive national dataset. These include the Cook Islands Family Welfare Association (CIFWA), Te Vaerua Community Rehabilitation Centre, Rarotonga Medical Centre, Holistic Medical Care, Rarotonga Home Healthcare, and Te Kainga Mental Health & Wellbeing Centre. Internet-based connectivity facilitates timely data sharing between the Pa Enua and TMO headquarters in Rarotonga. While MedTech Evolution supports most core services, additional data sources include national registers, CanReg (Cancer Registry), community clinic reports, and MSupply, with some data streams remaining paper-based or managed through other digital platforms.

Data Exclusions

The following data are excluded from this report:

1. Births and deaths occurring among patients referred overseas.
2. Patients residing overseas for management of chronic conditions.

Snapshot 2025

Based on Key Facts Table.

Total Births

182

Crude Birth Rate (%)

12.1

Cook Islands Resident Population

14,987

*based on 2021 Population Census

Total Deaths

130

Crude Death Rate (%)

7.5

Fetal/Infant/Neonatal /Under-five Mortality Rate (%)

5.5

Maternal Mortality

0.0

No reported mortality

NCD Premature Deaths (%)

31.5

Probability of Premature Deaths (%)

20.7

5 year average

Total Fertility Rate *per woman

1.9

Adolescent Birth Rate *per 1,000

34.4

Contraceptive Prevalence Rate (%)

29.3

NCD Mortality Rate (%)

13.2

Aged 15-64

86.8

Aged 65+

Life Expectancy at Birth

73.3 78.7





Adult Mortality (%)

8.7

Males

6.7

Females

Skilled Birth Attendance (%)

100.0

Bulletin Snapshot cont.



The **total fertility rate** for women is **1.9 births** per woman.



5.8 suicide **rate** per **100,000 population** in 2025



Acute respiratory infections (ARIs) accounted for **51%** of all **notifiable diseases** reported in **2025**



No **COVID** cases **reported** in **2025**



3,533 STI lab tests conducted. **103** confirmed **cases**.



5,756 NCDs was reported (15yrs+)



170 new **cases** of **diabetes** reported in 2025



156 new **hypertension** cases reported in **2025**



96% BCG and **HepB** immunisation **coverage rate**



4.5 cancer **incidence rate** with **75 confirmed** cases



Over **3,900 patients** seen by **outpatient** services



9.8% Cook Islands bed **occupancy rate**



Surgical volume of **4,600** surgeries per **100,000** population.



554 domestic and **327 international** patient referrals



12,223 dental services **delivered**.



Anxiety accounted for **36%** of all **mental health** diagnosis in 2025



91% safe water test results in **schools** and **93%** in **community**



26 doctors and **84** nurses & midwives personnel per **10,000 population**



Health care accounts for **7.3%** of total **government expenditure**



223 road crashed were reported in **2025**, accounting for **51%** of all **injuries**



Cuts accounted for **14%** of all **injuries** reported

Key Facts Table

This table presents a summary of key indicators to provide a quick overview of the most important findings in the report. Figures have been reinstated and updated where necessary to best align with the reporting years and ensure consistency across the dataset.

Table 1: National Health Information Bulletin Key Facts Table, Cook Islands 2021-2025

	2021	2022	2023	2024	2025
National Statistics resident population estimates	**17,400**	**17,600**	**16,800**	**17,400**	**17,300**
Cook Islands census population resident numbers	**14,987**	**14,987**	**14,987**	**14,987**	**14,987**
Total number of births	**206**	**229**	**205**	**196**	**182**
Total number of deaths	**126**	**106**	**130**	**132**	**130**
Total Fertility Rate (TFR per woman)	**2.1**	**2.4**	**2.1**	**2.0**	**1.9**
Crude Birth Rate (CBR per 1,000)	**13.7**	**15.3**	**13.7**	**13.1**	**12.1**
Crude Death Rate (CDR per 1,000)	**7.3**	**6.8**	**8.8**	**7.6**	**7.5**
Adolescent (15-19 years) Birth Rate	**32.6**	**13.7**	**34.4**	**34.4**	**34.4**
Contraceptive Prevalence Rate	**17.8**	**26.2**	**37.5**	**33.2**	**29.3**
Maternal Mortality Ratio	**0**	**0**	**0**	**0**	**0**
Skilled Birth Attendance (%)	**100**	**100**	**100**	**100**	**100**
Life Expectancy at birth					
Both	76.5	76.1	75.8	75.8	76.0
Males	72.8	72.6	72.3	72.5	73.3
Females	80.2	79.5	79.3	79.1	78.7
Fetal Mortality Rate (per 1,000)	**4.8**	**4.3**	**14.4**	**5.1**	**5.5**
Neonatal Mortality Rate (per 1,000)	**0**	**21.8**	**14.6**	**5.1**	**5.5**
Infant Mortality Rate (IMR per 1,000)	**0**	**21.8**	**29.3**	**5.1**	**5.5**
Under 5 Mortality (U5M per 1,000)	**9.7**	**26.2**	**39.0**	**5.1**	**5.5**
Adult Mortality (%) (5 year avg.)					
Males	14.1	13.3	14.2	7.7	8.7
Females	9.0	8.8	7.9	6.9	6.7
NCD Mortality (%)					
Aged 15-64	12.7	12.5	12.2	12.9	13.2
Aged 65+	87.3	87.5	87.7	87.1	86.8
NCD Premature Deaths (%) 30-69years					
Both	41.7	34.1	28.5	36.5	31.5
Males	42.9	43.2	39.0	34.5	38.9
Females	40.4	25.0	17.9	38.5	22.4
Probability of Premature NCD Death (%)(5 year avg.)					
Both	19.7	20.3	19.7	20.2	20.7
Males	22.5	23.6	24.0	22.9	24.8
Females	16.9	17.0	15.4	17.4	16.6

Cook Islands Population

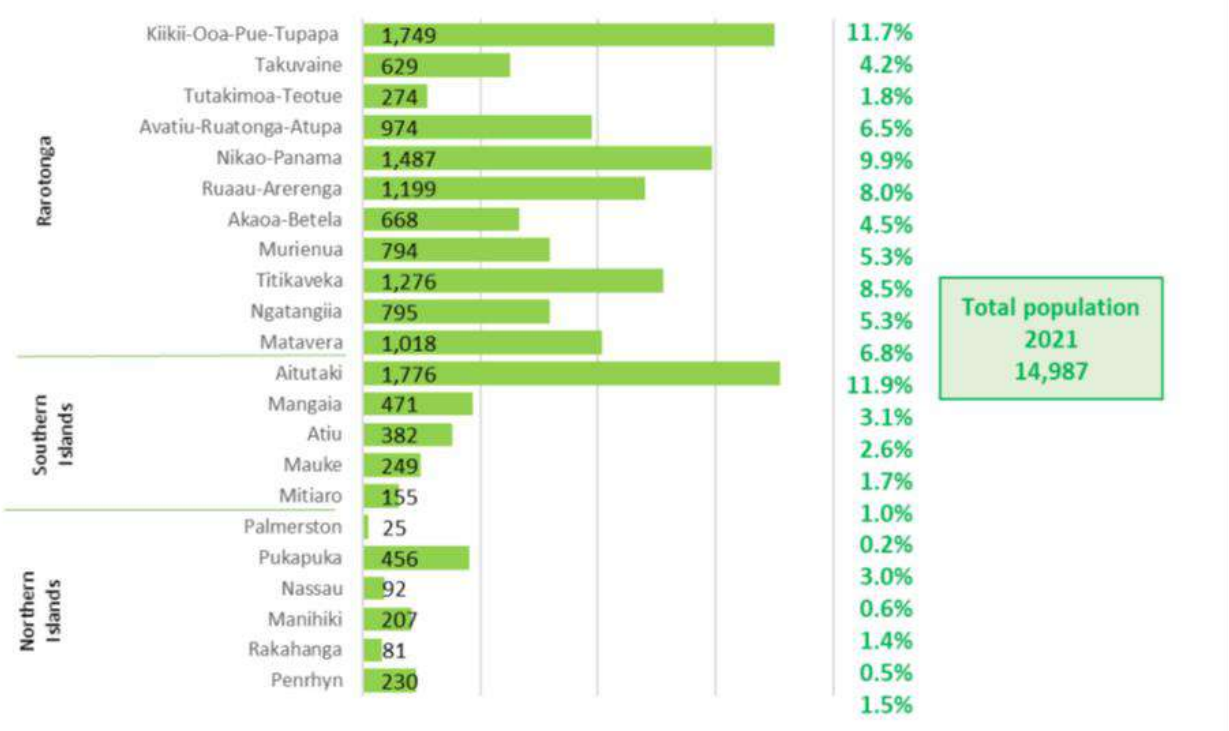
According to the 2021 Census, the total population of the Cook Islands was 15,040. This represents an uncertain increase of 1.2% compared to the 2016 Census. The census count includes all persons present in the Cook Islands at the time of enumeration, including both usual residents and visitors. Cook Islands residents who were overseas during the census period were not included in the total population figure. The 2021 Census remains the most recent official population count. An updated population figure will be available following the 2026 Census.

Resident population by region

According to the 2021 Census, approximately 72% of the resident population lived on Rarotonga, while the remaining 28% resided in the Pa Enua (Outer Islands). Of those living in the Pa Enua: around 20% of the total resident population lived in the Southern Group islands (Aitutaki, Atiu, Palmerston, Mangaia, Mauke, and Mitiaro). Approximately 7% lived in the Northern Group islands (Manihiki, Rakahang, Pukapuka, Nassau, and Penrhyn).

These distributions continue to inform planning and services delivery until updated results from the 2026 Census become available.

Figure 2: Resident population by region 2021



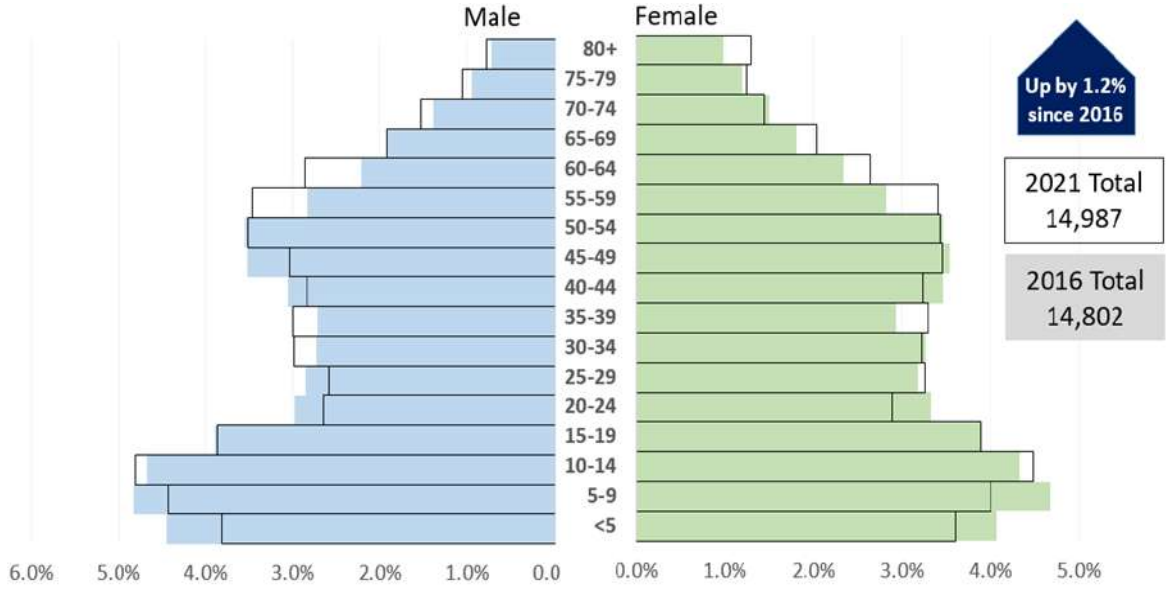
Age Distribution

Figure 3 presents the population pyramids from the 2016 and 2021 consisting of 49% males and 51% females. The charts reveal noticeable shifts in age distribution.

A comparison of the two census periods highlights notable shifts in the age structure. There has been a clear increase in the proportion of older persons, particularly those aged 50 years and above. At the same time, the population aged 45 years and under has declined. These patterns indicate gradual population ageing.

In contrast, there was a noticeable decline in the number of children (aged 5 and under) and young adults (aged 20 to 29). This trend points more toward strong outward migration rather than natural decline due to mortality. Migration is largely driven by opportunities for further education, employment opportunities, and higher income overseas.

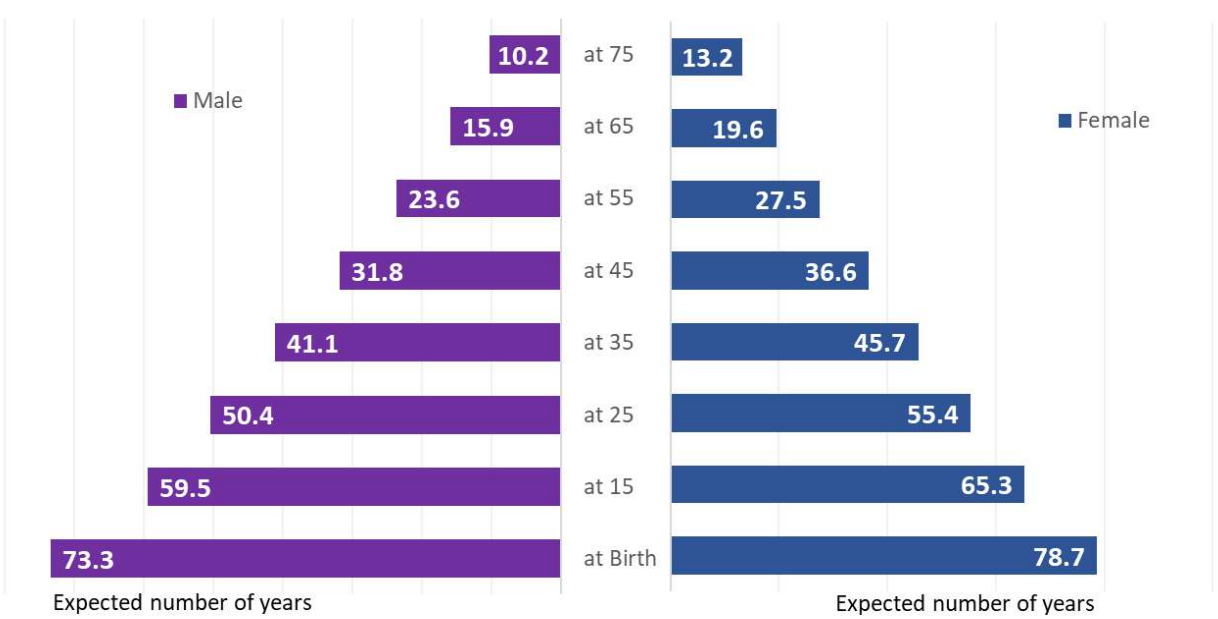
Figure 3: Age distribution of the resident population by sex 2016 (shaded) 2021 (outline)



Life expectancy

Figure 4 presents an estimate of the average number of years a person is expected to live, calculated using the number of deaths reported across each age group. In 2025, overall life expectancy at birth remained at 76 years. Females continued to have a higher life expectancy at 78.7 years, although this reflects a slight decline from 79.1 years in 2024. In contrast, male life expectancy improved slightly to 73.3 years, up from 72.5 years in the previous year.

Figure 4: Life expectancy of life remaining at different stages of life 2025



Health Status | Turanga Ora

Maternal and child health

Antenatal and Postnatal Care Coverage

In the Cook Islands, most women aged 15-49 receive comprehensive care both before and after giving birth. In 2025, 99% of pregnant women had attended at least one antenatal care visit while 95% (2024: 93%) completed the recommended four or more visits, in line with the World Health Organization's (WHO) recommendations. This represents a 2% increase in completion of recommended visits.

Postnatal care coverage rates for both mothers and newborns are approximately 97% (2024: 93%). The remaining 3% of mothers travelled overseas, where postnatal care was provided in another country. These services were primarily delivered through the pediatric, gynaecology clinic, and primary healthcare nurses complemented by the Cook Islands Child Welfare Association (CICWA).

Exclusive breastfeeding rate 0-6 months

In 2025, approximately 93%[2] (2024:90%) of babies born in the Cook Islands were exclusively breastfed at birth. However by the age of three months, exclusive breastfeeding rates declined by 15% (2024 :< 20%).

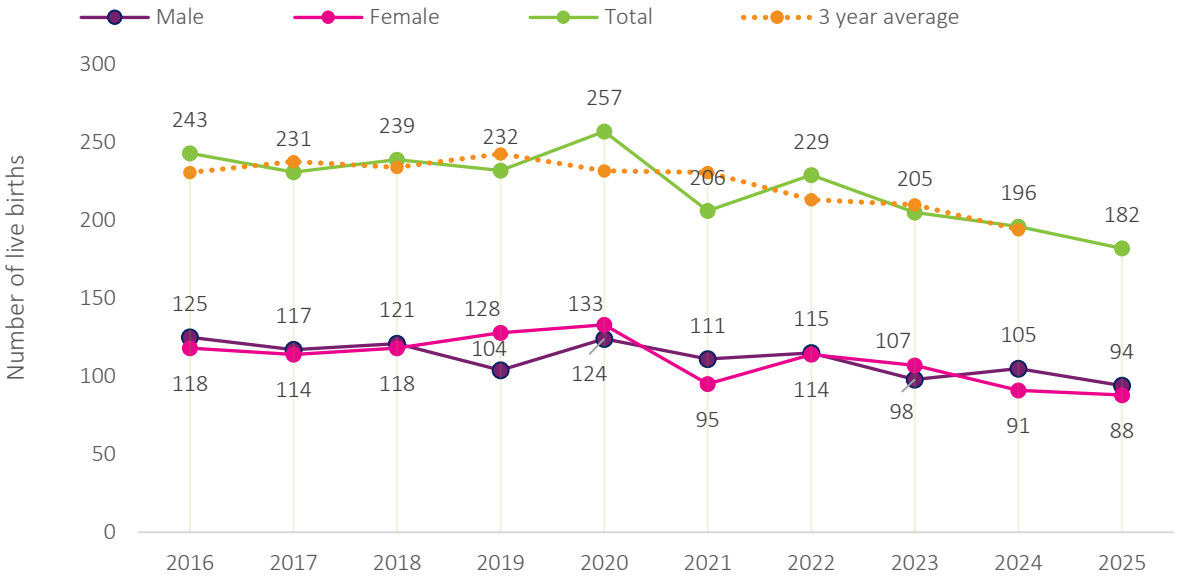
[2] The data reflects 0 to 5 months, sourced from Medtech Evo BF and BF1 screening templates

This decline is largely due to mothers returning to work or school, relatives caring for the infant, and the early introduction of supplements or other feeds.

Live births

The total number of live births delivered over the last ten years have shown a decline from an initial peak in 2020 with 257 live births to 182 in 2025; reflecting a 29% decline of live births in the Cook Islands. There was not much difference in the number of births between males and females, with a sex ratio of one male to one female (1,114 males and 1,106 females).

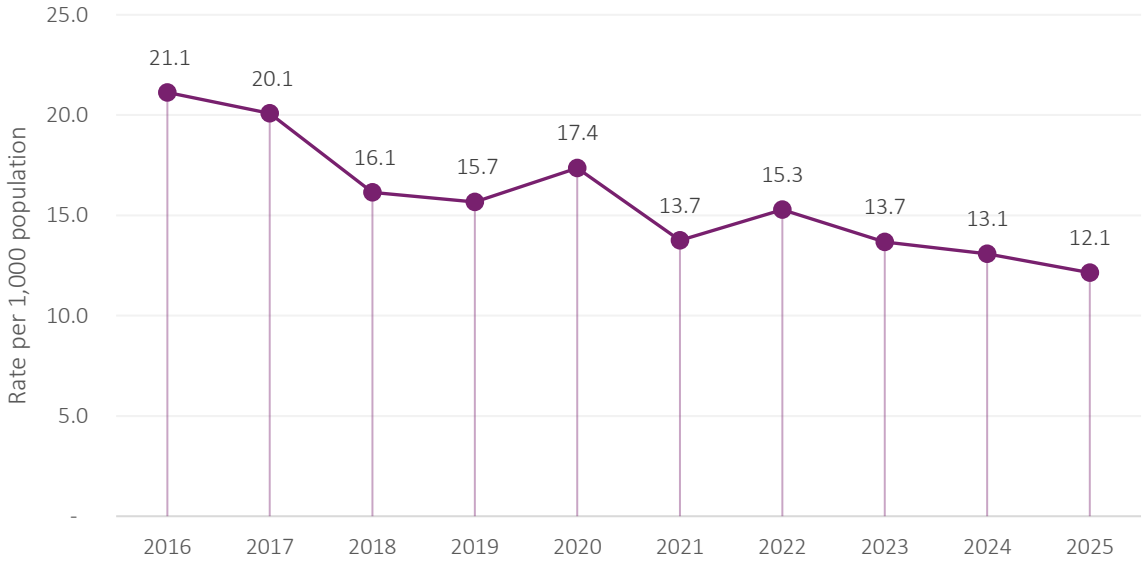
Figure 5: Live Births and Three Year Rolling Average by Sex and Year, Cook Islands 2016-2025



Crude Birth Rate (CBR)

Figure 6 shows the crude birth rate representing the number of live births per 1,000 population in the Cook Islands each year. From 2016 to 2025, the rate declined steadily from 21.1 to 12.1 per 1,000 population, respectively. While slight increases were observed in 2020 and 2022, these were temporary and did not alter the overall downward pattern. This decrease may be influenced by factors such as migration of young adults, changing fertility patterns, preferences for smaller families, and social or economic conditions that may delay or reduce childbearing. Over time, this trend could have important implications for population growth and the country's age structure.

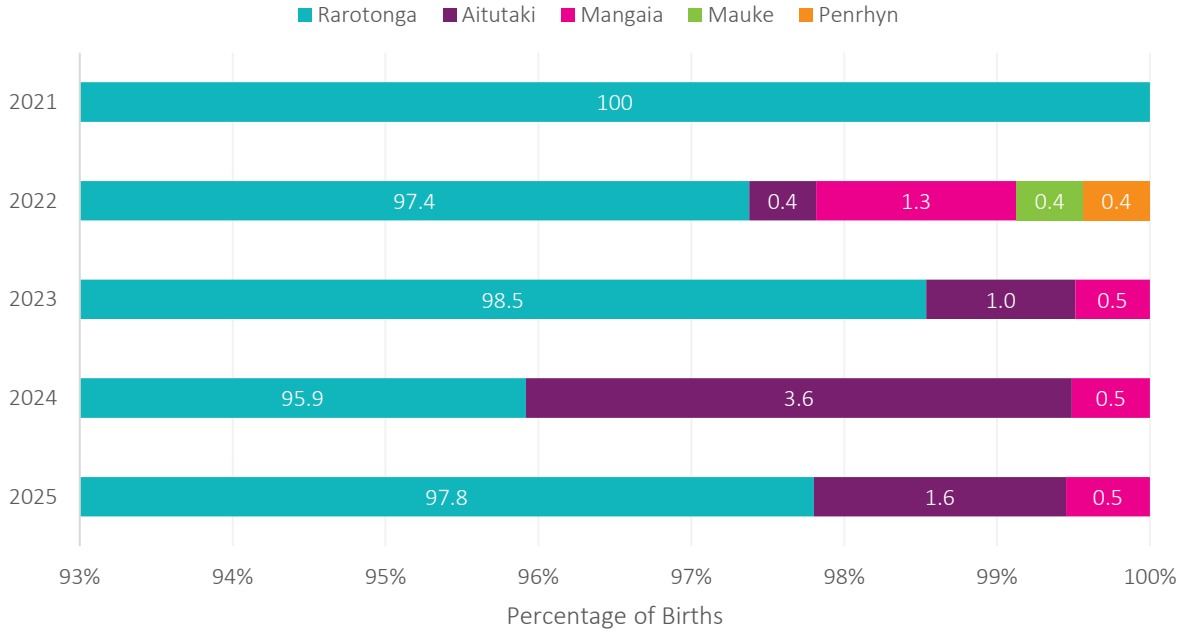
Figure 6: Crude Live Birth Rate Per 1,000 Population, Cook Islands 2016-2025



Live Births by Island

As shown in Figure 7, over 95% of births in the Cook Islands occur on the main island of Rarotonga. Over the past five years, only a small number of births have been recorded in the Pa Enua - Aitutaki, Mangaia, Mauke and Penrhyn. While Rarotonga Hospital remains the primary facility for childbirth, occasional deliveries still take place in the Pa Enua.

Figure 7: Percentage Distribution of Births by Island, Cook Islands 2021-2025



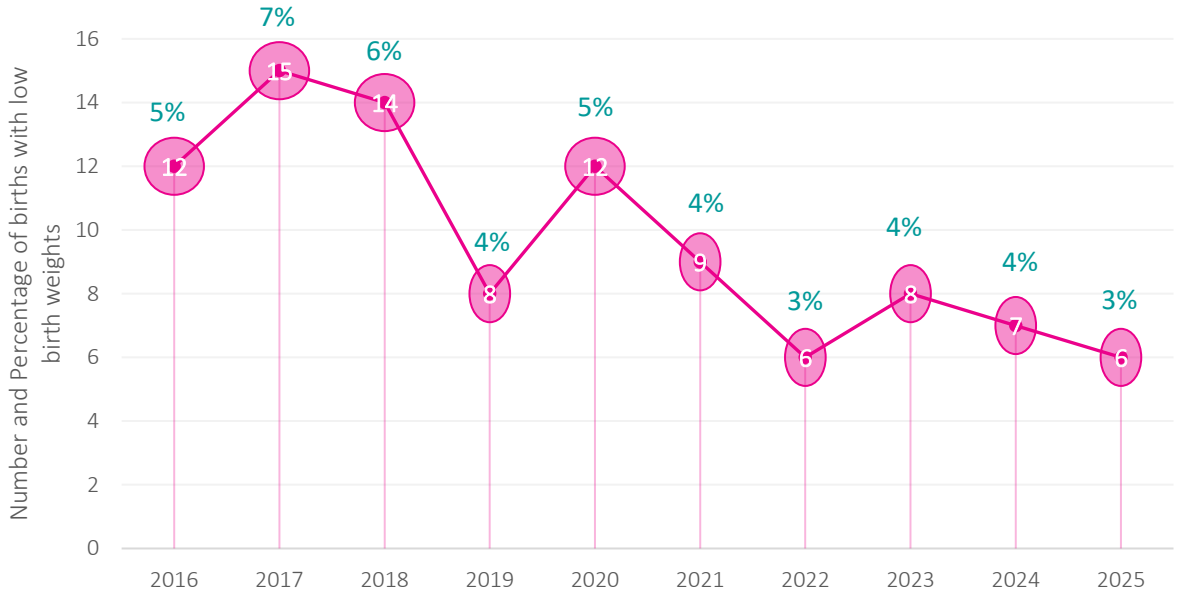
Birth Attended by Skilled Health Personnel

Skilled birth attendance remained at 100% over the past five years (2021-2025), indicating that all births were supported by qualified health personnel. From 2024 to 2025, the number of recorded home births stayed constant at four. These home births were primarily associated with caregiving responsibilities, unplanned circumstances, preference or limited access to transportation.

Birth weight

A normal birth weight ranges from 2,500 to 4,200 grams, while babies born weighing less than 2,500 grams are classified as having low birth weight (LBW). As shown in Figure 8, low birth weight showed an overall decline from 2016 to 2025, despite some fluctuations over the period. Cases peaked at 15 (7%) in 2017 before decreasing to 6 (3%) in both 2022 and 2025.

Figure 8: Number and Percentage of Births with Birth Weight Less than 2500 grams, 2016-2025

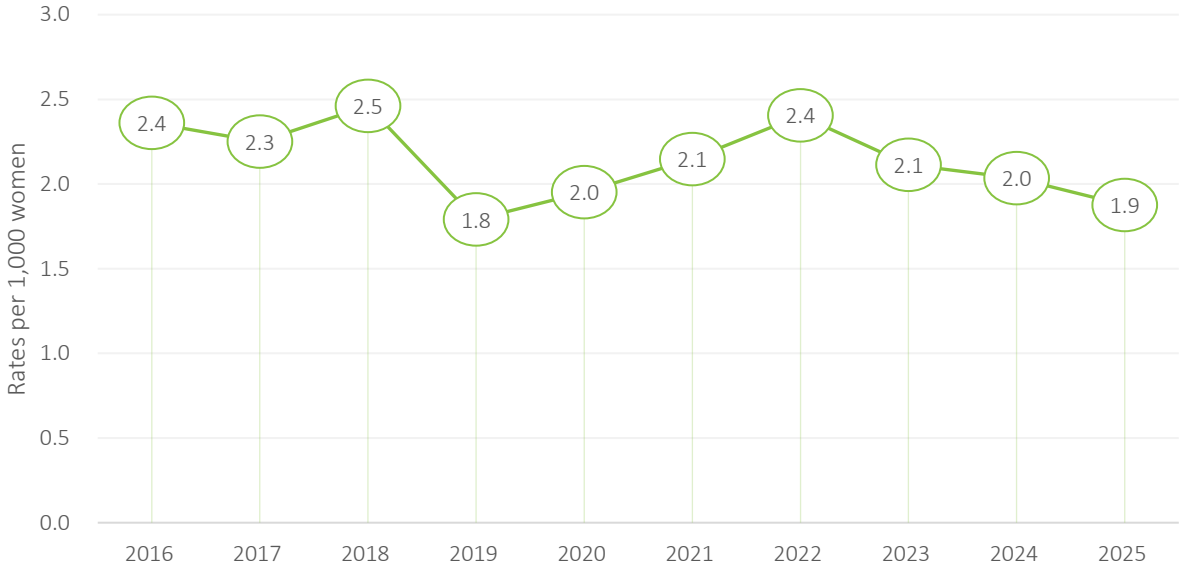


Fertility

Total fertility rate (TFR) measures the average number of children a woman would have over her lifetime[3] based on current age-specific fertility rates. As shown in Figure 9, TFR further declined from 2.4 in 2016 to 1.9 in 2025, representing a decrease of approximately 20.8%.

[3] Defined as 15 to 49 years

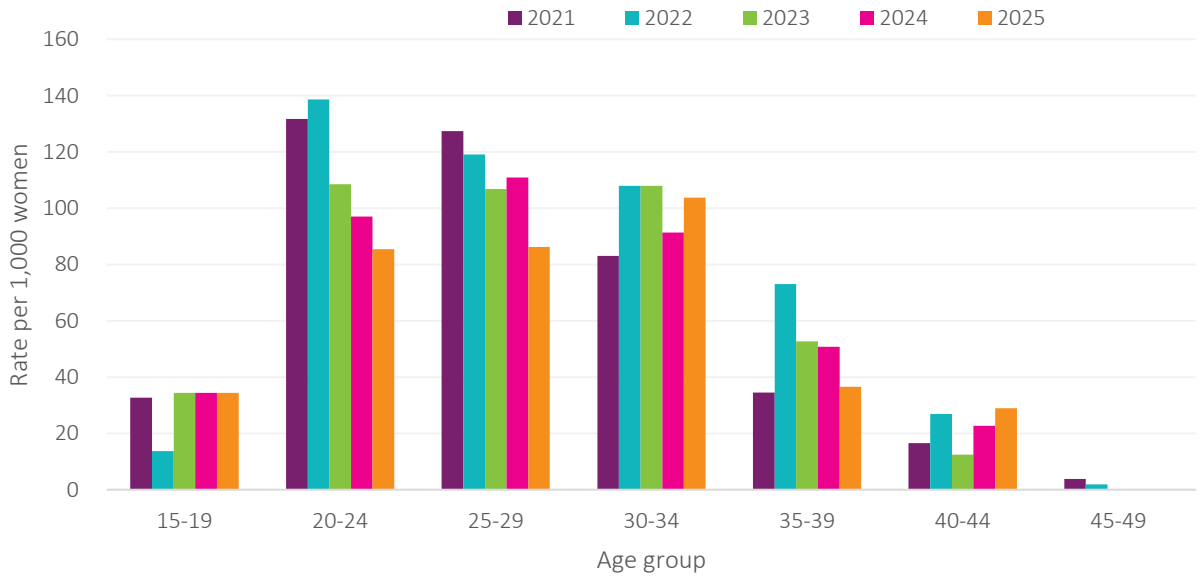
Figure 9: Total Fertility Rate per 1,000 Women, Cook Islands 2016-2025



Age-Specific Fertility Rate

Over the past five years, the highest number of births in the Cook Islands has consistently occurred among women aged 20 to 29. The trend suggests a decline in the age-specific fertility rates across this period, where 2022 recorded the highest number of child bearing women (481) and since then decreased to only 375 in 2025.

Figure 10: Age Specific Fertility Rates, Cook Islands 2021-2025



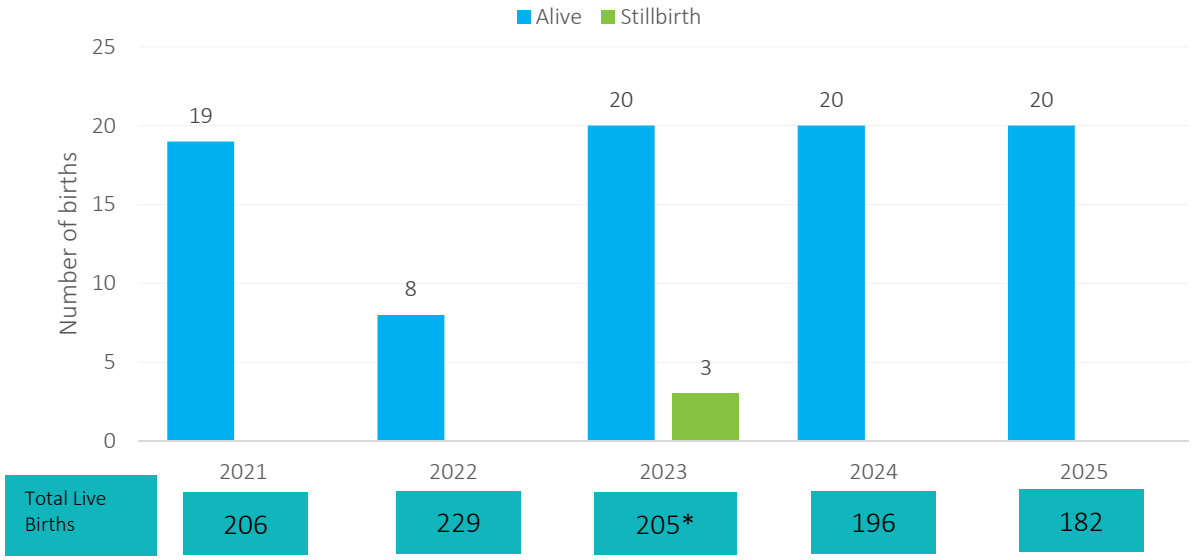
Adolescent Health

Adolescent pregnancy

Adolescent births are defined as births to mothers aged 15-19 years. Figure 11, shows 90 adolescent mothers gave birth between 2021 and 2025. The number of adolescent mothers delivering babies remained mostly stable, with a significant decline in 2022 and remained stable in the following years. This reports an annual average of 18 adolescent pregnancies during this 5 year period.

Stillbirths[4] among adolescent mothers were rare, with 3 cases reported in 2023.

Figure 11: Number of Adolescent Mothers to Birth, Cook Islands 2021-2025

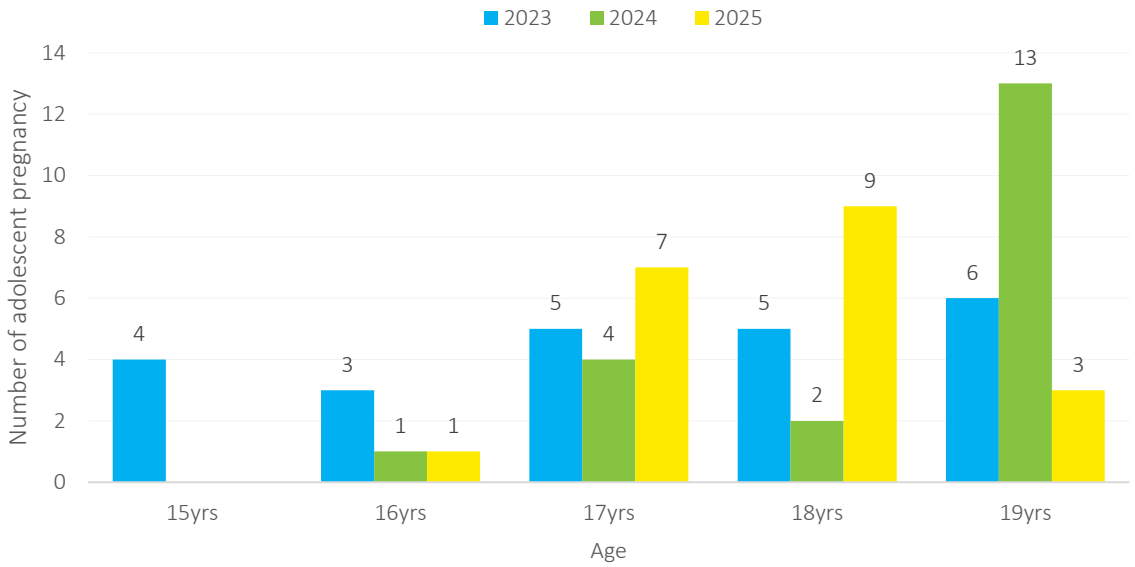


Adolescent Pregnancy

Adolescent pregnancies were consistently concentrated among those aged 17-19 years across all three years, while pregnancies among younger adolescents aged 15-16 years remained low, with fewer than four cases reported (Figure 12). The number of adolescent mothers decreased from 23 in 2023 to 20 in both 2024 and 2025.

[4] Defined as babies born with no signs of life at or after 28 weeks of gestation.

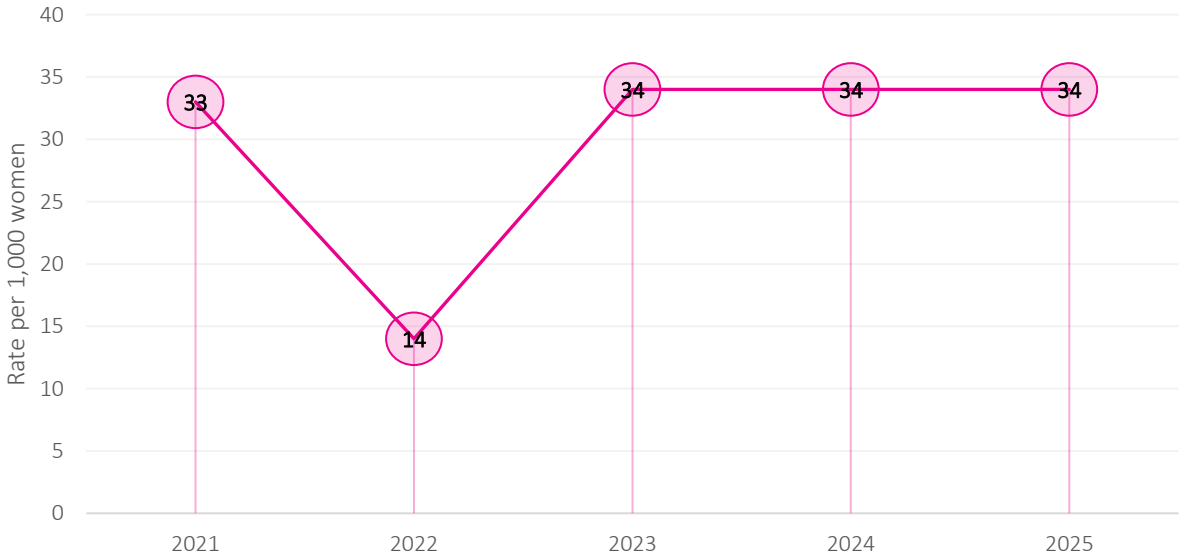
Figure 12: Adolescent Pregnancies by Age, Cook Islands 2023-2025



Adolescent Birth Rate

Figure 13 shows that over the last five years, an average of 30 live births per 1,000 adolescent women were recorded annually. In 2022, the rate dropped by 57% from 33 per 1,000 (2021) to 14 per 1,000 (2022). From 2023 onwards, the rate has been consistent at 34 per 1,000 adolescent women for the last three years. While the decline could be attributed to factors ranging from the COVID-19 pandemic and migration to individual maternal choices, additional research is needed to determine the primary cause.

Figure 13: Adolescent Birth Rate per 1,000, Cook Islands 2021-2025



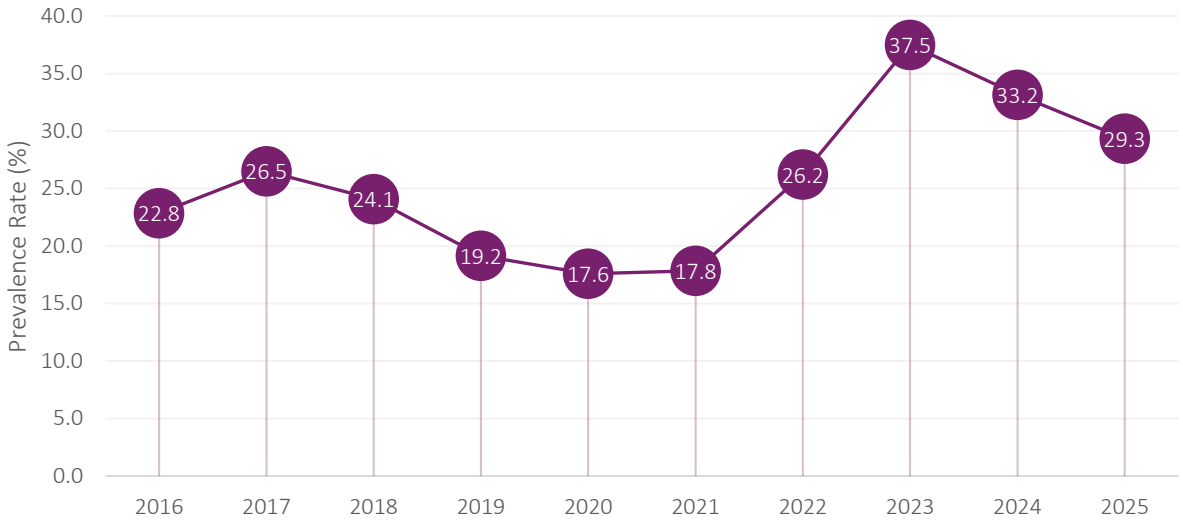
Contraceptives

TMO and its partners provide a range of modern contraceptive methods to support individuals and couples in planning, spacing, and determining the number of children. Contraceptives are methods or devices used to prevent pregnancy, including options such as oral pills, injections, implants, intrauterine devices (IUDs), and condoms. These services aim to promote informed choice, reproductive health, and overall wellbeing. TMO supports condom distribution through 16 allocated community dispenser sites.

Prevalence Rate

The prevalence rate[5] fluctuated between 2016 and 2025, with a sharp increase in 2023 at 37.5% and followed a moderate decrease in 2024 (33.2%) and 2025 (29.3%).

Figure 14: Contraceptive Prevalence Rate, Cook Islands 2016-2025

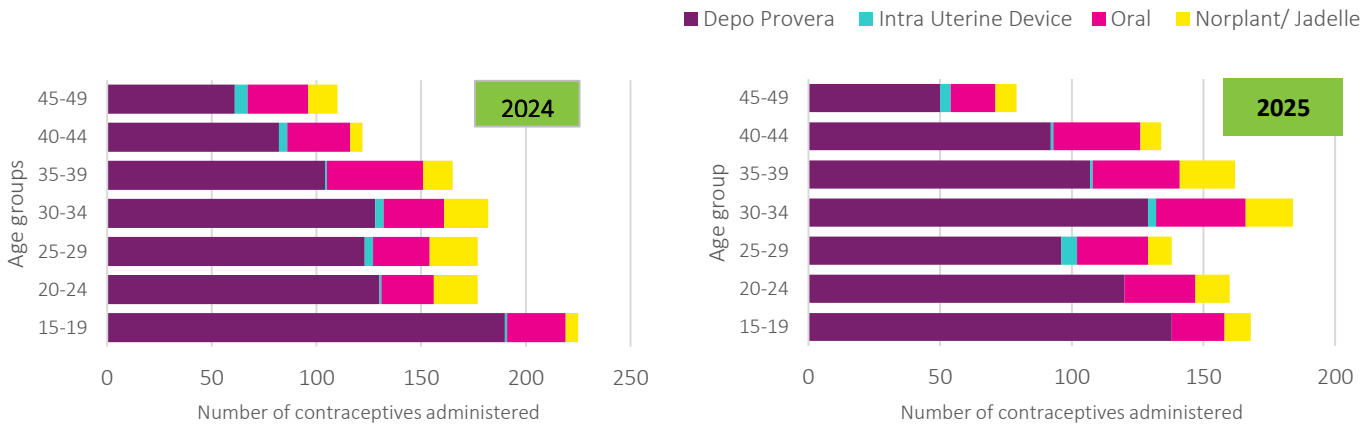


Contraceptive Methods by Age-group

In 2025, a total of 1,025 contraceptives were administered, compared to 1,158 in 2024, representing an 11.5% decrease. Contraceptive use patterns shifted between the two years. In 2024, adolescents aged 15-19 years had the highest use (225), whereas in 2025, women aged 30-34 years recorded the highest overall use (184). Depo Provera remained the most used contraceptive method across all age groups, while intrauterine devices continued to be used minimally.

[5] CPR does not include condoms, owing to limited data on condom distribution and uptake.

Figure 15: Females Utilising Contraceptive Methods by Age Group, Cook Islands 2024-2025



Mortality

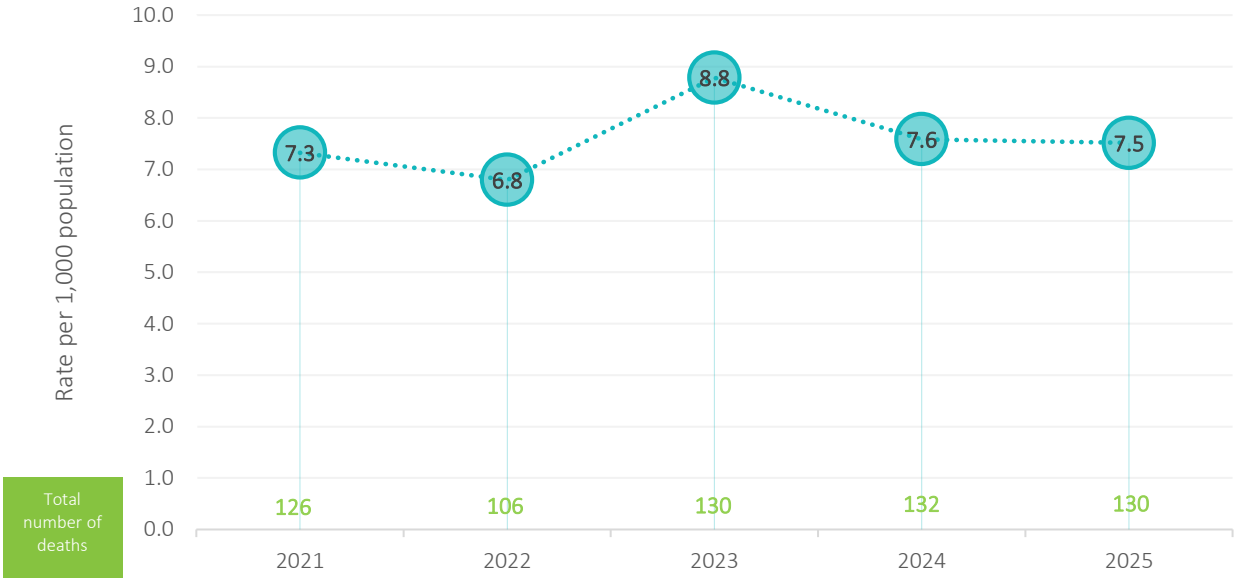
All deaths that occur in a hospital or health centre are documented with a death certificate issued by medical officers or nurse practitioners. If the cause of death is unknown or there is no available medical history, a Coroner's investigation is required. Once completed, the death certificate is forwarded by the Funeral Director to the Ministry of Justice for registration.

Crude Death Rate

The crude death rate (CDR) measures the number of deaths per 1,000 people in a given population over a set period, typically one year.

Crude death rate (CDR) is the measure of how many people die per thousand population. Figure 16 shows, between 2019 and 2025 that the CDR remains at a relatively stable trend. In 2025 alone, there were a total of 130 deaths that were reported. Over the last five years, CDR in the Cook Islands has had a slight increase in death rates and reported an average of 7.6 during this period.

Figure 16: Crude Death Rate per 1,000 Population, Cook Islands 2021-2025

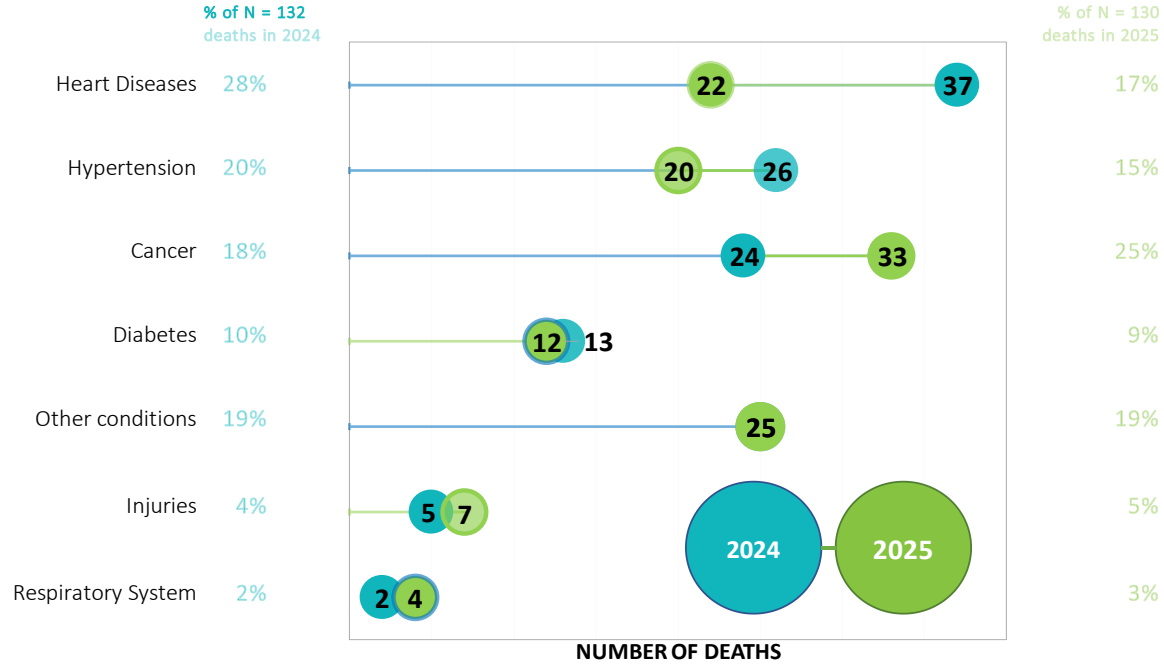


Note: CDR for 2024 has been reviewed and updated.

Cause of Death

In 2025 cancer is the leading cause of death with 25% (2024:18%). Heat disease, although a leading cause in 2024 (28%), a significant decline was recorded in 2025 to 17%. Other conditions remained consistent at 19%. These "other conditions" included ill-defined causes, infectious diseases, and deaths related to digestive, skin, and genitourinary conditions.

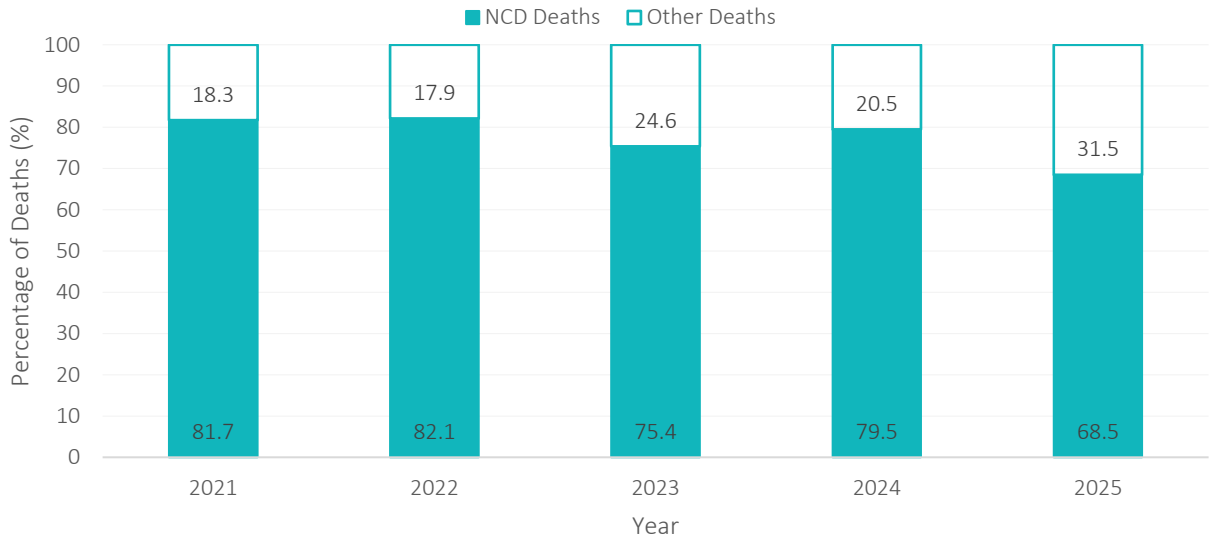
Figure 17: Causes of Death by ICD-10 Groups, Cook Islands 2024 and 2025



NCD Mortality

Figure 18 shows between 2020 and 2025, NCDs remained the leading cause of death in the Cook Islands, averaging 75.4% of all deaths annually. There is some fluctuation year to year with 2021 and 2022 showing particularly high NCD death shares, while 2023 and 2024 remain elevated but slightly lower, and 2025 shows a notable drop to 68.5%.

Figure 18: Percentage of NCD Deaths to Other Deaths, Cook Islands 2021-2025

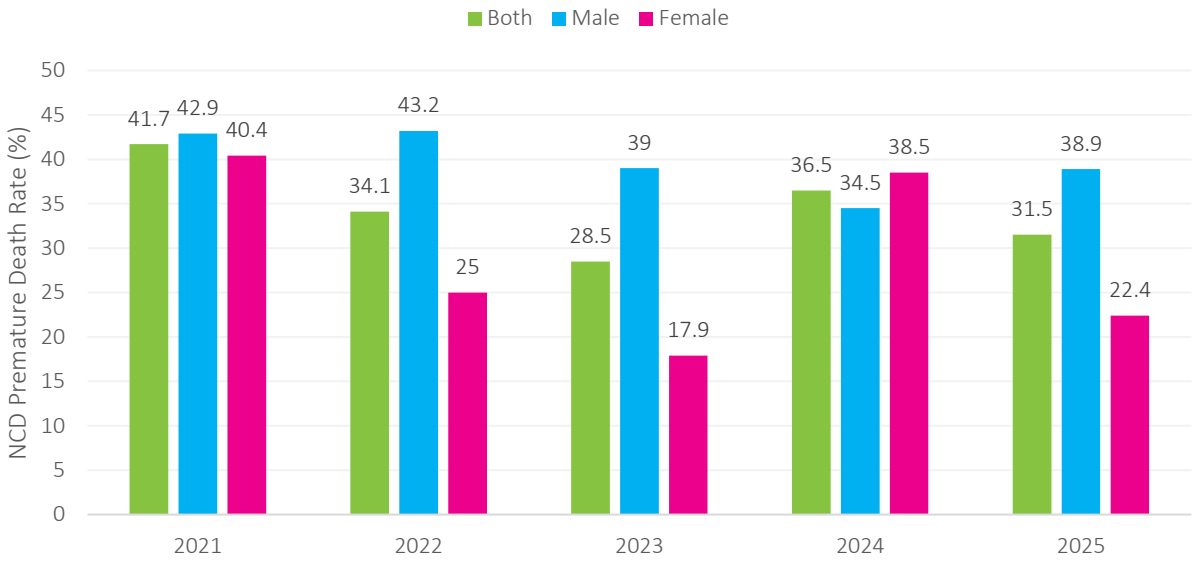


NCD Premature Death by Sex

NCD premature death refers to deaths from chronic conditions such as cardiovascular diseases, cancers, diabetes, and chronic respiratory diseases occurring before age 70. These deaths are largely preventable through early detection, healthy lifestyle choices, and management of risk factors including smoking, poor diet, physical inactivity, and harmful alcohol use.

Figure 19 shows premature NCD deaths declined from 41.7% in 2021 to 28.5% in 2023, before rising to 36.5% in 2024 and easing to 31.5% in 2025. Except in 2024, males consistently recorded higher rates than females, with female rates showing greater fluctuation over the period.

Figure 19: NCD Premature Death (30-69 years), Cook Islands 2021-2025

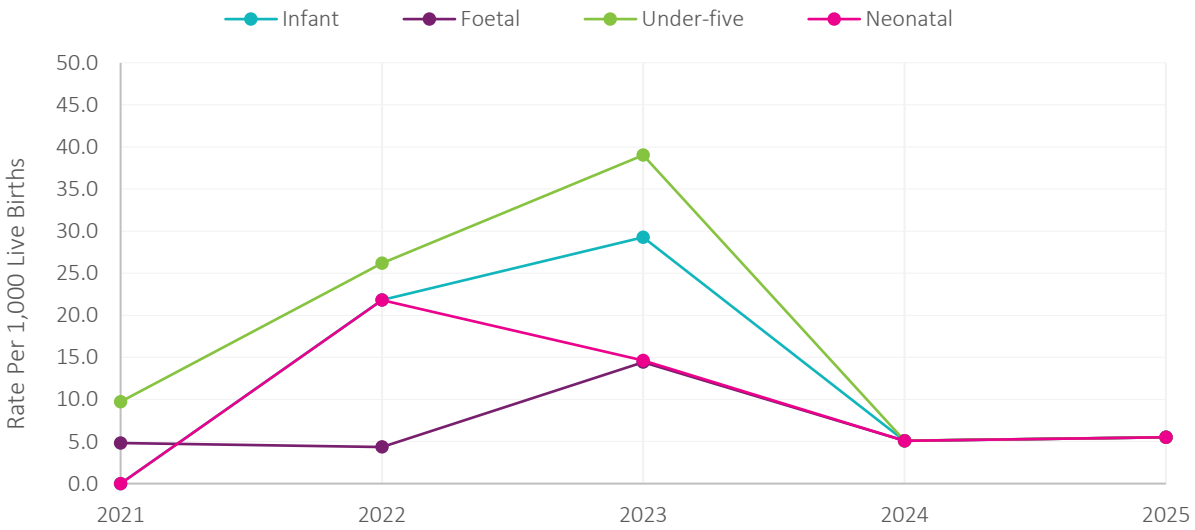


Foetal, Neonatal, Infant and Under-Five Mortality

Foetal death (stillbirth) occurs when a fetus dies in utero after 20-28 weeks of gestation, while neonatal death refers to the loss of a live-born infant within the first 28 days. Infant mortality includes deaths before age one, and under-5 mortality measures deaths occurring before age five.

Figure 20 shows that between 2021 and 2025, mortality rates exhibited significant volatility, peaking sharply in 2023 across all categories most notably under-five mortality before declining in 2024. This decline brought rates to approximately 5.0 per 1,000 live births. By 2025, all four indicators (foetal, neonatal, infant, and under-five) stabilised at 5.4 per 1,000 live births.

Figure 20: Foetal, Neonatal, Infant, and Under-Five Mortality Rates, Cook Islands 2021-2025



Maternal Mortality Ratio (MMR)

Maternal mortality reports the number of women who die during pregnancy, childbirth, or within a few weeks after giving birth. Since 1995, the Cook Islands have recorded zero maternal deaths.

Tuberculosis (TB) Mortality Rate

In 2025, no deaths due to tuberculosis (TB) were reported in the Cook Islands, consistent with 2024. More detailed information on TB cases is provided in the appendix.

Malaria Mortality Rate

There have been no confirmed cases of malaria deaths in the country over the past ten years (2016-2025).

Dengue Mortality Rate

There have been no confirmed cases of dengue deaths in the country over the past ten years (2016-2025).

AIDS-related Mortality Rate

There have been no confirmed cases of AIDS-related deaths in the country from 2016 to 2024. However, in 2025 recorded one death relating to AIDS.

Death Rate due to Road Crashes

From 2021 to 2025, a total of 13 motor vehicle deaths were recorded. Males accounted for 69% of all road traffic fatalities during this period. In 2025, 5 road traffic injury fatalities were recorded compared to only one in 2024.

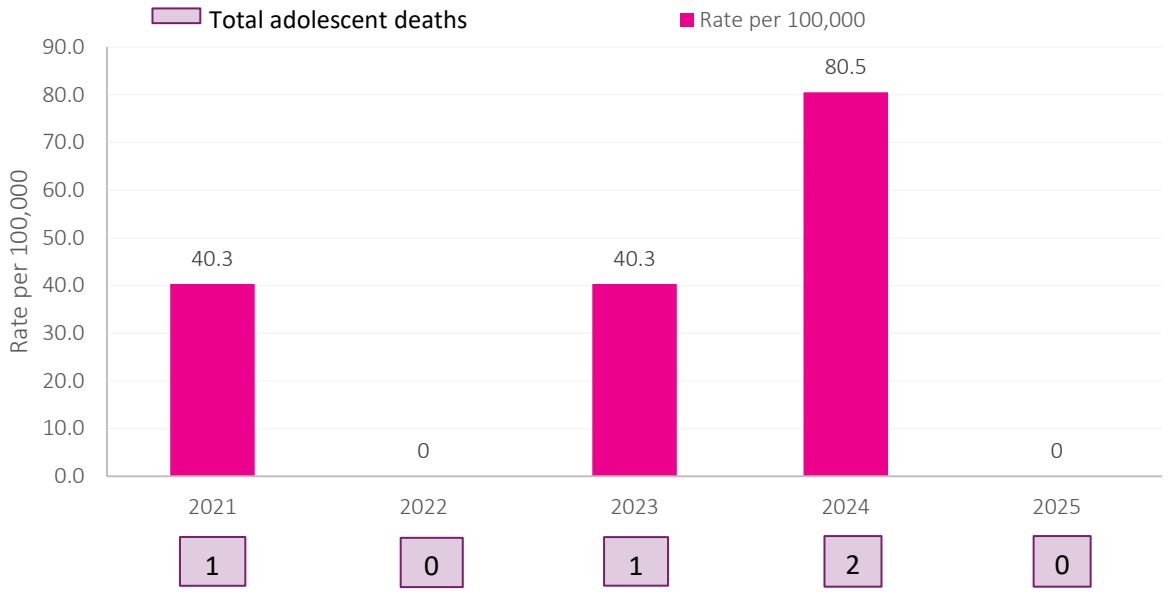
Mortality from Drowning

No drowning fatalities were reported in 2025, compared to 3 in 2024.

Adolescent Mortality Rate

A total of four adolescent (ages 10-19 years) deaths were recorded from 2021 to 2025. The mortality rate fluctuated over the period, peaking at 80.5 per 100,000 in 2024, and dropping to zero in 2025. While this rate appears high in 2024, it represents less than 1% of the total adolescent population. These variations reflect the small population size, where one or two deaths can significantly affect the rate.

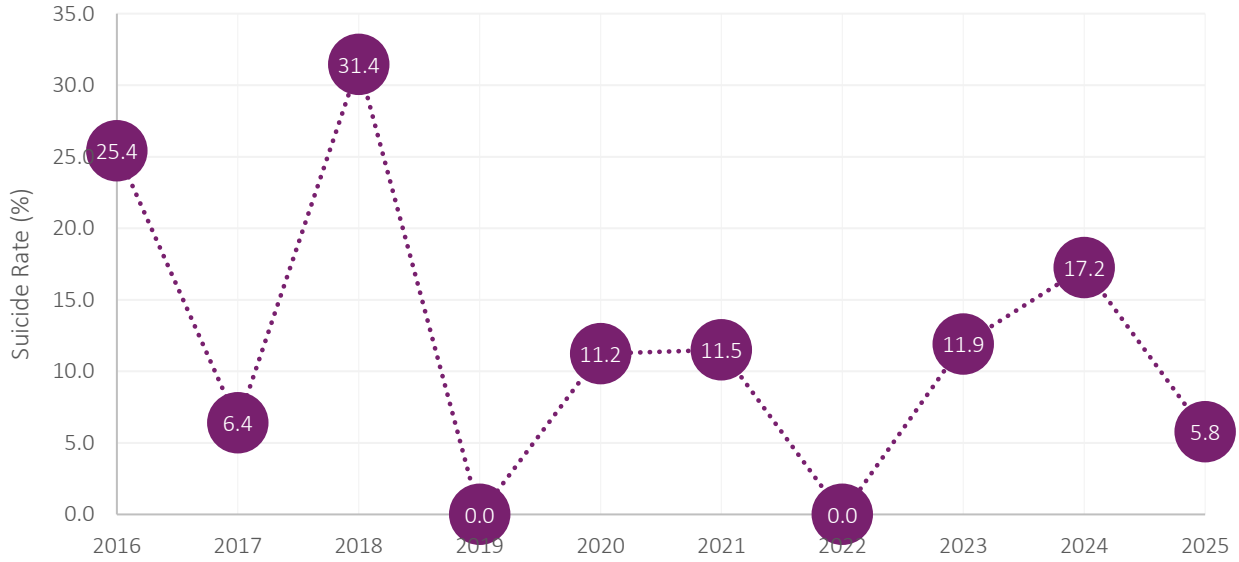
Figure 21: Adolescent Mortality Rate per 100,000 Resident Population, Cook Islands 2019-2025



Suicide Rate

Figure 22 shows a varied suicide rates from 2016 to 2025. The rate peaked at 31.4 per 100,000 in 2018, dropped to zero in 2019 and 2022, and remained below 12 per 100,000 between 2020 and 2023. In 2024, the rate increased to 17.2 per 100,000 before declining to 5.8 per 100,000 in 2025.

Figure 22: Suicide Rate per 100,000 Resident Population, Cook Islands 2016-2025



Note: The resident population estimates were used for each year's computations.

Between 2016 and 2025, 19 suicide deaths were recorded, 16 males and 3 females. Males accounted for 84% of suicide deaths.

Table 2: Number of Suicides by Sex, Cook Islands 2016-2025

Year	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	**Total**
Male	3	1	5	0	1	1	0	1	3	1	**16**
Female	0	0	0	0	1	1	0	1	0	0	**3**

Communicable Diseases

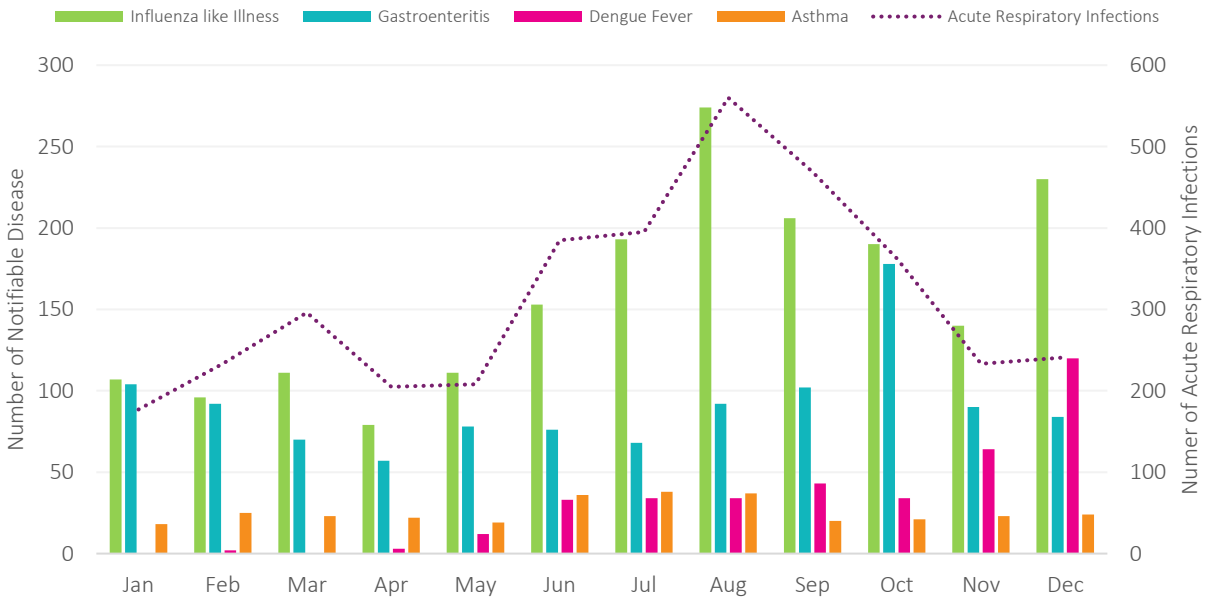
Notifiable Diseases

In 2025, the total notifiable disease reported was 7,431, a 24% increase compared to last year (2024: 5,868). Of these, 86% accounted for the following top five conditions:

- Acute Respiratory Infections (3,765 cases)
- Influenza-like Illness (1,890 cases)
- Gastroenteritis (1,091 cases)
- Dengue Fever (379 cases)
- Asthma (306 cases)

Figure 23 shows that the notifiable disease trends during the year follow two main patterns: a rise in respiratory illnesses in the middle of the year and an increase in vector-borne diseases toward the end. August is the peak month mainly due to high numbers of Influenza-like Illness (274) and Acute Respiratory Infections (560). In contrast, April has the lowest number of cases, marking a short period of lower activity before cases increase again. While respiratory illnesses decrease later in the year, Dengue Fever peaks in December (120 cases), and Gastroenteritis shows a sharp increase in October (178 cases).

Figure 23: Top Five Notifiable Disease by Month, Cook Islands 2025



Dengue

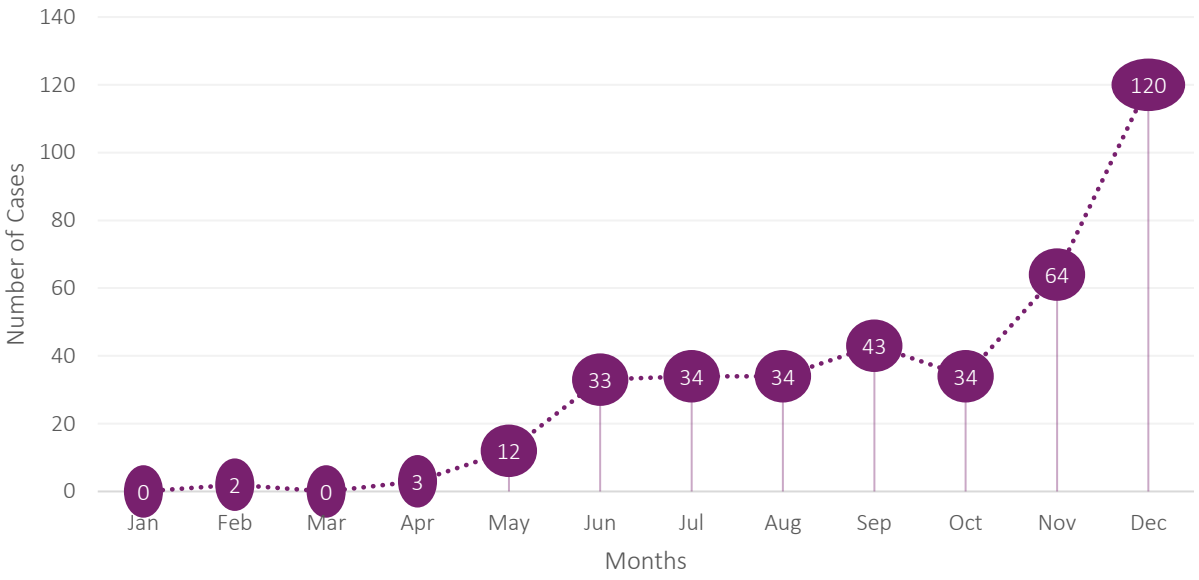
Dengue is a viral infection caused by the dengue virus (DENV) and transmitted to humans through the bite of an infected Aedes aegypti and Aedes polynesiensis mosquitos. It is most prevalent in tropical and subtropical climates. In the Cook Islands, all suspected dengue cases are tested and confirmed by the TMO laboratory.

The Cook Islands officially declared two dengue outbreaks during the period of 2021 to 2025. The first outbreak was declared on 2 February 2021 and resulted in 193 confirmed cases until August 2021. The second outbreak was declared on 22 May 2025, exceeding the recommended threshold[6] for declaring a dengue outbreak. By the end of 2025, cumulative cases had reached 379[7], with circulation of two dengue virus serotypes, DENV-1 and DENV-2.

Dengue Cases by Month

Figure 24 illustrates that dengue cases remained low from January to April, before rising in May following the outbreak declaration. Cases increased steadily through September, with a slight decline in October, before surging again in November and peaking in December. This upturn was likely driven by heightened travel activity during the festive season.

Figure 24: Dengue Cases by Month, Cook Islands 2025



The majority of cases (91.6%) were recorded in Rarotonga, with 31 cases in Aitutaki and one case in Mauke, reflecting concentrated transmission in the main island. No cases were reported across the remaining Pa

[6] 5 confirmed cases within 15 days from onset date. Te Marae Ora Cook Islands Ministry of Health Protocol 27 February 2019 DENGUE CASE CLASSIFICATION

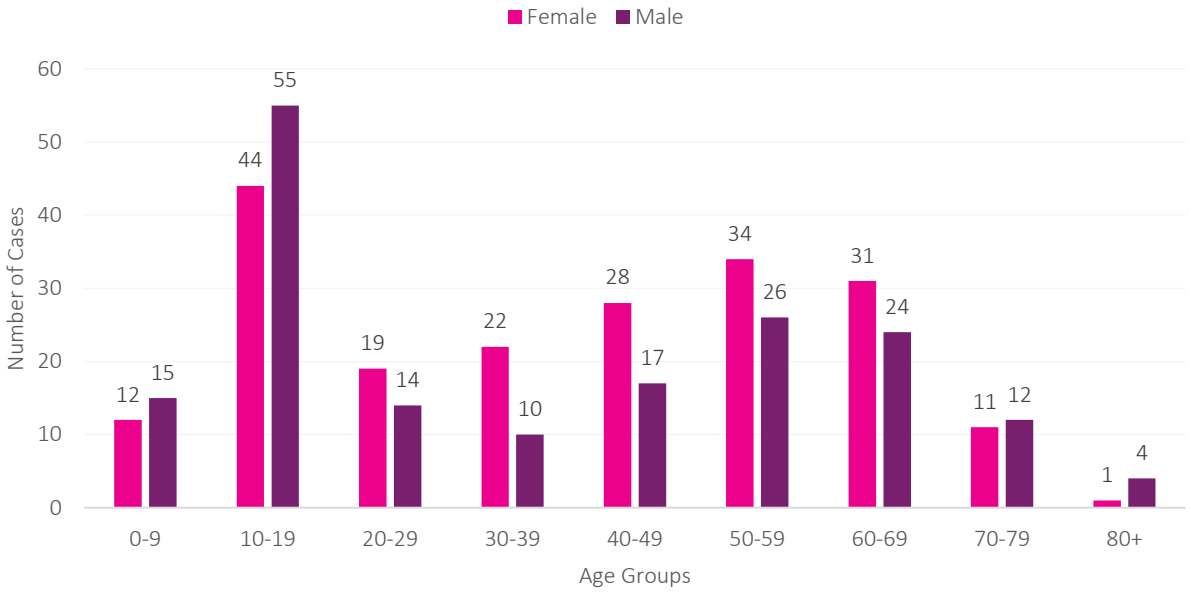
[7] Includes visitors and permit holders.

Enua islands. Of the total cases, 31 patients required hospitalisation, all of whom were discharged without complications. No fatalities were recorded during the year.

Dengue Cases by Age Group and Sex

Figure 25 shows that females accounted for 53% of total cases (202), while males accounted for 47% (177), indicating near-equal impact by both sex. The most affected age group was 10-19 years, with 99 cases (44 females and 55 males), representing approximately 26% of all reported cases. Adults aged 50-59 years (60 cases) and 60-69 years (55 cases) were significantly affected. Overall, the outbreak disproportionately affected adolescents and older adults, with sustained community transmission across most age groups.

Figure 25: Dengue Cases by Age Group and Sex, Cook Islands 2025



Malaria

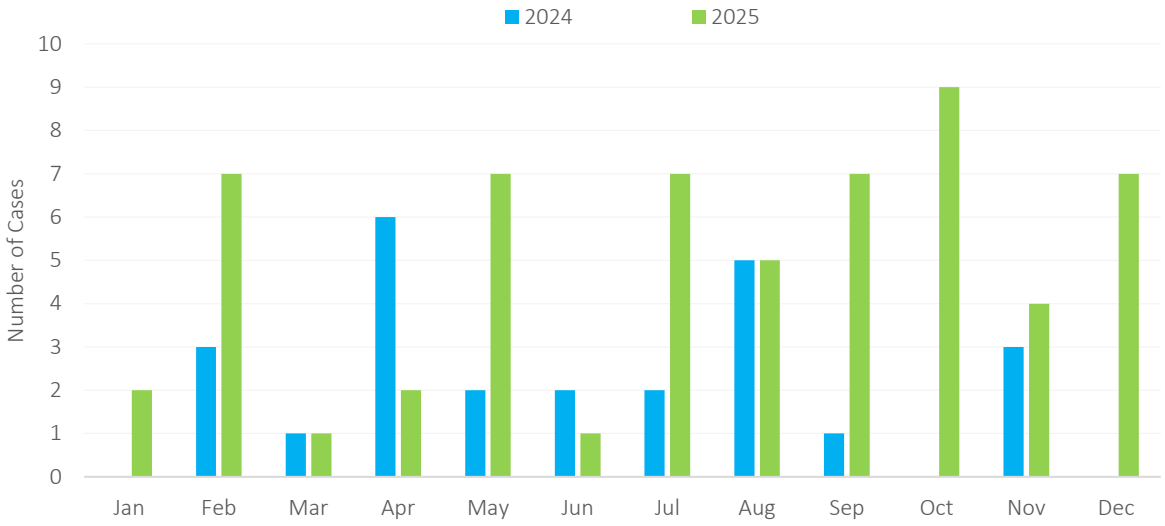
There has been no incidence of malaria over the past ten years (2016-2025).

Ciguatera Poisoning

Ciguatera Fish Poisoning (CFP) is a foodborne illness caused by consuming reef fish that have accumulated ciguatoxin, a naturally occurring toxin produced by marine microalgae. CFP is the most commonly reported form of fish poisoning in the Cook Islands.

Figure 26 illustrates a notable rise in CFP incidents in 2025, with annual cases more than doubling from 25 in 2024 to 59 in 2025. This increase established a monthly average of 5 cases, with a high peak of 9 cases in October 2025. Despite the surge in reported cases, no hospitalisations were recorded during this period.

Figure 26: Fish Poisoning Cases by Month, Cook Islands 2023-2025



COVID-19

No cases of COVID-19 were reported in 2025. This may reflect minimal or no community transmission during the year, potentially due to sustained public health measures. TMO continues to be vigilant and ensure that any reintroduction or undetected transmission is promptly identified and managed.

Sexually Transmitted Infections

Sexually transmitted infections (STIs) are passed between individuals through sexual contact, including vaginal, anal, or oral sex, via bodily fluids such as semen, vaginal secretions, blood, and breast milk. They are caused by bacteria, viruses, or parasites, with common examples including HIV/AIDS, Neisseria Gonorrhoea, Chlamydia, Syphilis, Trichomonas Vaginalis, and non-specific urethritis. Practicing safer sex and seeking regular testing are essential steps in preventing and detecting these infections early.

Laboratory Testing

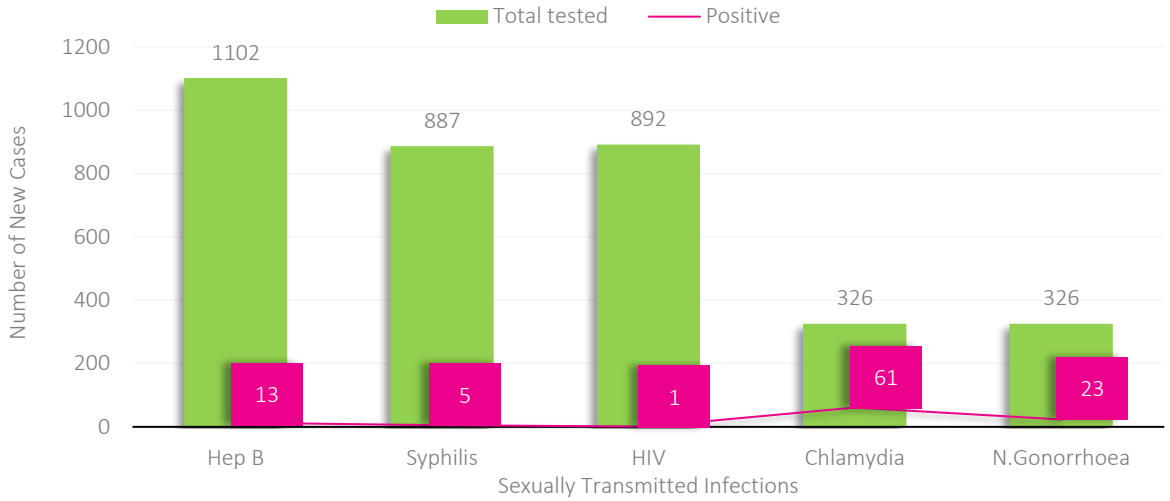
A total of 3,533 laboratory tests were conducted for STIs (Figure 27) compared to 3,216 in 2024, a slight increase of 10%. Of the 3,533 tests, 3% or 103 tests were confirmed positive for STIs, a slight increase from last year of less than 1%.

Testing encompassed five infection categories: Hepatitis B with 13 confirmed out of the 1,102 tests, Human Immunodeficiency Virus (HIV) with one confirmed[8] test out of 892 tests, Syphilis with five confirmed tests out of 887 tests, Chlamydia with 61 confirmed tests out of 326, and Neisseria Gonorrhoeae with 23 confirmed tests out of 326 tests. Notably tests for chlamydia had resumed in 2025 after being temporarily ceased in 2020 for prioritisation of resources due to COVID-19[9].

[8] Existing confirmed case.

[9] National Health Information Bulletin 2021 - 2023-Sexually transmitted infections pg 31.

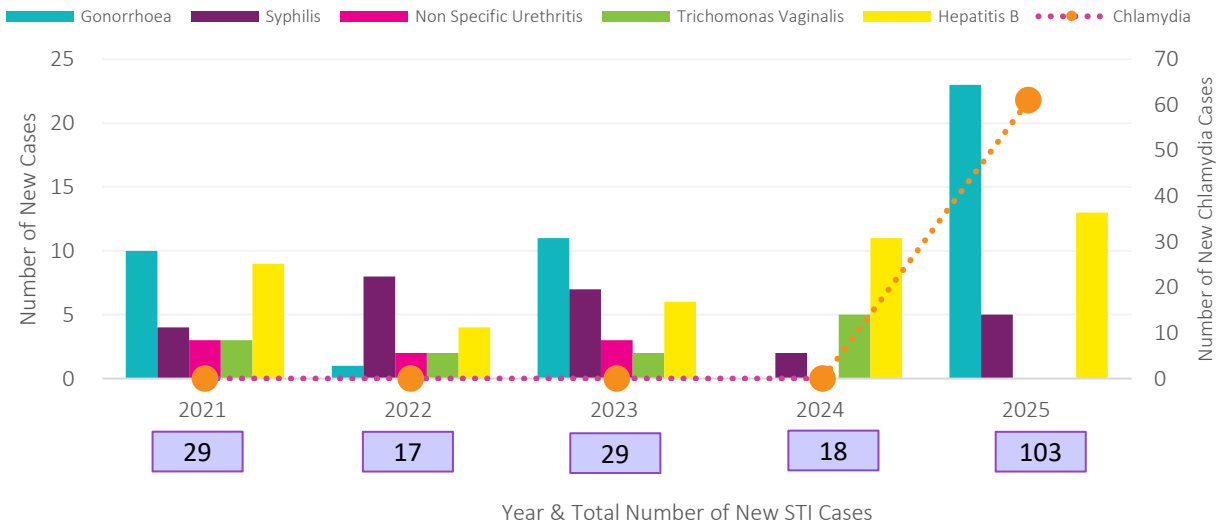
Figure 27: Number of Laboratory Tests for STIs, Cook Islands 2025



Laboratory Confirmed STI cases

Figure 28 shows total laboratory-confirmed STI cases. Between 2021 and 2025, there was a consistent trend before increasing sharply in 2025 contributed mainly by chlamydia, as a result of resuming the tests.

Figure 28: Laboratory-confirmed New STI Cases, Cook Islands 2021-2025



Candidiasis

In 2025, a total of 19 cases of candidiasis were confirmed. Although candidiasis is not classified as a STI, it is included here to provide a broader view of reproductive and genital health trends.

Congenital Syphilis

There have been no reported cases of congenital syphilis since the early 2000 till to date, reflecting the effectiveness of maternal screening and early intervention programs.

HIV

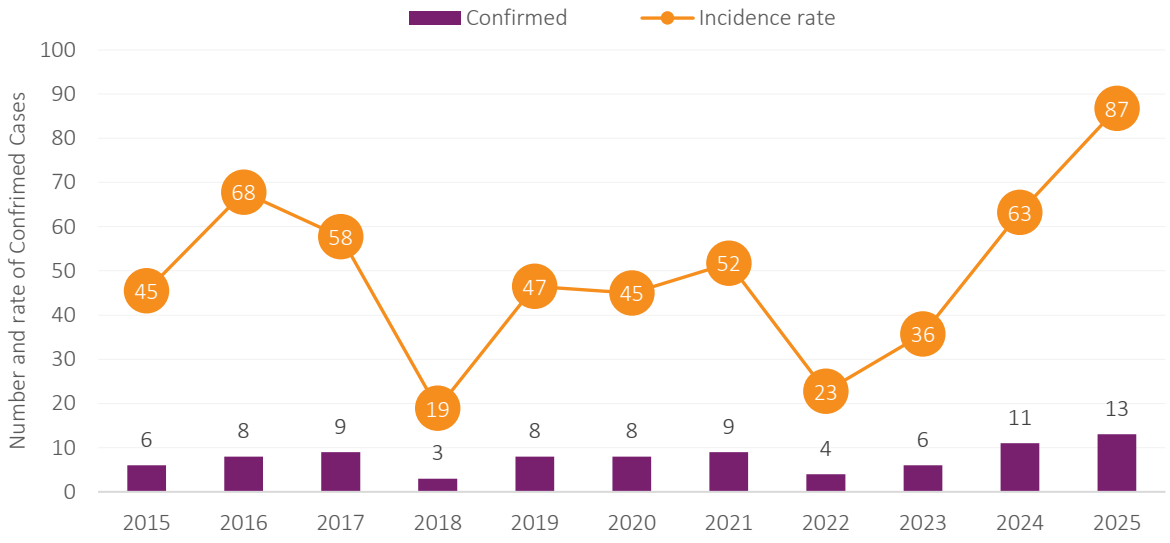
In 2025, a total of 892 laboratory tests were conducted for HIV, yielding one (1) existing and known confirmed case. The confirmed case died primarily to Atypical Pneumonia, secondary to AIDS/HIV within the same year. The HIV incidence rate for 2025 remains at 0 per 1,000 uninfected population, based on the resident population.

Antiretroviral therapy (ART) is essential for improving health outcomes for people living with HIV and reducing the risk of transmission. Through support from the United Nations Development Programme (UNDP), TMO provides ART to confirmed cases. Patient monitoring includes Clusters of Differentiation 4 (CD4) counts and viral load testing currently done in the country, with samples sent to New Zealand for analysis.

Hepatitis B

Figure 29 shows that between 2016 and 2025, the number of confirmed Hepatitis B cases varied annually from 3 to 13, with incidence rate ranging from 19 to 75 per 100,000 population. The highest number occurred in 2025 with 13 cases, corresponding to an incidence rate of 75 cases per 100,000 population.

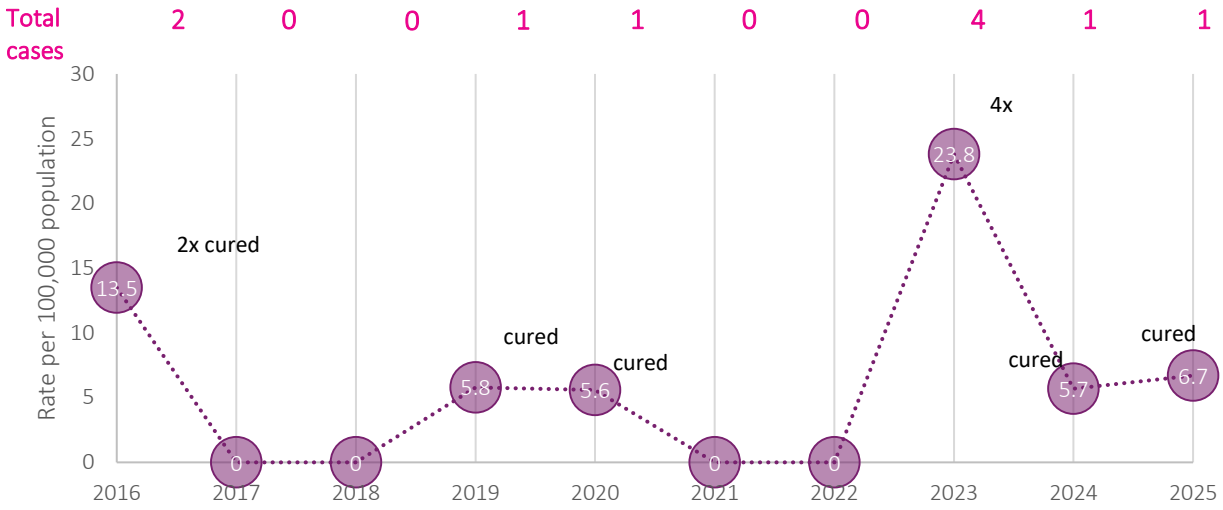
Figure 29: Laboratory Confirmed Hepatitis B Cases and Incidence Rate per 100,000 Cook Islands 2016-20



Tuberculosis

In 2025, no new TB cases were reported, however, one case from 2024 carried over into 2025 and successfully completed the six-month treatment course. Figure 30 shows that TB cases in the Cook Islands remained low over the ten-year period from 2016 to 2025, with annual totals ranging from 0 to 4 cases. The highest number of cases was recorded in 2023, with four cases corresponding to an incidence rate of 23.8 cases per 100,000 population. Overall, TB remains rare in the Cook Islands, and all reported cases during this period had a 100% treatment success rate, reflecting effective case detection and treatment management.

Figure 30: Tuberculosis Incidence Rate per 100,000 Population, Cook Islands 2016-2025



Other

Other communicable diseases such as filariasis, chikungunya, zila, yaws, and measles have reported no cases since 2016.

Hansen's disease, also known as leprosy, reported one case in 2025, with unknown origins. This case is considered with borderline-borderline lepromatous phenotype, with very low risk to other individuals and is not considered a readily transmissible disease. Cook Islands has had no formal cases confirmed since 1995.

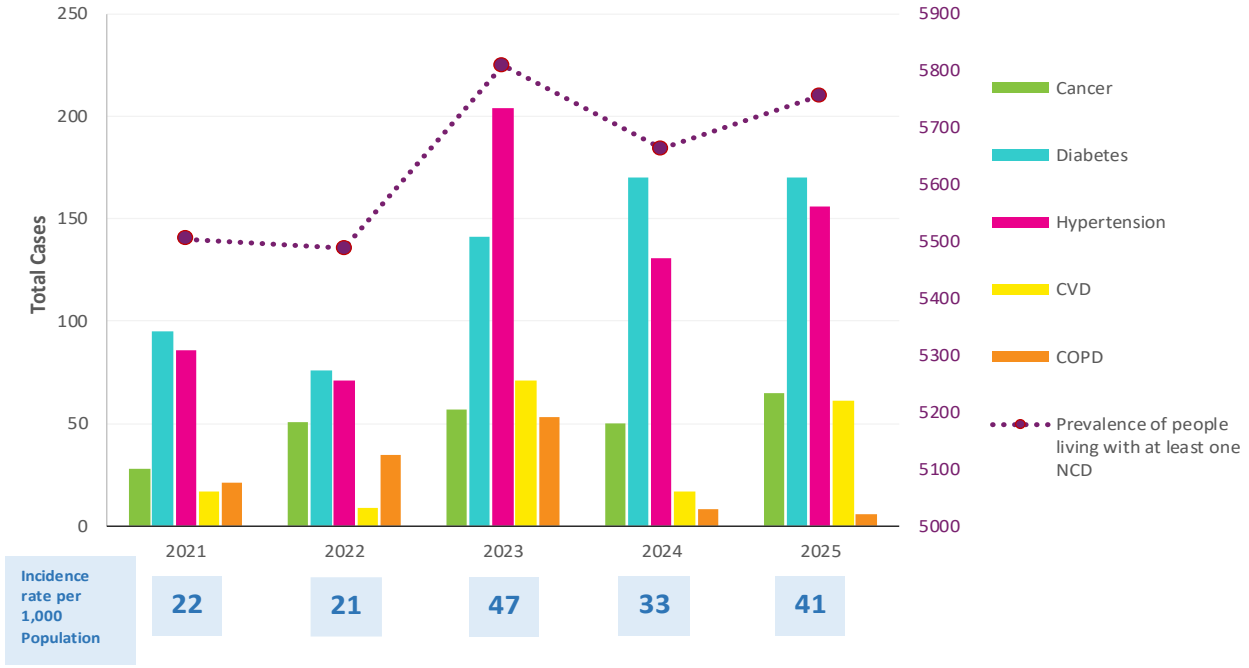
Non-Communicable Disease

As of December 2025, the number of people living with NCD slightly increased from 5,663 in 2024 to 5,756, with women accounting for 2,994 (52%) and men 2,762 (48%). This reverses the small decline observed in 2024, when cases fell from 5,800 in 2023 and the incidence rate dropping from 47 to 33 cases per 1,000 population, reflecting a temporary reduction in new diagnosis. This increase is mainly due to a more thorough data reconciliation process, which identified existing NCD patients recorded on Medtech Evolution who had not been added to the official register. Furthermore, the 2025 figures now included acute cases who have since met the formal criteria for chronic diagnosis.

New NCD Cases

Figure 31 shows new cases fluctuating from 2021 to 2025 peaking in 2023, declining in 2024, and rising again in 2025. Diabetes and hypertension consistently accounted for the most cases while Chronic Obstructive Pulmonary Disease (COPD) remained the lowest.

Figure 31: New Non-communicable Disease Cases, Cook Islands 2021-2025

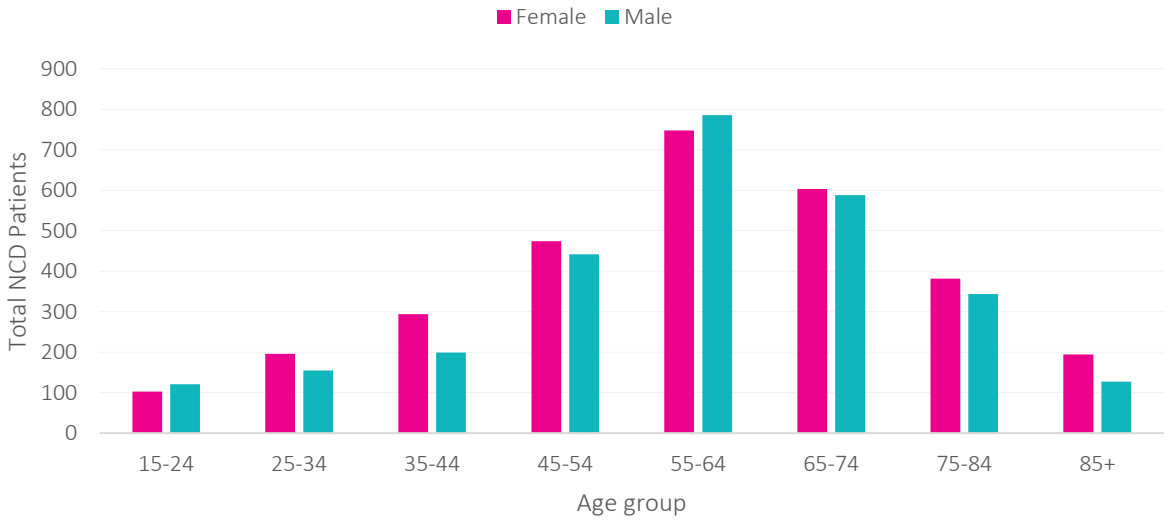


Note: Figures are based on 15 years and above only.

NCD Breakdown by Age Group and Sex

Figure 32 illustrates the distribution of NCD patients by age and sex. Prevalence rises progressively after the age of 35, reaching its peak in the 55-64 age group, which accounts for approximately 27% of the total registry. Overall, females comprise 52% of the diagnosed population compared to 48% for males. Females outnumber males in early adulthood (ages 25-44) and again in the 75 and over age group, suggesting a pattern of earlier diagnosis among younger women.

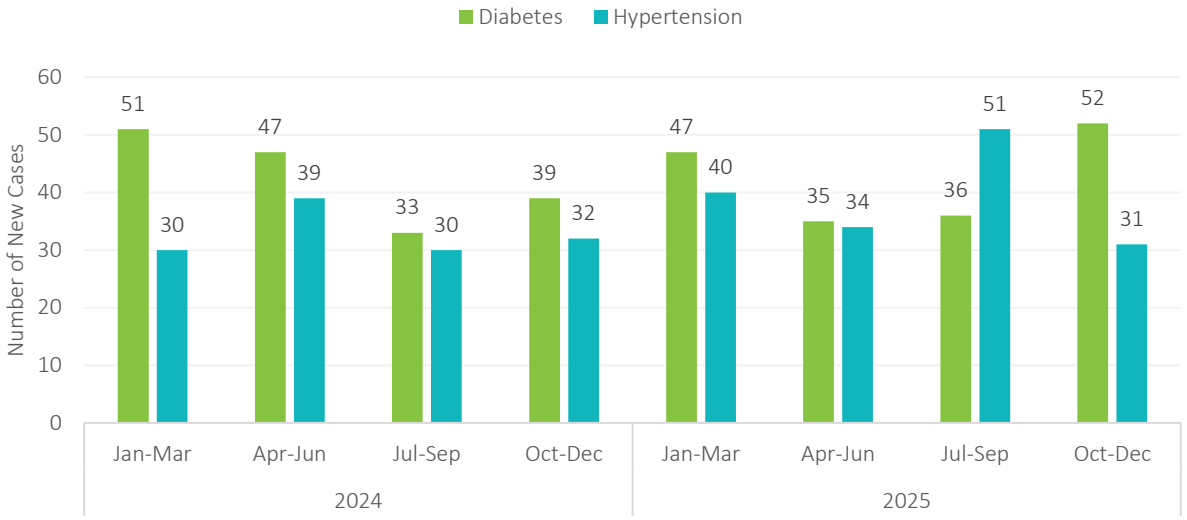
Figure 32: NCD by Age Group and Sex, Cook Islands 2025



Diabetes and Hypertension

Diabetes cases have remained stable at 170 cases over the past two years, indicating little change in the number of newly diagnosed patients. In contrast, hypertension cases increased from 131 in 2024 to 156 in 2025 as shown in Figure 33, representing a 19% rise within one year.

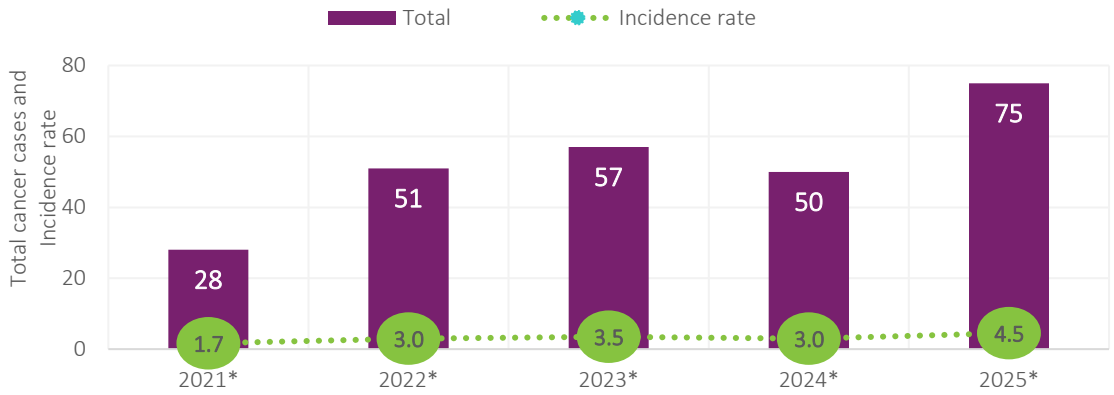
Figure 33: New Cases of Diabetes and Hypertension, Cook Islands 2024-2025



Cancer

In 2025, the Cook Islands Cancer Registry recorded 675 cancer cases, slightly increased by 13% from 2024 with 600 cases. Figure 34 shows the number of cases over the last 5 years, reaching a new peak in 2025. After staying between 50 and 57 cases from 2022 to 2024, the total jumped to 75 cases in 2025. This shows a 50% increase in just one year, making it the highest number of cases recorded in the period. The incidence rate rose from 3.0 in 2024 to 4.5 in 2025, which represents a 50% increase in the frequency of new diagnoses.

Figure 34: Cancer by Year and Incidence Rate, 2021-2025

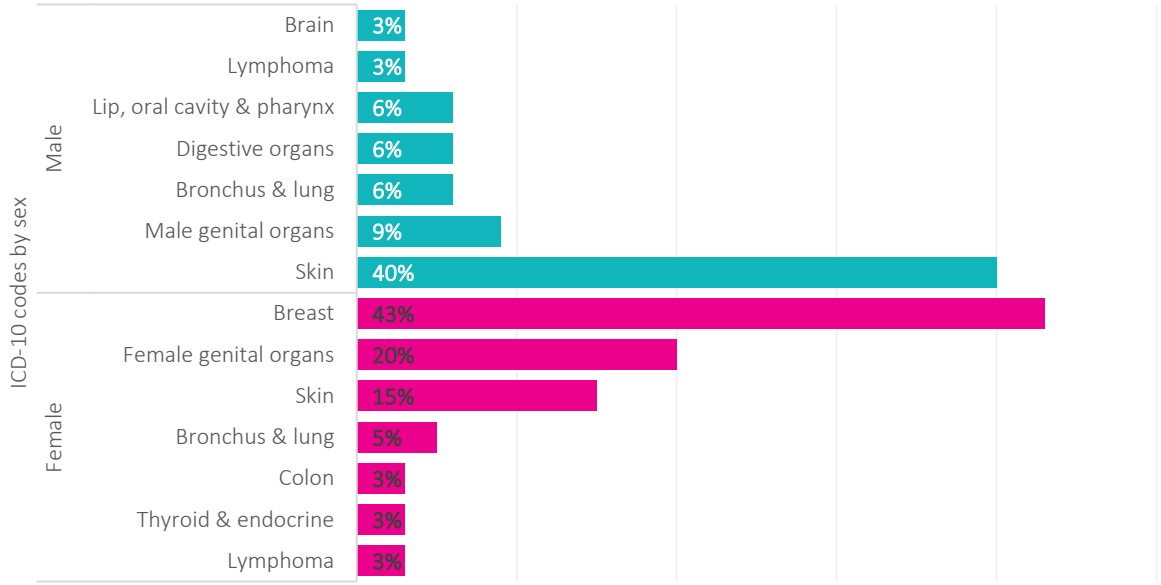


*population denominator adjusted for these years.

Cancer by Type and Sex

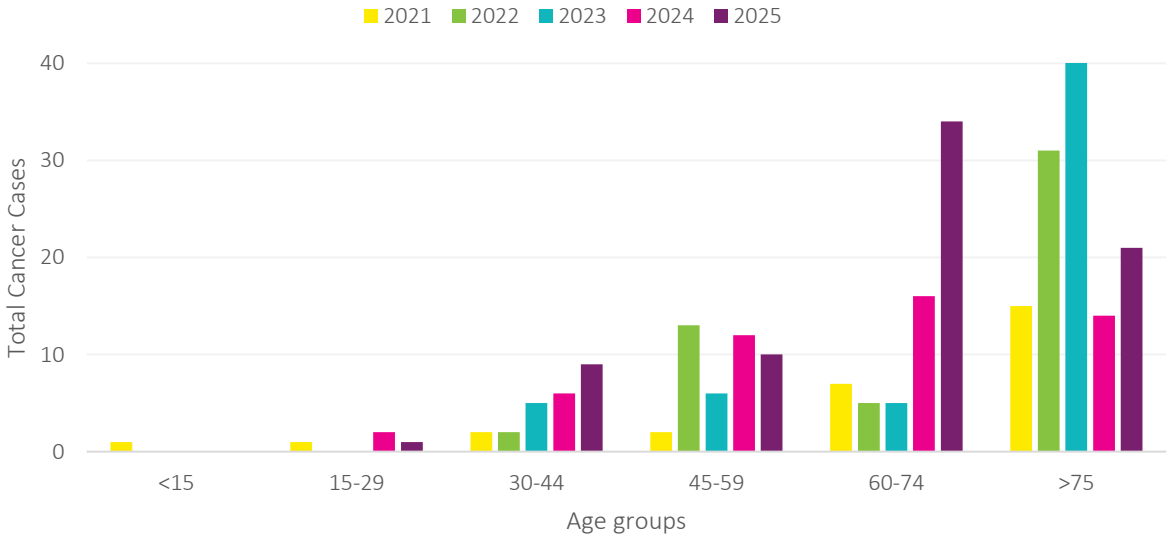
Figure 35 shows that in 2025, new cancer cases differed by sex. Among men, skin cancer was the most common, accounting for 40%, while breast and reproductive organs cancer were the most prevalent amongst women, with 43% and 20% respectively. This higher percentage in women may be due to increased detection through the annual mammogram screening programs.

Figure 35: Cancer by Type and Sex, Cook Islands 2025



Throughout the 5-year-period, the majority of the cases were concentrated in the 75+ age group. In contrast, cases in the younger demographic (under 30) remained consistently low, while the 45-59 age group showed a more moderate but steady increase.

Figure 36: Cancer case by year and age group 2021-2025



Health Services | Punanga Ora

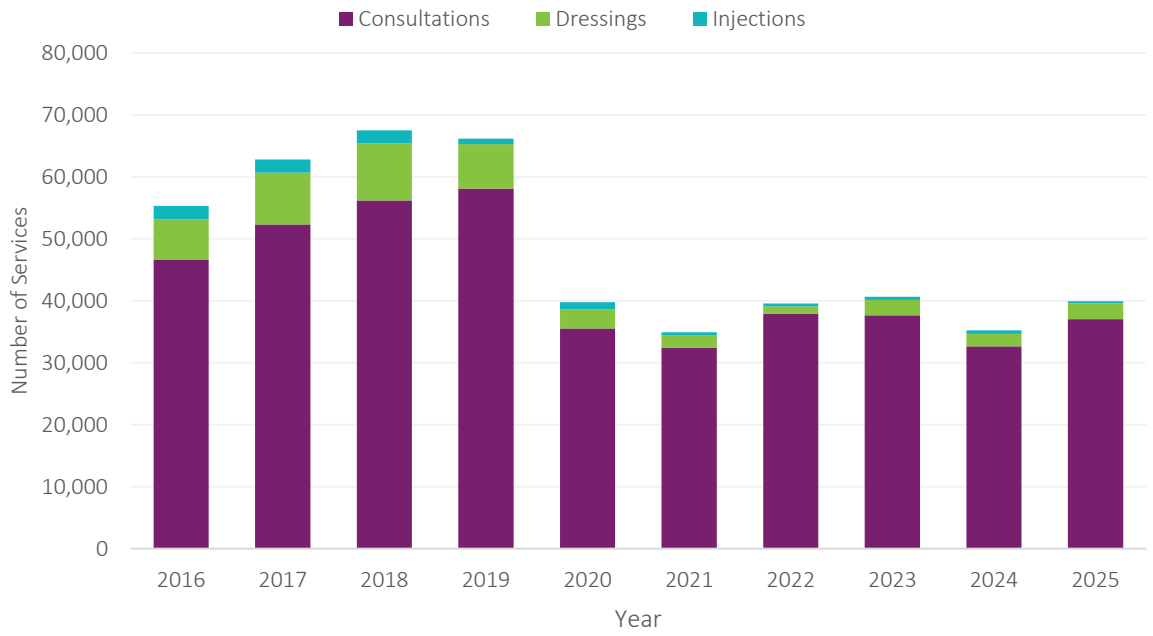
Outpatient

Outpatient services in the Cook Islands are delivered through Puna community health clinics across Rarotonga and the Pa Enua, including Tupapa Primary Health Centre. These sites provide a broad range of care including in-person and telephone consultations, wound dressings, injections, minor operations, and specialised preventative clinics such as NCD and sleep apnoea programmes.

Outpatient Services Utilisation

Over the 10-year-period from 2016 to 2025, outpatient service utilisation was highest in 2018 and 2019, with annual visits exceeding 65,000. Utilisation declined sharply in 2020 and 2021, likely due to disruptions associated with the COVID-19 pandemic. Since 2022, outpatient visits have gradually increased, reaching close to pre-pandemic levels by 2025, indicating a steady recovery in the delivery and use of routine outpatient services. In 2025, outpatient services in the Cook Islands recorded approximately 39,000 visits, representing an increase from 34,000 visits in 2024. Consultations accounted for the largest proportion of services delivered, followed by dressings and injections.

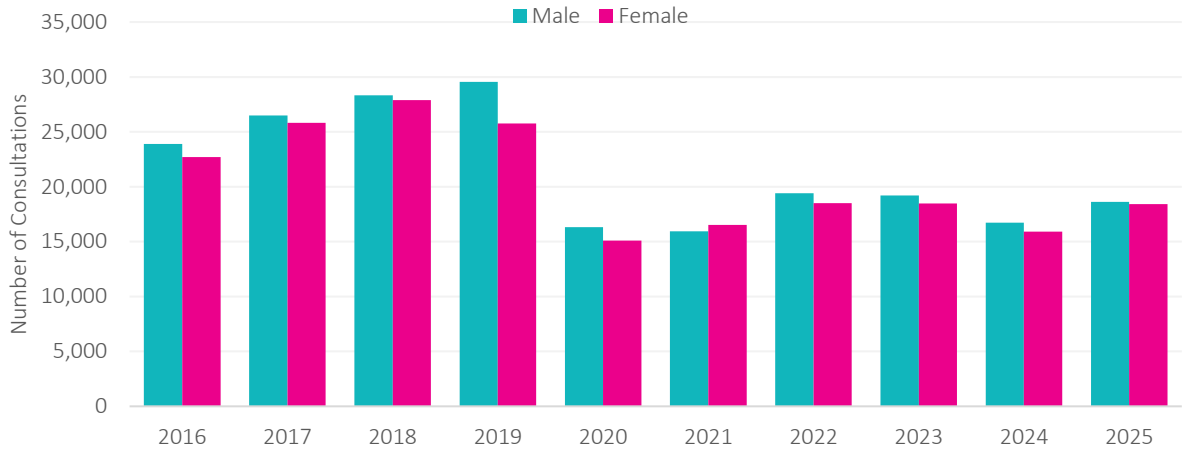
Figure 37: Outpatient Services Utilisation, Cook Islands 2016-2025



Outpatient Consultation by Sex

Figure 38 presents a summary of outpatient consultations by sex from 2016 to 2025. Over the ten-year period, male consultations were generally slightly higher than female consultations, except in 2021 when females accounted for 16,537 (50.9%) of visits. By 2025, consultations had partially recovered to 37,050, with a nearly equal gender distribution between 18,636 (50.3%) male and 18,414 (49.7%) female.

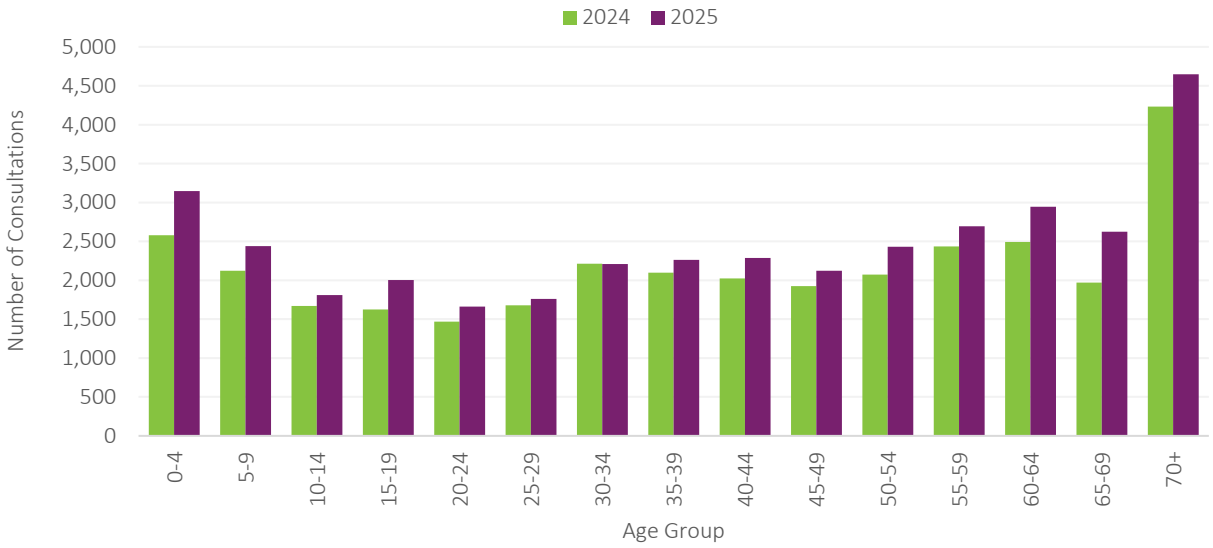
Figure 38: Outpatient Consultations by Sex 2016-2025



Outpatient Consultations by Age Group

Figure 39 illustrates that outpatient consultations across all age groups increased by 13.6% between 2024 and 2025, rising from a total of 32,616 to 37,050 visits. The 70+ demographic remained the highest utilization group, accounting for 4,649 visits in 2025, while the 65-69 age group saw the most significant growth with a 33.2% (2,626) increase. Additionally, a notable rise in consultations for the 0-4 age group suggests a sharp increase in paediatric service demand.

Figure 39: Outpatient Consultations by Age Group 2024-2025

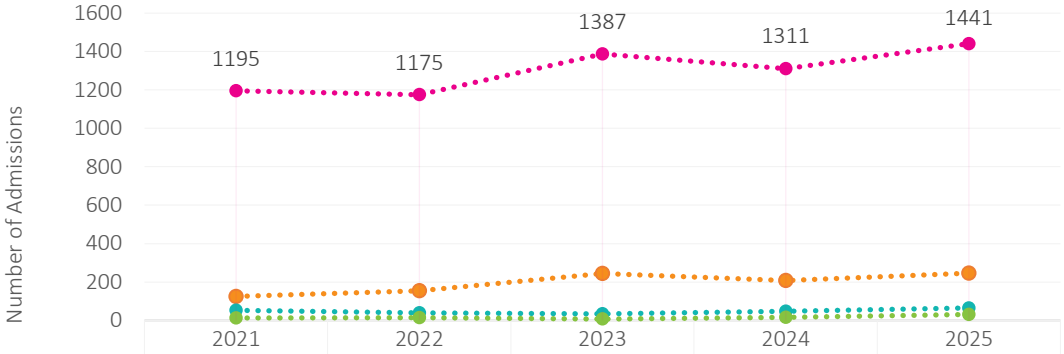


Inpatients

Admissions

In 2025, a total of 1,783 (2024:1,574) hospital admissions were recorded, representing the highest figure over the five-year period. As shown in Figure 40, Rarotonga consistently accounted for the majority of admissions, reaching 1,441 in 2025 despite a temporary decline in 2021 and 2022. Aitutaki followed a similar upward trajectory, with admissions nearly doubling from 125 in 2021 to 246 in 2025, notwithstanding a slight dip in 2024. The Southern and Northern groups both experienced a decline in 2023 before recovering steadily over the following two years, each reaching their highest recorded levels in 2025.

Figure 40: Number of Admissions by Island, Cook Islands 2021-2025



	2021	2022	2023	2024	2025
Rarotonga	1195	1175	1387	1311	1441
Aitutaki	125	154	244	208	246
Southern group	52	39	34	47	65
Northern group	12	14	7	16	31

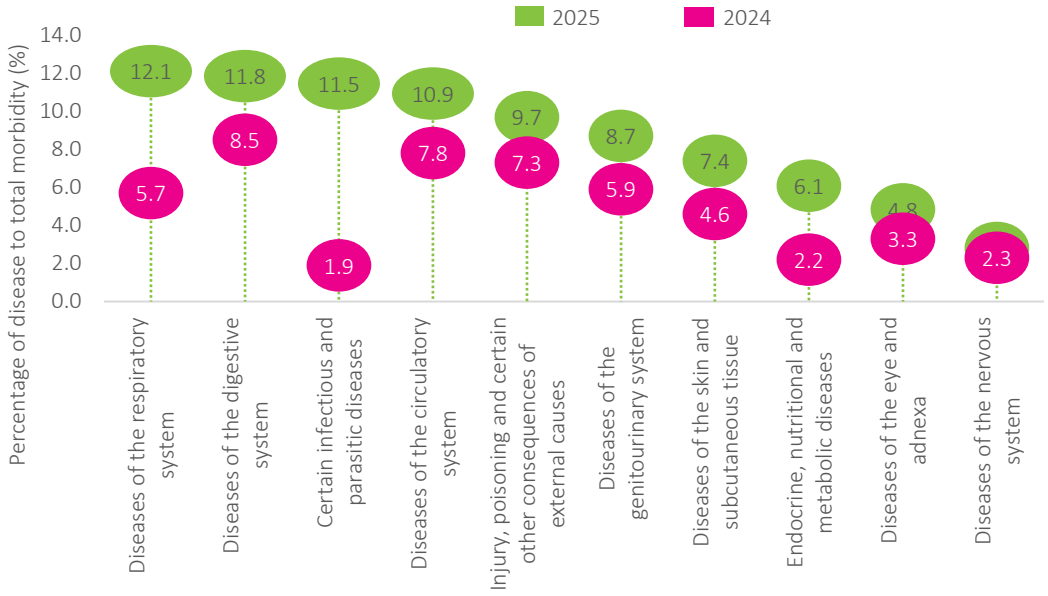
Morbidity

Morbidity refers to the state of being symptomatic or unhealthy due to a disease, injury, or condition within a population.

In 2025, respiratory disease emerged as the leading cause of morbidity, with its rate more than doubling from 5.7 in 2024[10] to 12.1 in 2025, while infectious and parasitic diseases surged more than fivefold from 1.9 to 11.5. Endocrine, nutritional, and metabolic diseases nearly tripled in rate, reflecting a broad and significant shift in the overall morbidity profile.

[10] Note that the 2024 figures have been revised to more accurately reflect changes in categorization and reporting.

Figure 41: Top ten leading causes of morbidity, Cook Islands 2024-2025



Note: The graph has been updated to align with ICD-10 disease classification groupings, which may reflect changes in the scope and categorisation of morbidity conditions compared to previous editions.

TMO recorded just over 1,500 (2024: 1,700) hospital discharges for the year 2025. This translates to a discharge rate of approximately 102 discharge rate per 1,000 population (2024: 100 per 1,000 pop).

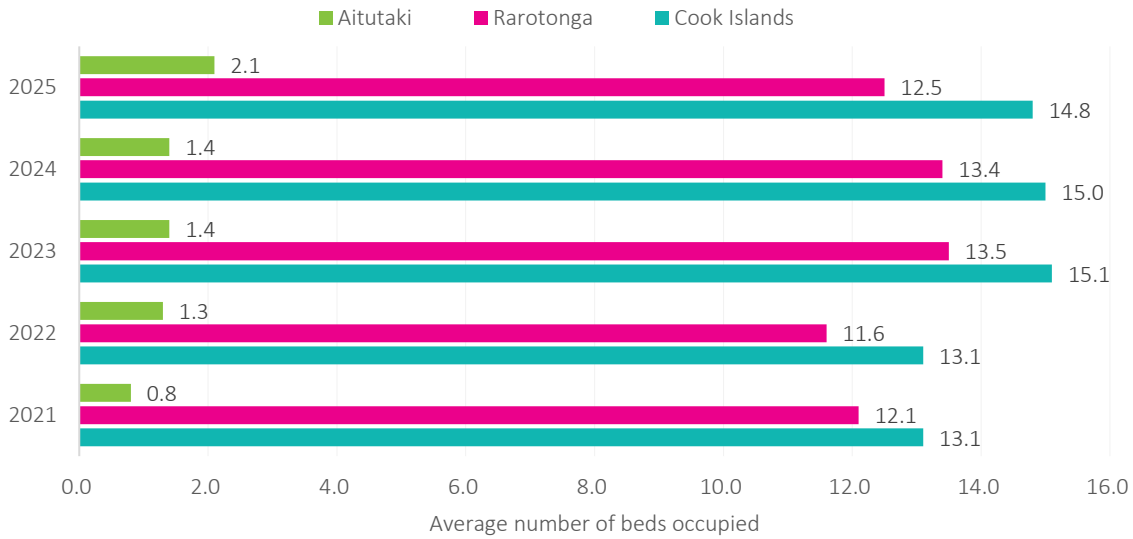
Hospital Bed Density

Hospital bed density measures the number of beds available per 1,000 population. The Cook Islands maintained a total of 152 hospital beds with a bed density of 8.8 per 1,000 population, a slight decrease from 2024 (9 beds per 1,000 population).

Hospital Bed Occupancy

Figure 42 shows the average number of occupied hospital beds per day from 2021 to 2025. Overall, occupancy increased from 13.1 beds per day in 2021 to a peak of 15.1 beds per day in 2023, before slightly declining to 14.8 beds per day in 2025. Rarotonga consistently accounted for most occupied beds, while Aitutaki showed a gradual increase from 0.8 beds per day in 2021 to 2.1 in 2025, indicating rising hospital utilisation outside the main island.

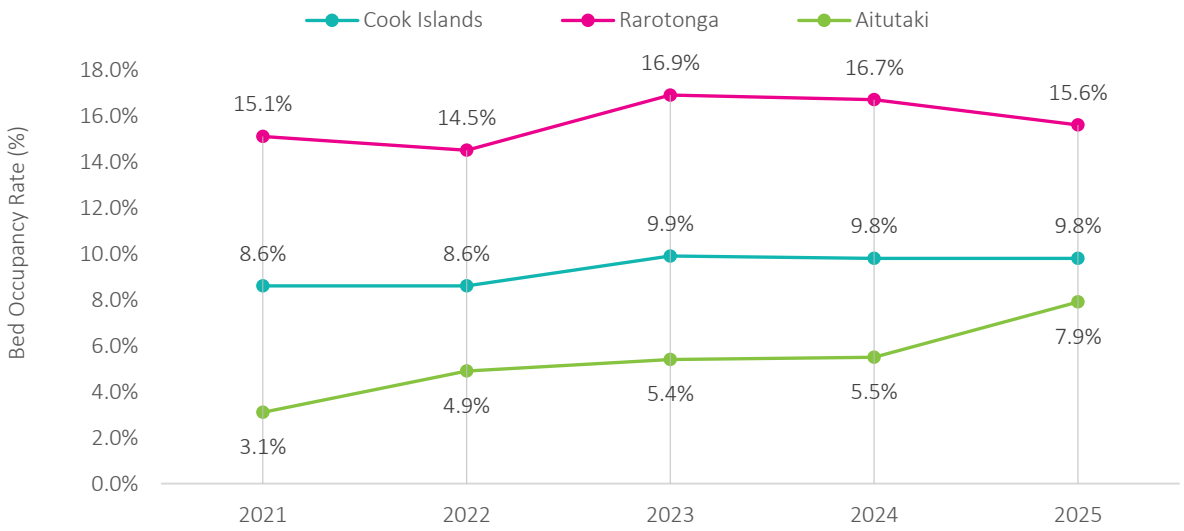
Figure 42: Average occupied beds per day, Cook Islands 2021-2025



Bed Occupancy Rate

Bed occupancy measures how effectively hospital beds are utilised based on total inpatient days recorded over a given period. Figure 43 shows the overall bed occupancy rates in the Cook Islands remained stable from 2021 to 2025, increasing slightly from 8.6% in 2021 to 9.9% in 2023, before stabilizing at 9.8% in both 2024 and 2025. Rarotonga consistently recorded the highest occupancy rates, rising from 15.1% in 2021 to a peak of 16.9% in 2023, followed by a gradual decline to 15.6% in 2025. In contrast, Aituaki demonstrated a steady upward trend over the period, with occupancy more than doubling from 3.1% in 2021 to 7.9% in 2025.

Figure 43: Bed occupancy rate (%), Cook Islands 2021-2025

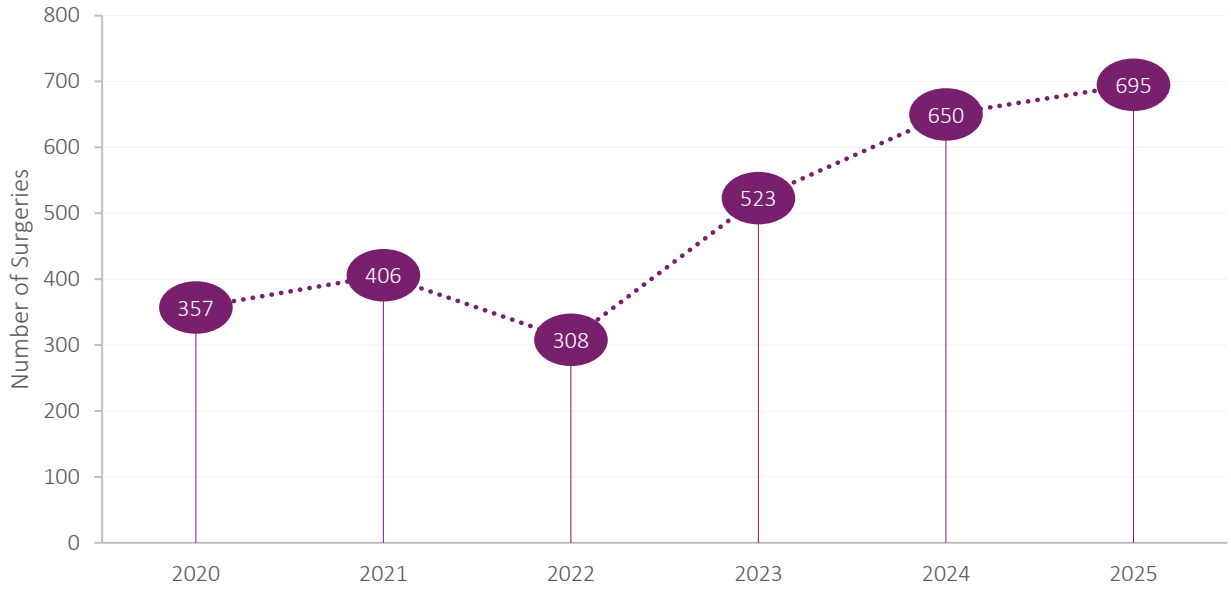


Hospital Surgery

Hospital surgery includes a wide range of procedures, from minor operations (e.g. circumcisions, excisions, stitching of wounds, abscess drainage) to major operations (e.g. appendectomy, cataracts). These services are delivered by specialized clinical teams using appropriate surgical equipment to manage and treat various conditions.

As shown in Figure 44 that surgical volume followed a strong upward trend over the last 5 years, peaking at 695 procedures in 2025, with a surgical volume of almost 4,600 surgeries per 100,000 population. After a decline of 308 cases in 2022, surgical activity recovered rapidly over the next three years.

Figure 44: Number of Surgeries per Year, Cook Islands 2021-2025

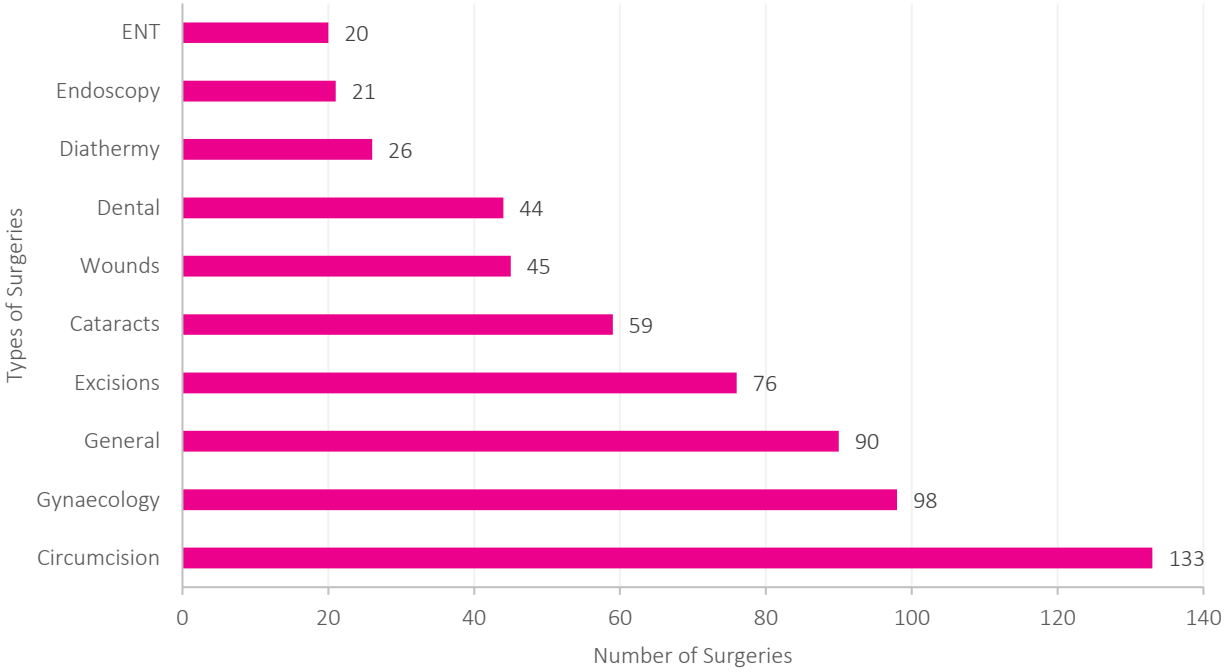


Top Ten Type of Hospital Surgeries

Figure 45 shows the top ten types of surgeries performed in 2025, with circumcision being the most common procedure (2024:102), with 133 cases (22%), followed by gynaecology at 98 (16%) and general surgeries[11] with 90 cases (15%). In contrast, procedures such as diathermy (26), endoscopy (21), and Ear, Nose and Throat (ENT) with 20 cases had the lowest counts, each representing around 3-4% of total surgeries.

[11] General surgeries comprise a range of orthopaedic, soft tissue, abdominal, and wound management procedures, including fracture fixations, amputations, hernia repairs, incision and drainage and emergency explorations.

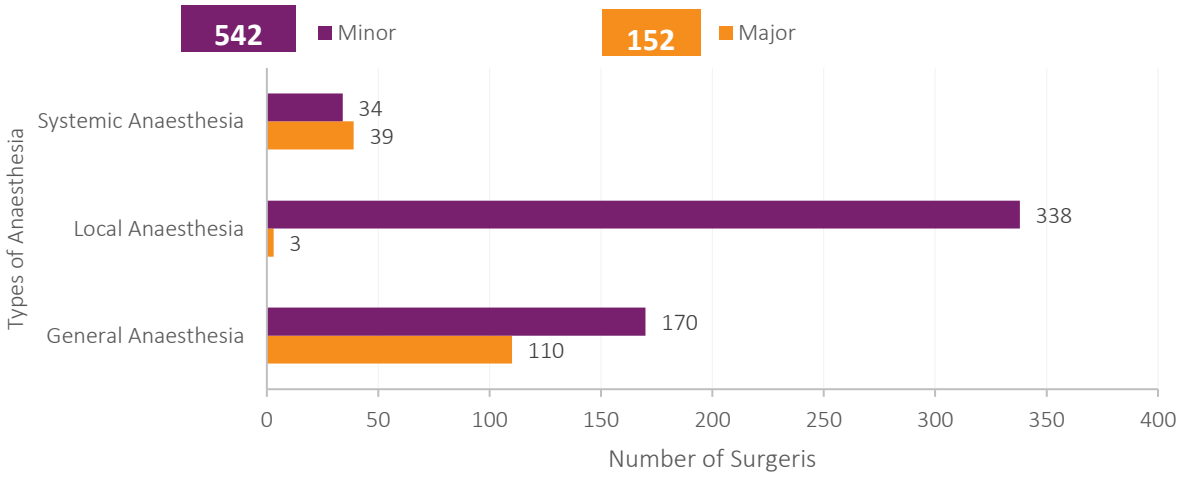
Figure 45: Top Ten Hospital Surgeries by Type, Cook Islands 2025



Types of Anaesthesia

In 2025, a total of 694[12] anesthesia were administered during the surgeries, with 78% (542 cases) were for minor surgeries, and 22% (152 cases) for major surgeries. Local and general anaesthesia were the frequently used methods for both types of procedures. Systemic anesthesia, which includes sedation, spinal and ketafol, remained relatively low across both categories.

Figure 46: Types of Anaesthesia by Major and Minor Surgeries, Cook Islands 2025



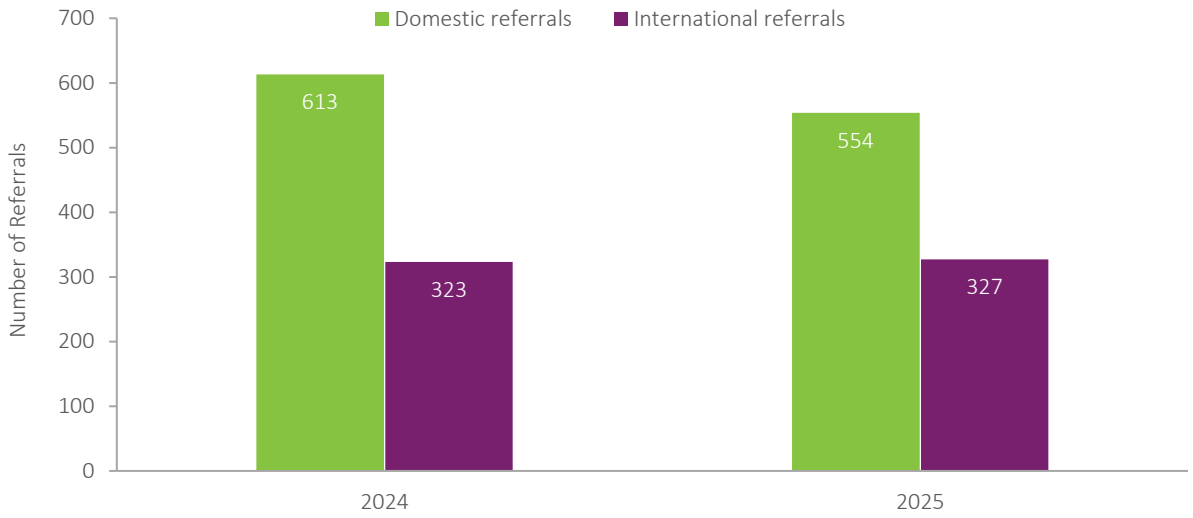
[12] Difference between anaesthesia and surgery data is due to patient preference to forgo anaesthesia.

Patient Referrals

Patients residing in the Pa Enua are referred to the main Island of Rarotonga for further secondary level health care and management. More complicated cases are referred to New Zealand.

Figure 47 shows that in 2025, a total of 881 patient referrals were reported, a decrease of 5.9% to the previous report (2024:936). Domestic referrals reached 554 patients (2024:613), while international referrals accounted for 327 patients (2024:323).

Figure 47: International vs domestic referrals, Cook Islands 2023-2025

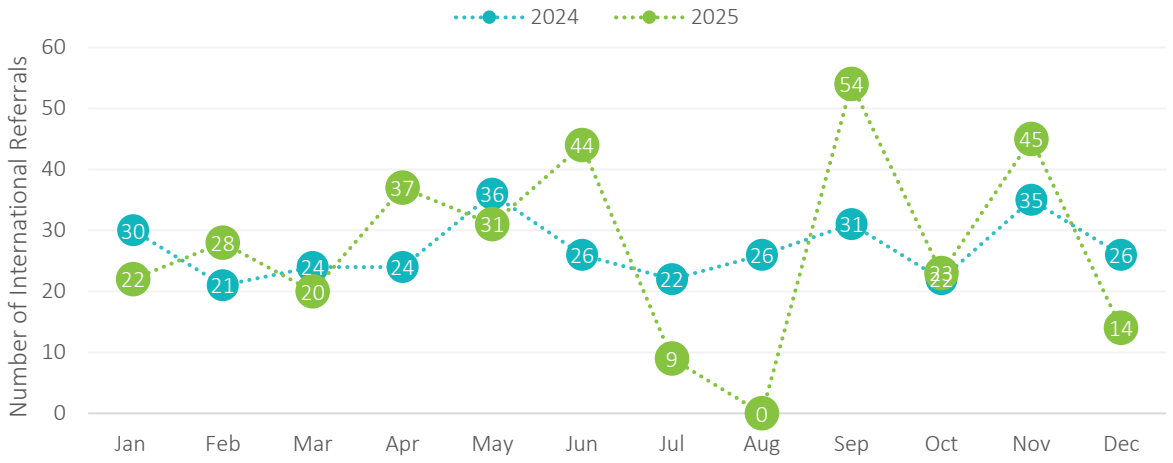


Note: The data reflects when "patient referral forms" are registered by the Finance Team.

International Referrals

Figure 48 shows that International referrals in the Cook Islands followed different patterns between 2024 and 2025. In 2024, referrals were fairly stable, generally ranging between 21 and 36 cases per month. In 2025, however, referrals were more variable, dropping to zero in August (no referral processed) before sharply rising to a peak of 54 in September. Overall, international referral accounted for 37% (2024:35%) of total patient referrals, with an average of 27 patients referred to New Zealand each month for further management and care.

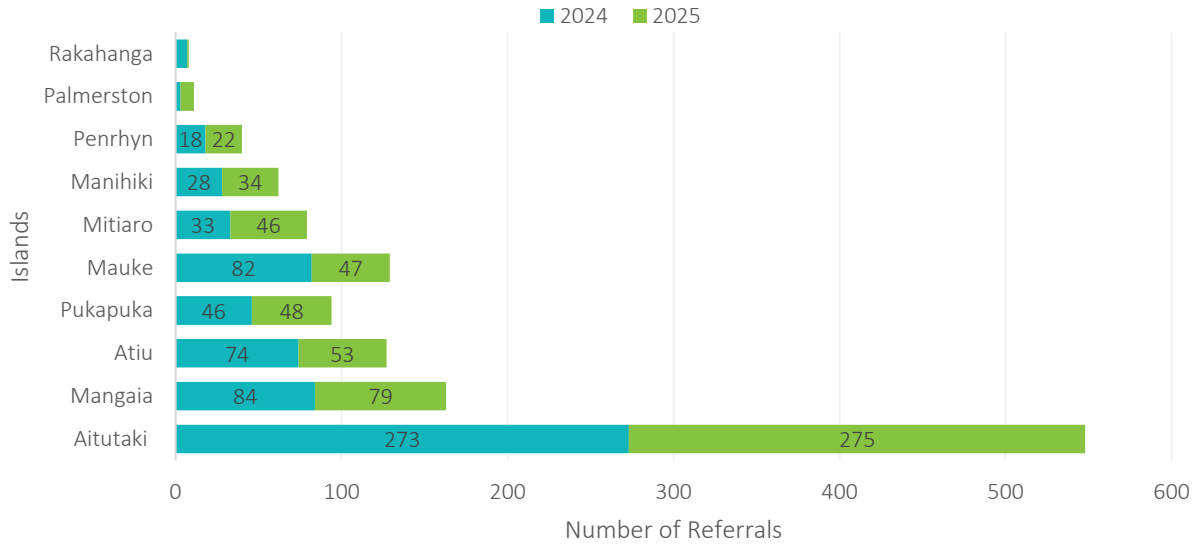
Figure 48: International Referrals by Month, Cook Islands 2024-2025



Domestic Referrals

In Figure 49, a total of 554 domestic referrals recorded in 2025 (2024: 613), accounting for 63% of the overall patient referrals in the Cook Islands. Majority of referrals came from Aitutaki with 275 patients (2024: 273) followed by Mangaia with 79 patients (2024: 84) and Atiu with 53 patients (2024: 74).

Figure 49: Domestic Referrals by Islands, Cook Islands, 2024 and 2025



Immunisation

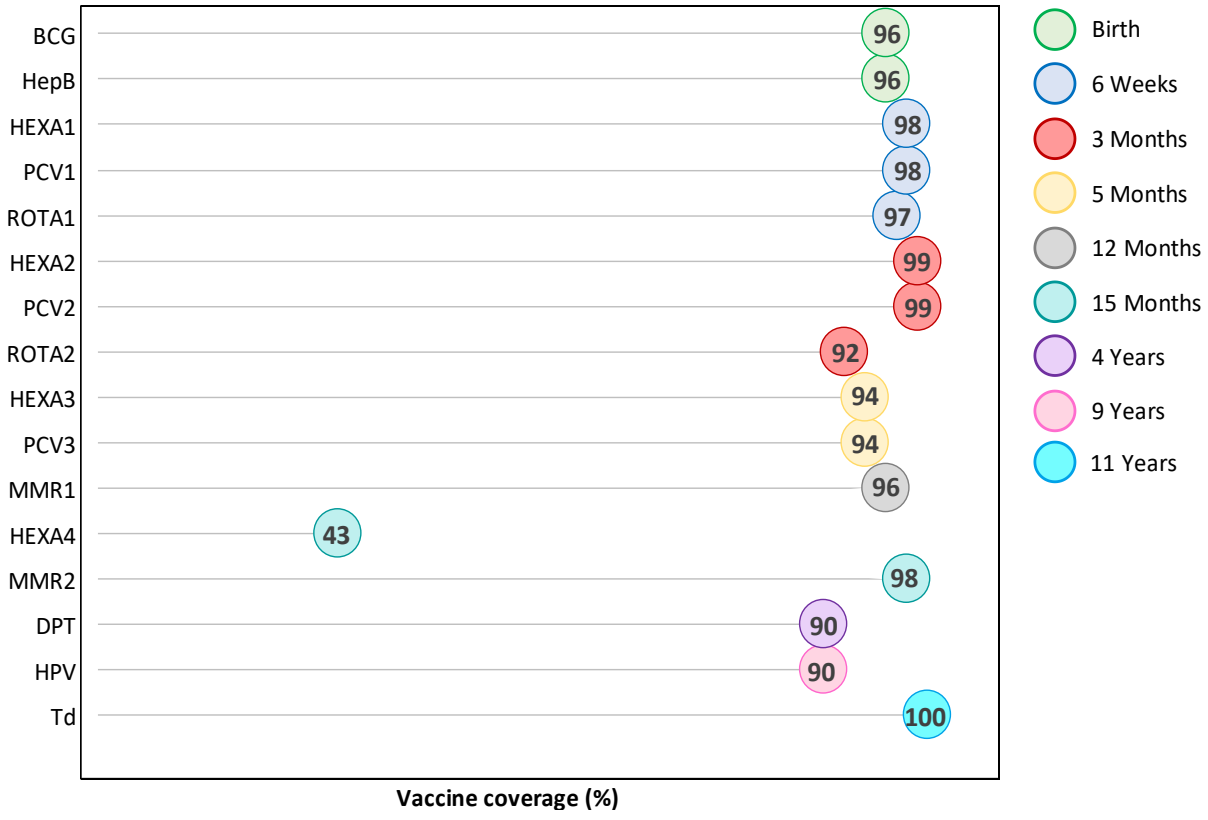
The Cook Islands National Immunisation Register (NIR) is central to our health strategy, providing the data needed to monitor child vaccinations and uphold the integrity of the Cook Islands routine immunisation schedule.

Effective 1 August 2025, the Oral Polio Vaccine (OPV), Inactivated Polio Vaccine (IPV), and pentavalent vaccines were officially removed from the immunization schedule and replaced with the hexavalent vaccine under the updated schedule.

Immunization Coverage

In 2025, as shown in Figure 50, immunization coverage at birth remained high, with both BCG and HepB reaching 96%. At the 6-week milestone, HEXA1 and PCV1 achieved 98% coverage, while ROTA1 followed closely at 97%. The 3-month series saw the highest overall engagement, with HEXA2 and PCV2 peaking at 99%, though ROTA2 reached 92%. A significant shift occurred in the 15-month cohort: while MMR1 reached 96%, HEXA4 dropped to 43% following the transition to the new immunization schedule. Meanwhile, DPT and HPV both maintained 90% coverage, and the Td series for 11-year-olds achieved full 100% coverage.

Figure 50: Immunisation Coverage Rate by Vaccines, Cook Islands 2025

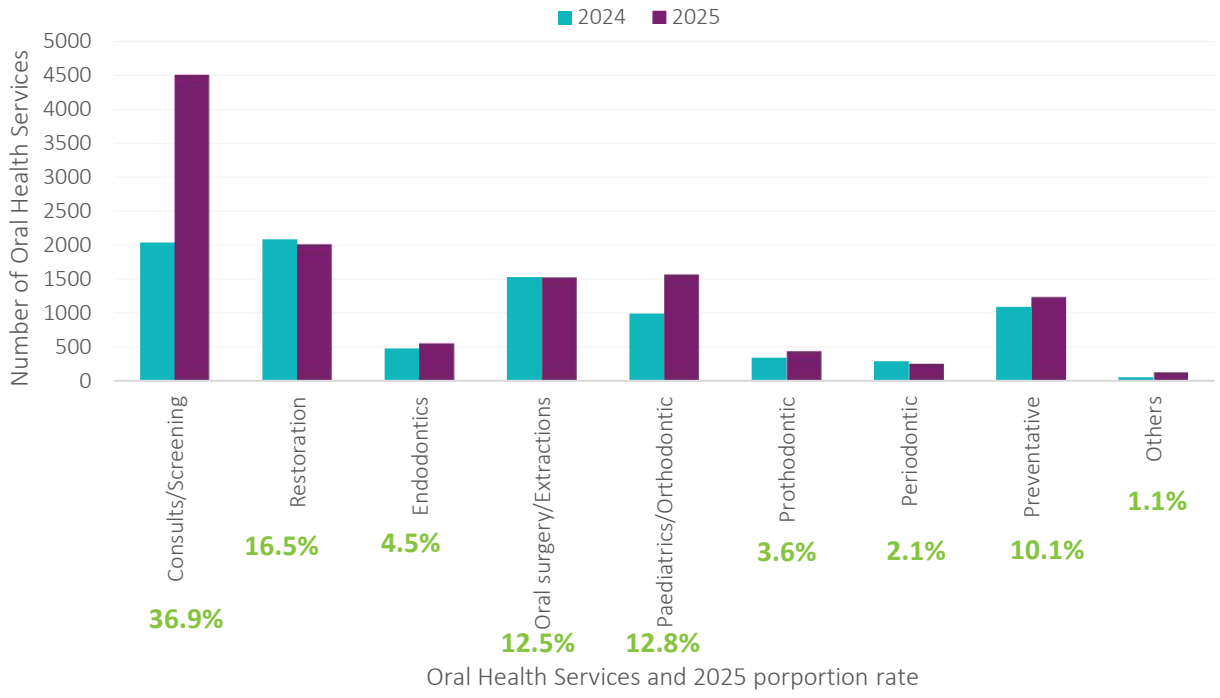


Oral Health

In 2025, a total of 12,223[13] oral health services were delivered, averaging 1,019 patients treated per month. Oral health services include dental consultations, restorations, oral surgery and extractions, paediatric and orthodontic care, and preventive services.

As shown in Figure 51, consultations and screenings made up the largest portion of services at 36.9% (2024: 22.9%), followed by restorations at 16.5% (2024: 23.5%) and paediatric/orthodontic care at 12.8% (2024: 11.2%).

Figure 51: Number and Proportion of Oral Health Services 2024-2025

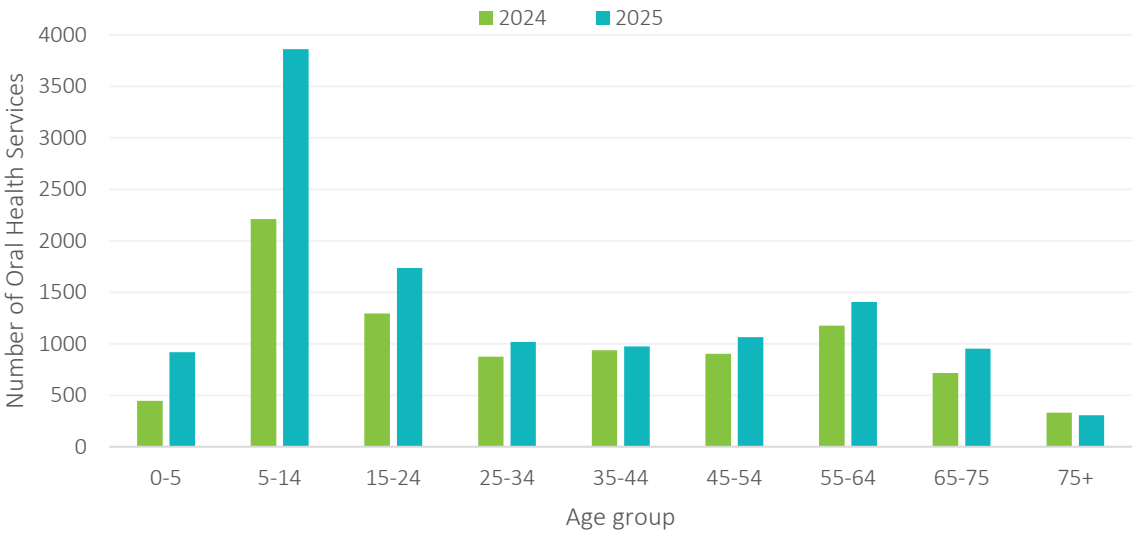


Oral Services by Age Group

Figure 52 shows a significant increase of 5–14 age groups receiving oral health services while the remaining age group were relatively stable for the past two years. The high volume of services received for the 0-24 age group was due to the biannual TMO School Physical Examination (SPHE) program in partnership with the Cook Islands Ministry of Education and the Ora'anga Tumanava project.

[13] A patient can receive more than one oral health service.

Figure 52: Number of Oral Health Services by Age Group 2024-2025

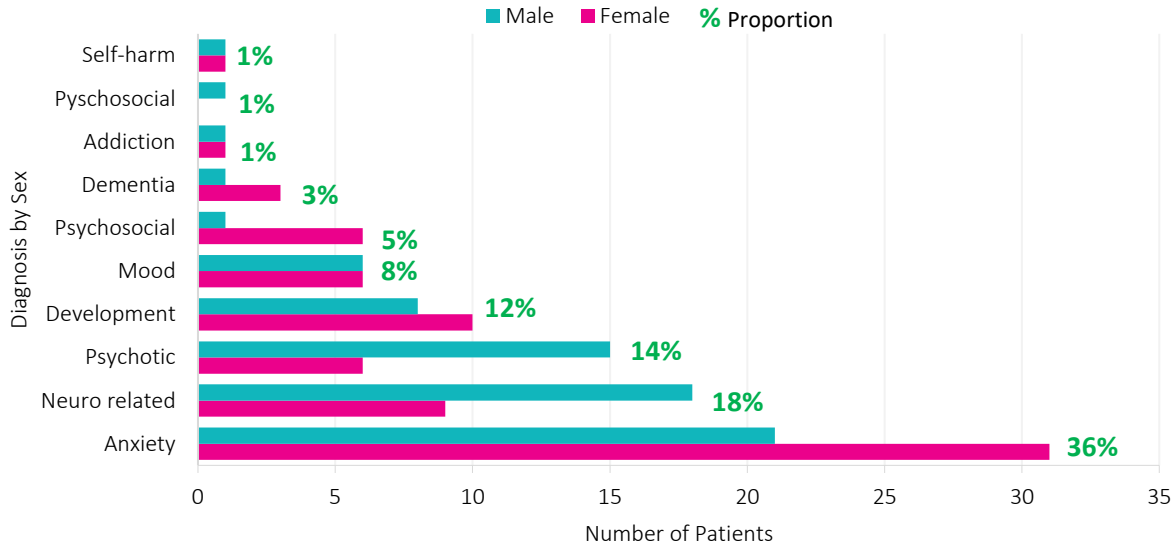


Mental Health

In 2025, less than 1% (146 patients) of the resident population accessed mental health services, a slight decrease from 2% (264 patients) in 2024. All patients recorded are diagnosed with a mental health condition and received treatment.

Figure 53 shows the three most commonly reported diagnoses were anxiety disorders, neurological conditions (such as seizures and epilepsy), and psychotic disorders (such as schizophrenia). Overall, males and females were equally represented at 50% each. Females presented with higher anxiety diagnosis while males recorded higher in neurological and psychotic conditions.

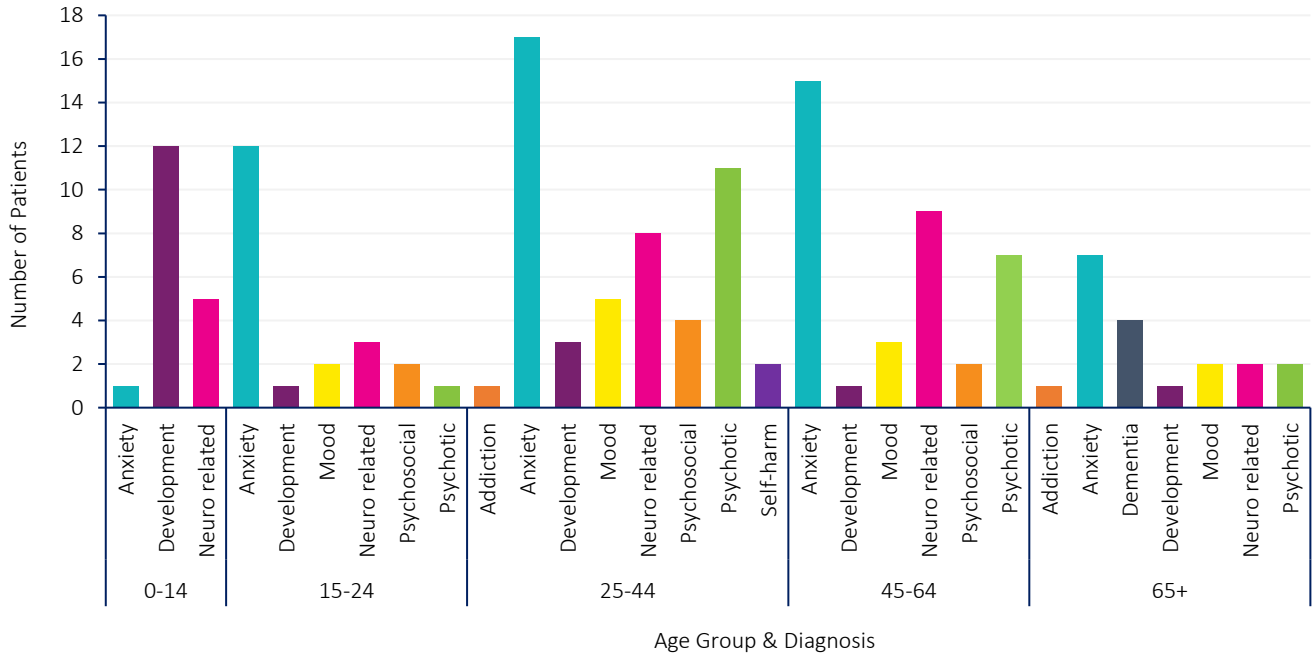
Figure 53: Number and Proportion of Mental Health Diagnosis by Sex, Cook Islands 2025



Mental Health Diagnosis by Age Group

Figure 54 shows the distribution of mental health diagnoses by age group in 2025. Anxiety stands out as the most common diagnosis across age groups except 0-14 [14] age group, with development as the major diagnosis. Meanwhile dementia was the most prevalent amongst individuals aged 65 and older.

Figure 54: Mental Health Diagnosis by Age Group, Cook Islands 2025



Specialist Health Services

Overseas Health Specialist Programme

The Health Specialist Visits (HSV) programme strengthens healthcare delivery in the Cook Islands by supporting the diagnosis and management of complex conditions through overseas visiting consultants. In 2025, a total of 53 health specialists participated in delivering 19 Health Specialist Visit (HSV) activities and delivered 17 Continuous Professional Development (CPD) sessions to improve health outcomes and strengthen the local health workforce.

Under the programme, 3,345 individuals were screened and treated, representing approximately 222 screenings per 1,000 population. Of those screened, 66% were seen in Rarotonga and 34% in the Pa Enua. A total of 74 referrals were generated through HSV activities, with 50 referrals made from the Pa Enua to Rarotonga, and 24 referred to New Zealand for further specialist care.

[14] The presentation of developmental disorders as the predominant diagnosis in the 0–14 age group is clinically expected and not anomalous. Developmental disorders are by definition diagnosed in childhood and early adolescence.

Table 4: 2025 Health Specialists Visits Programme, Cook Islands 2025

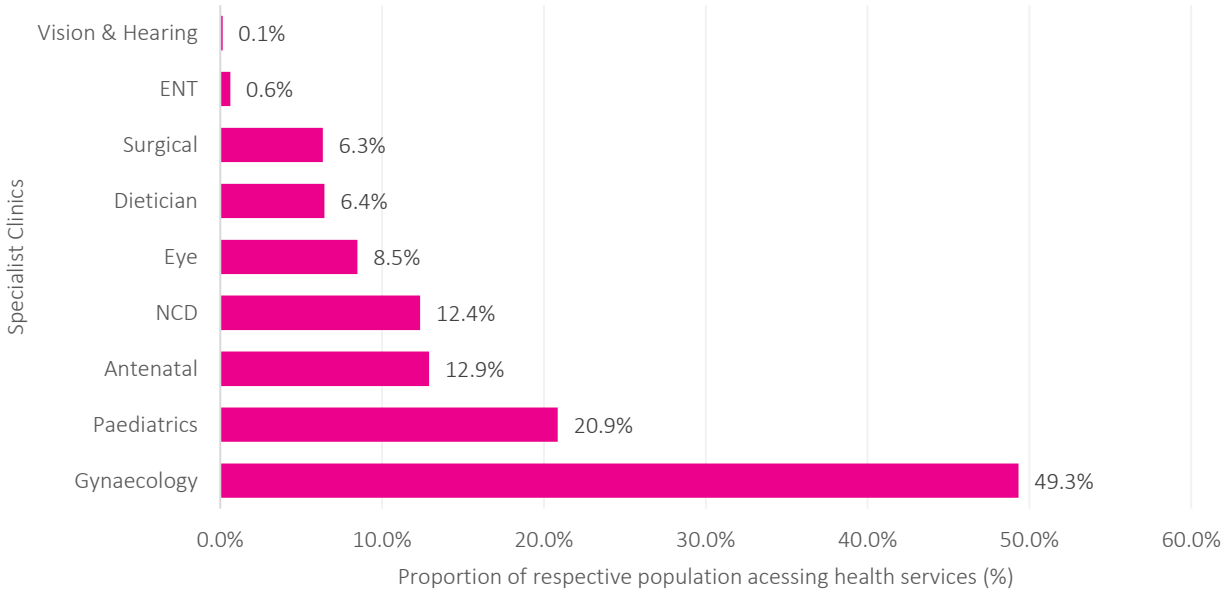
PROGRAM	JANUARY - JUNE 2025	JULY- DECEMBER 2025
Health Specialist programs implemented in the Cook Islands	**10 HSV programs Implemented** ENT Audiology Mental health Womens Health Diabetes Management Optometry Opthalmology Adult Cardiology Paediatric Life Support Primary trauma care	**7 HSV programs Implemented** Mammogram Oral Health Uro-Gynaecology Urology Paediatric Cardiology General Medicine General Paediatric
Number of consultants	30	23
Total number of CPD	**10 CPD Programs implemented** ENT Audiology Mental health Womens Health Diabetes Management Optometry Opthalmology Adult Cardiology Paediatric Life Support Primary trauma care	**7 CPD programs Implemented** Mammogram Oral Health Uro-Gynaecology Urology Paediatric Cardiology General Medicine General Paediatric
Total number of health staff trained	200	150
Total number of health Specialist to Pa enua	12	4
Total number of people screened in the Pa enua	1,102	29
Total number of people screened in Rarotonga	1,076	1,138
Number referrals from Pa enua	40	10
Number of referrals completed and referred to New Zealand	9	15
Number of people fitted with hearing Aids	70	0
Total Surgical Procedure	Women's Health- 37, Opthalmology-65, ENT- 40	Uro-Gynae- 12, Urology - 9

Local Health Special Clinics

The Cook Islands maintains a comprehensive framework of specialized medical services, Gynaecology, Antenatal, and Paediatrics are the top three clinics utilized. Furthermore, the healthcare system manages chronic conditions via dedicated Non-Communicable Disease (NCD) and Dietician clinics, while providing essential sensory and diagnostic support through its Eye, ENT (Ear, Nose, and Throat), and Vision & Hearing services.

Figure 55 shows that in 2025, Gynaecology recorded the highest patient engagement with 49.3% of the female resident population with services ranging with consultations, routine screenings and other reproductive care, followed by Paediatrics at 20.9% and Antenatal care at 12.9%.

Figure 55: Proportion of Population Accessing Health Services by Area of Specialty 2025



Water Quality[15]

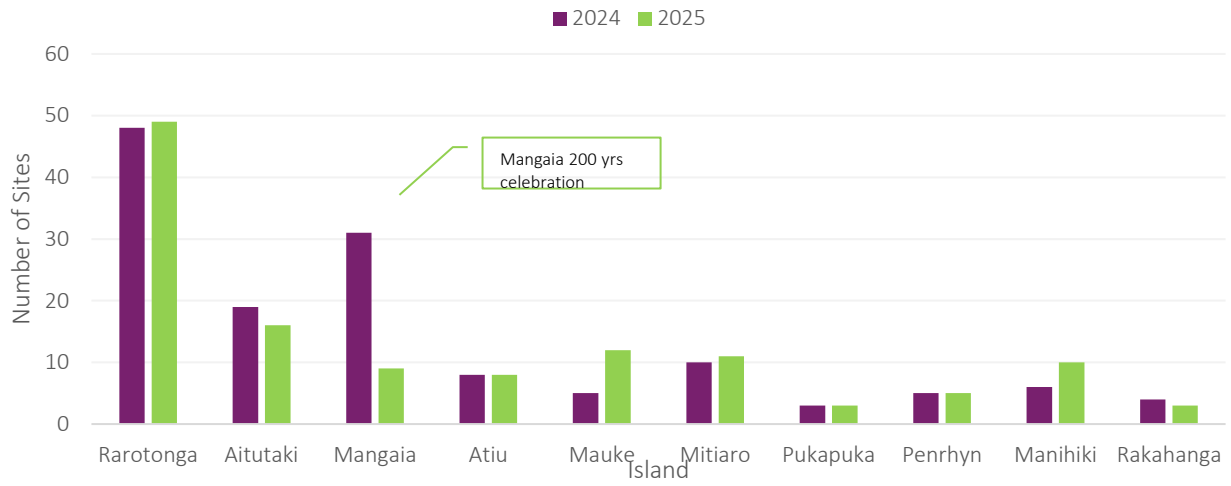
Access by Island

Figure 56 below shows the total number of water sites by islands[16] between 2024 and 2025. During this period, the overall number of stations across the islands decreased slightly from 139 to 129 (a 9.4% decrease). The most notable change occurred in Mangaia, where the number of sites dropped from 31 in 2024 to 9 in 2025. This decrease follows a temporary surge in 2024, where additional water sites were installed and tested to accommodate the surge of visitors in Mangaia for the 200 Years Gospel celebration.

[15] Does not include To Tatou Vai Ltd (TTVL) data. TTVL only collects data for Rarotonga.

[16] No data has been recorded for Palmerston and Nassau.

Figure 56: Number of Water Sites or Stations per Islands, Cook Islands 2024-2025

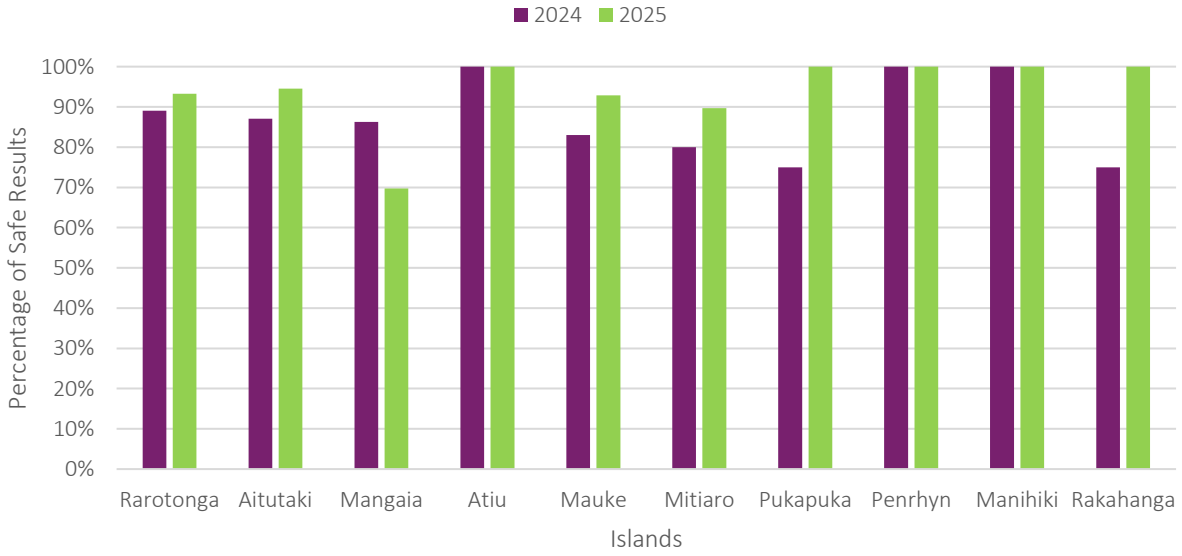


Testing

TMO continues to determine the quality of drinking water in Rarotonga and Pa Enua through hydrogen sulfide (H2S) field-test. This test detects anaerobic microbial activity, indicates potential corrosion risk and flags taste and odour issues, amongst others.

Table 57 shows that between 2024 and 2025, water safety levels trended positively, with half of listed islands reaching a perfect 100% safety rating by 2025. While most locations like Mauke, Mitiaro and Rarotonga saw steady improvements, Pukapuka and Rakahanga showed the most growth, jumping from 75% to 100%. The only exception to this upward trend was Mangaia, which saw a notable decline from 86% to 70%, ending with the island with the lowest percentage of safe water in the final year.

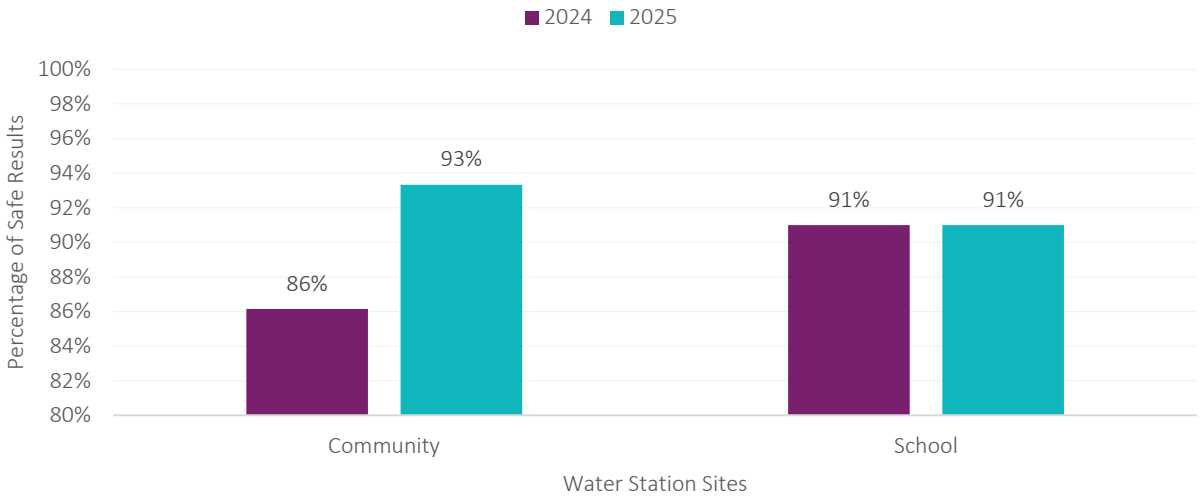
Table 57: Percentage of Safe H2S Test Result by Island, 2024-2025



Community and School Water Test Results

Figure 58 shows the percentage of safe H2S test results in the community and school water stations between 2024 and 2025. The community water stations in the Cook Islands significantly improved its test results from 86% in 2024 to 93% in 2025. During the same period, test results in schools remained safe and stable at 91%.

Figure 58: Percentage of Safe H2S Test Results in the Community and School Areas, 2024-2025



Health Facilities

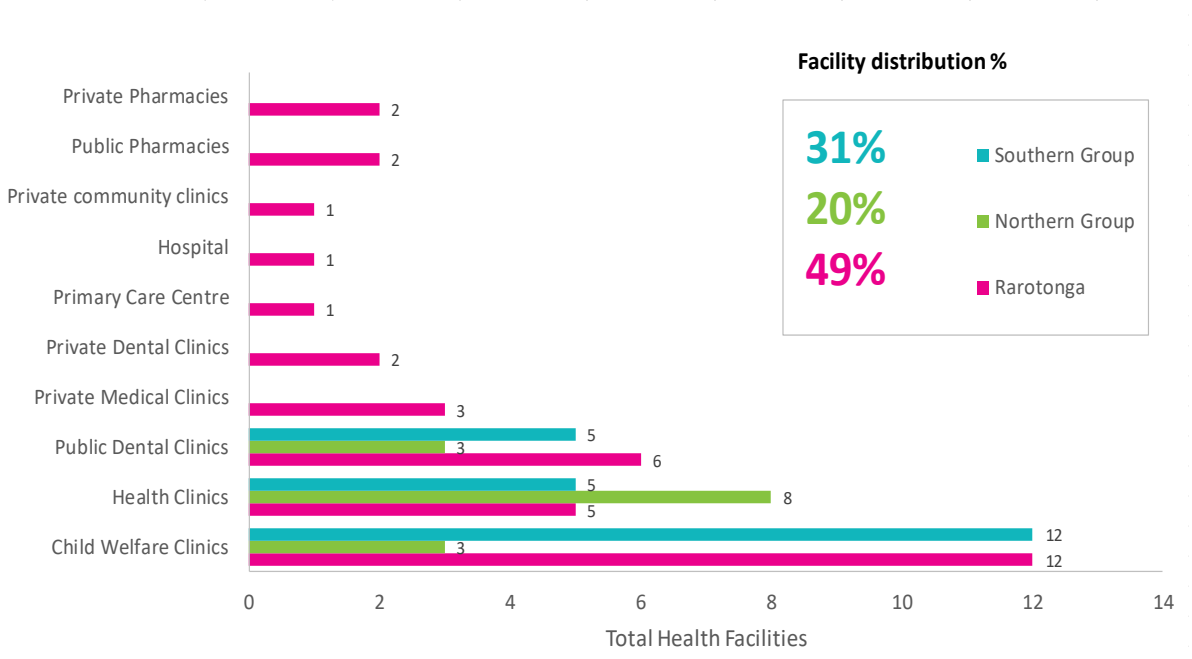
TMO serves as the primary medical authority in the Cook Islands, managing a comprehensive health network that spans public health initiatives, primary care, and specialized secondary and tertiary services. Their clinical scope is broad, covering essential fields such as internal medicine, general surgery, pediatrics, obstetrics and gynaecology, anaesthesia and ophthalmology. To ensure fair access, these services are provided at a nominal fee. However, care is entirely free of charge for specific demographics, including residents aged 60 and older, children up to age 16, and older students still in school.

Health Facilities by Islands

As shown in Figure 59, Child Welfare Clinics and Health Clinics are the most widely distributed facility types across the Cook Islands. Rarotonga holds the largest share of health facilities at 49%, followed by the Southern Group at 31% and the Northern Group at 20%.

Rarotonga is the only island with a hospital, primary care centre, private community clinic, private medical clinics, and pharmacies, reflecting its role as the main hub for health services. Public Dental Clinics and Child Welfare Clinics are the most evenly spread across all three groups, suggesting reasonable access to dental and child health services in the Pa Enua.

Figure 59: Health Facilities and Distribution by Island Groups 2025



Health Workforce

The Cook Islands health workforce, primarily employed by TMO, consists of over 300 health professionals across various clinical and non-clinical roles, delivering a range of services, from primary care to specialized areas like anaesthetics, surgery and maternal health.

The majority of the TMO workforce received their training in Australia, Fiji and New Zealand, with smaller numbers trained in Myanmar, Philippines, Solomon Islands and Vanuatu. The introduction of the Bachelor of Nursing Pacific (BNP) programme in 2022, delivered locally in partnership with Whitireia Polytechnic, New Zealand, has strengthened national capacity by enabling school leavers and young Cook Islanders to undertake nursing education within the country. The TMO workforce is predominantly made up of full-time staff (81%), with the remaining 19% consisting of part-time (7%), casual (7%), and short term contracted workers (5%).[17]

Workforce by Category

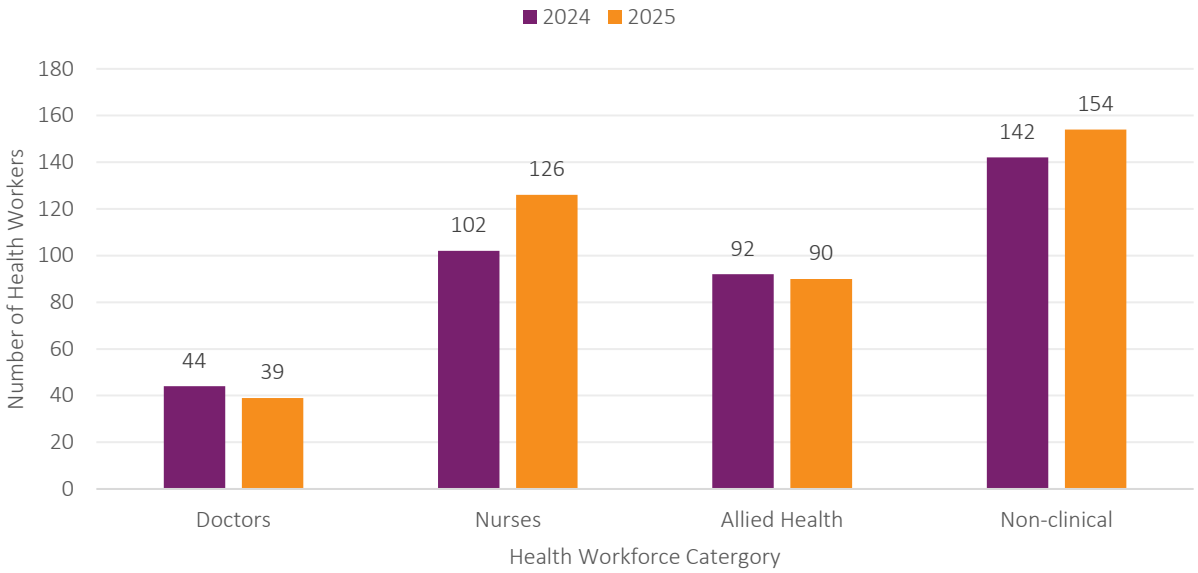
Figure 60 highlights changes in the TMO health workforce between 2024 and 2025. Doctor and allied health personnel numbers saw a slight decline, while the nursing workforce and non-clinical[18] roles increased. This growth was driven by the recruitment of locums, Contracts for Service (CFS), and healthcare assistants to

[17] Te Marae Ora Workforce Snapshot, as of December 2025

[18] Includes administration, public health, planning and funding, infection control, executive assistants, non-clinical management, and related roles.

address specific staffing gaps, alongside additional resourcing of the Human Resources Department to accelerate the filling of long-standing vacant positions.

Figure 60: TMO Health Workforce by Category, Cook Islands 2024-2025



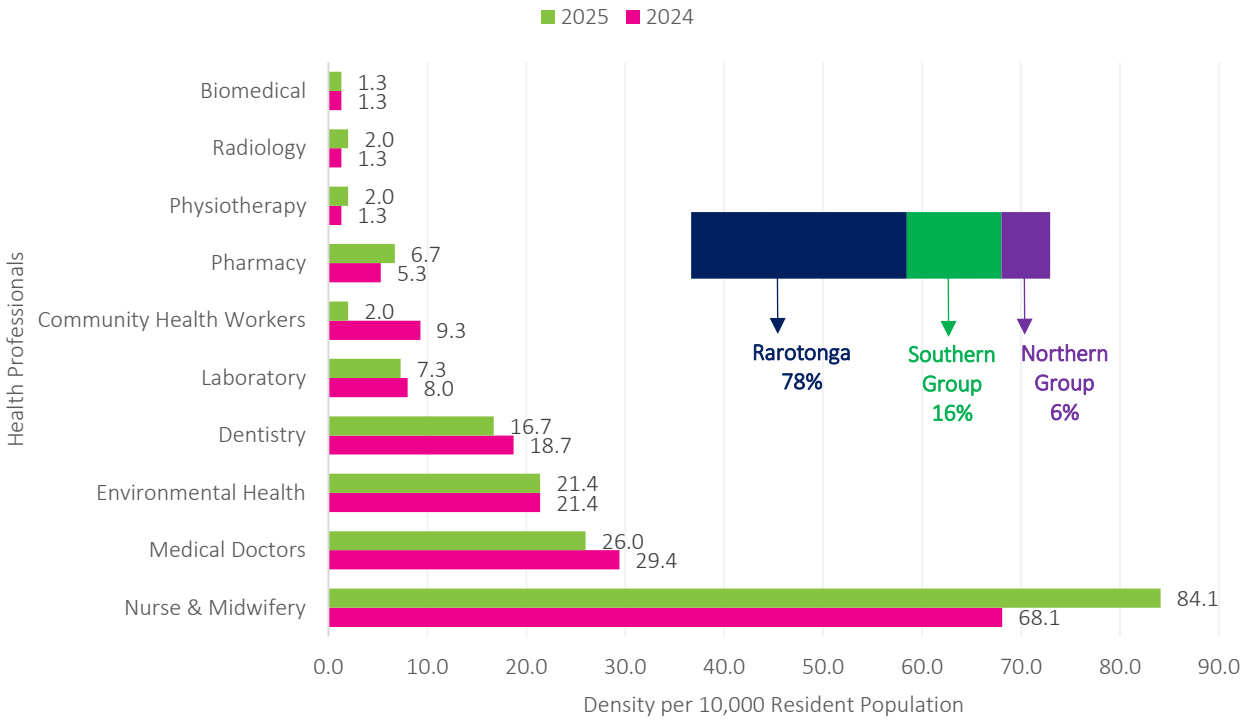
TMO health workforce is primarily concentrated in Rarotonga, where 25 of the 28 permanent[19] doctors and 81 of the 112 permanent nurses are based. Aitutaki follows with 2 resident doctors and 10 nurses, while Pukapuka now has 1 resident doctor and 2 nurses. The remaining Pa Enua are largely supported by nurse practitioners and registered nurses. There are 32 registered midwives and 15 nurse practitioners in 2025. Medical specialists remain low, with 1 psychologist, 1 medical surgeon, 1 anesthetist, 1 paediatrician, 1 gynaecologist and 1 oral surgeon currently in post, and no resident psychiatrist.

Workforce Density

In 2025, Nurse & Midwifery had the highest workforce density in both years, growing from 68.1 to 84.1 per 10,000 population from 2024 to 2025, primarily due to incorporating graduate nurses from the BNP Cohort 1. Medical Doctors came in second, though numbers dipped slightly from 29.4 in 2024 to 26.0 in 2025. Most of the workforce is based in Rarotonga at 78%, followed by the Southern Group at 16% and the Northern Group at 6%, highlighting the continued need for more health workers across the Pa Enua.

[19] Full-time staff, not inclusive of locums, CFS and volunteers.

Figure 61: TMO Workforce Density per 10,000 population, Cook Islands 2024-2025



Health Financing

Health Care Expenditure (HCE)[20] as a share of the national economy has continued to fluctuate over the past six financial years, reflecting shifting government priorities and economic adjustments following the COVID-19 pandemic.

Health Care Expenditure (HCE) as a Percentage of Gross Domestic Product (GDP)

As shown in Figure 62, HCE as a percentage of GDP has remained relatively stable over the five-year fiscal period, peaking at 4.3% in FY 2022/23 and reaching its lowest point at 3.6% in FY 2023/24. Overall, HCE averaged approximately 4.1% of GDP across the period. The changes to the percentages of HCE as a percentage of GDP from the previous bulletin is a result of the changes to the actual GDP that is published in the subsequent MFEM Budget Estimates Book.

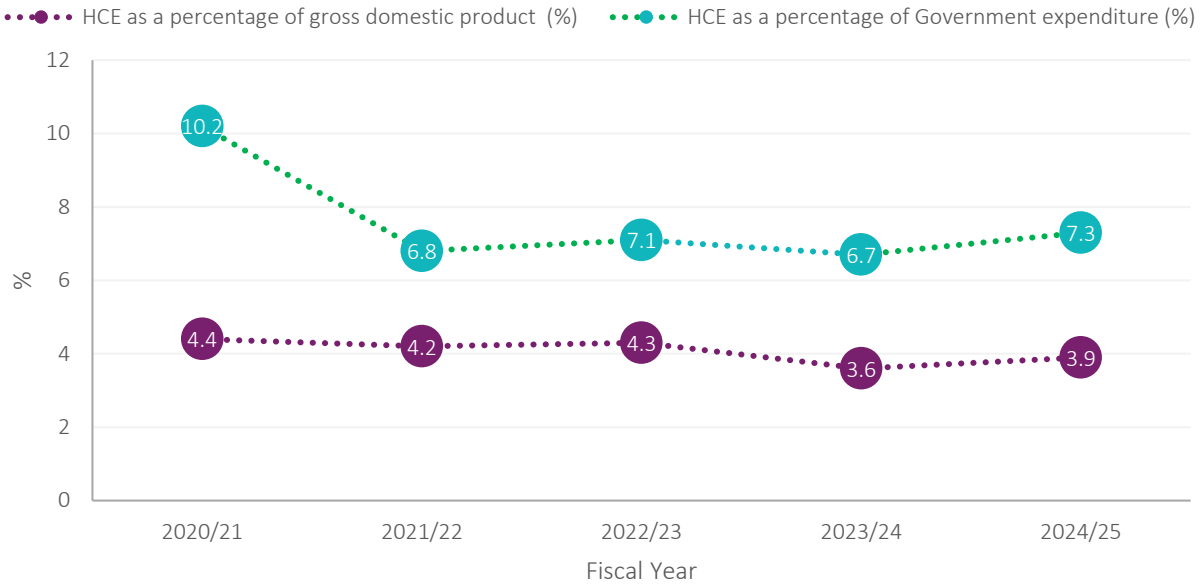
Health Care Expenditure (HCE) as a Percentage of Government Expenditure (GE)

HCE as a percentage of Government Expenditure showed variability over the period, starting at a high of 10.2% in FY 2020/21 before declining to 6.8% in FY 2021/22. In FY 2024/25, the figure edged up slightly to 7.3%, compared to 6.7% recorded in FY 2023/24. The changes to the percentages of HCE as a percentage

[20] Source: MFEM Budget Estimates Book 1, TMO finance records

of the GE from the previous bulletin is a result of the changes to the actual health spends for that particular period.

Figure 62: Healthcare Expenditure as a Percentage of Gross Domestic Product and Total Government Expenditure FY 2020/21-2024/25



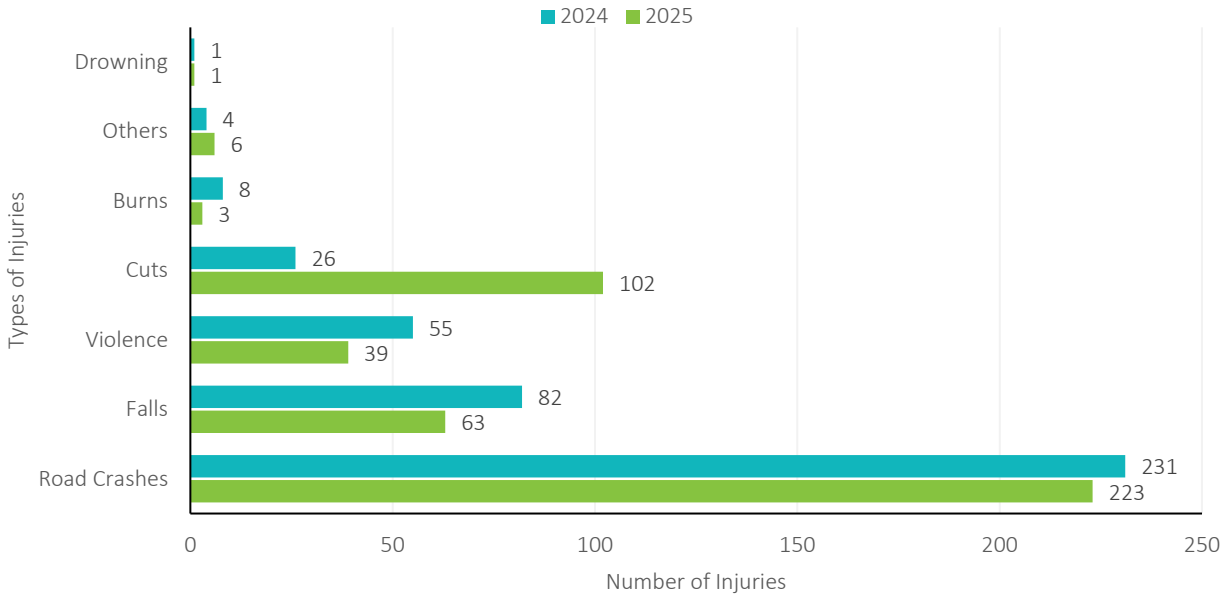
Other

Cook Island Injury Surveillance (CIIS)[21]

A total of 437 injuries were recorded by TMO in 2025, compared to 407 in 2024. Of the 437, road crashes recorded 223 cases (2024: 231), cuts injuries significantly increased from 26 cases in 2024 to 102 in 2025, followed by fall injuries which reduced from 82 in 2024 to 63 in 2025. Meanwhile violence, burns and others showed a decline compared to 2024 as shown below in Figure 63.

[21] The national data for road crashes and violence, are maintained by the Cook Islands Police.

Figure 63: Number of Injuries by Type and Year, Cook Islands 2024-2025

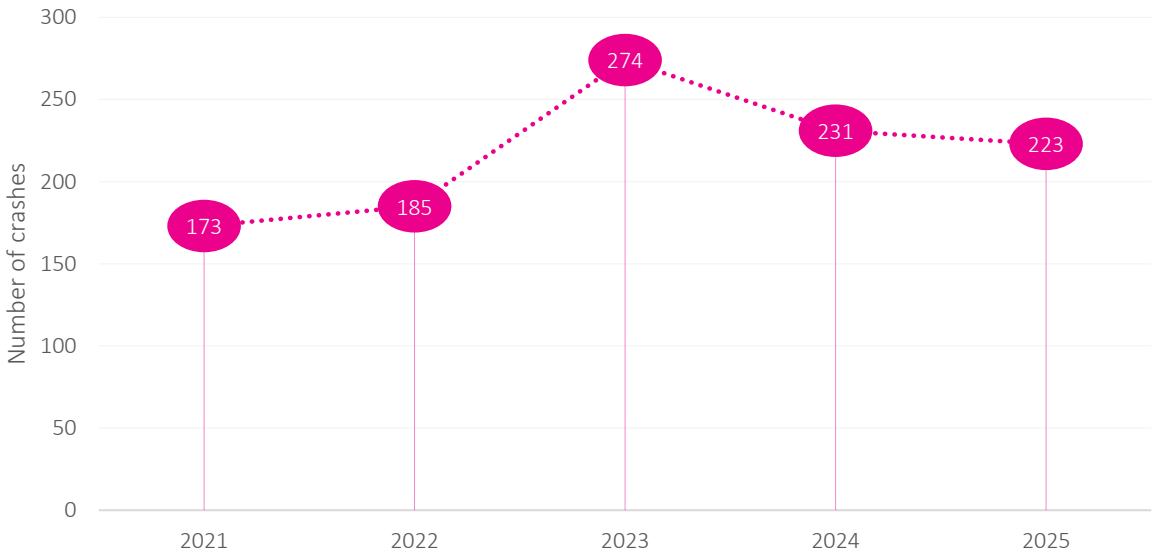


Road Crashes

Road crash accidents encompass a wide range of scenarios, including collisions between vehicles, impacts involving pedestrians, fixed objects or animals, and single-vehicle overturns.

Figure 64 illustrates that the number of individuals involved in crashes increased over the five-year period, rising from 173 in 2021 to a peak of 274 in 2023, a growth of approximately 58%. Following this peak, the figures declined to 231 in 2024, with a further slight reduction to 223 in 2025

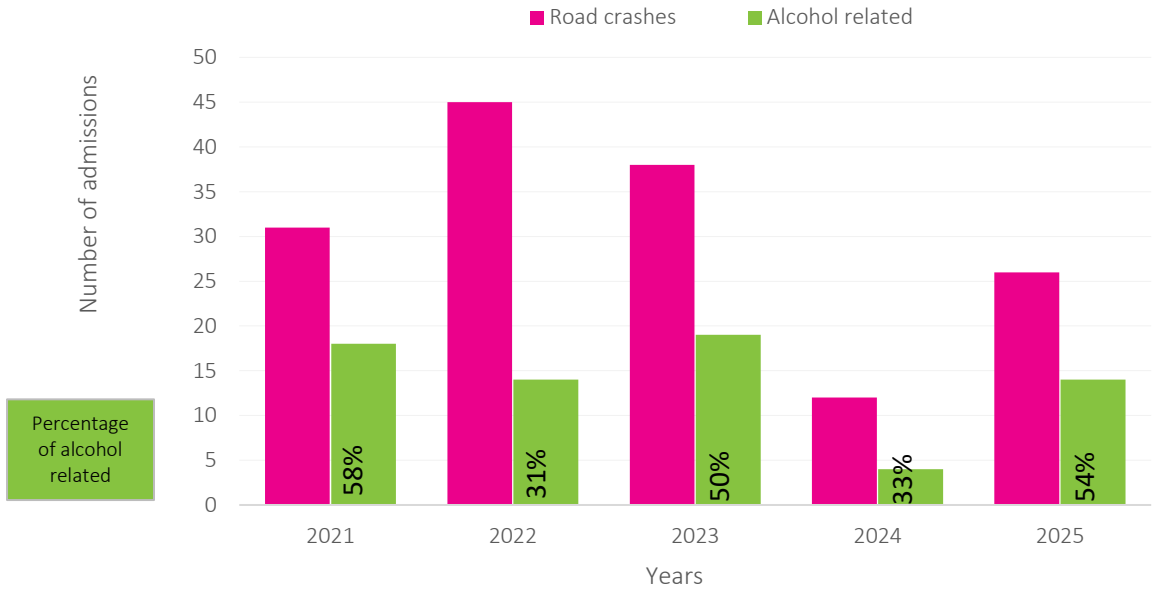
Figure 64: Number of Individuals Involved in Crashes, Cook Islands 2021-2025



Road Crash Admissions

Road crash admissions fluctuated over the period 2021 to 2025, peaking in 2022 (45), before dropping significantly in 2024 (12) and rising slightly in 2025 (26). Alcohol-related cases show a similar trend and make up 31% to 58% of total admissions throughout the period.

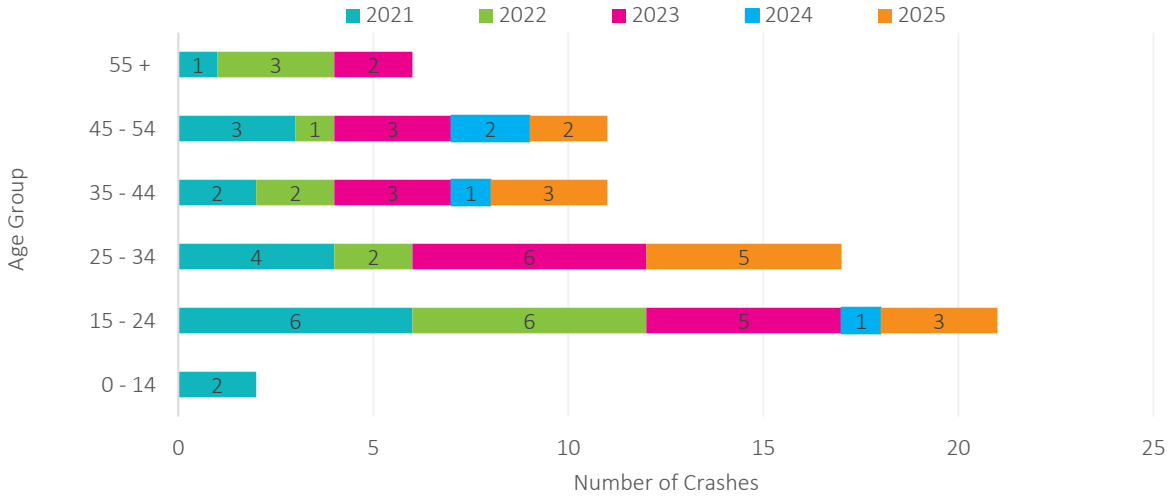
Figure 65: Admissions due to Road Crashes, Rarotonga 2021-2025



Road Crashed by Age Group

Figure 66 shows that from 2021 to 2025, the 15-24 age group experienced the highest number of road crashes, followed by those aged 25-34. Notably, no alcohol-related crashes have been recorded in the 0-14 age group since 2021.

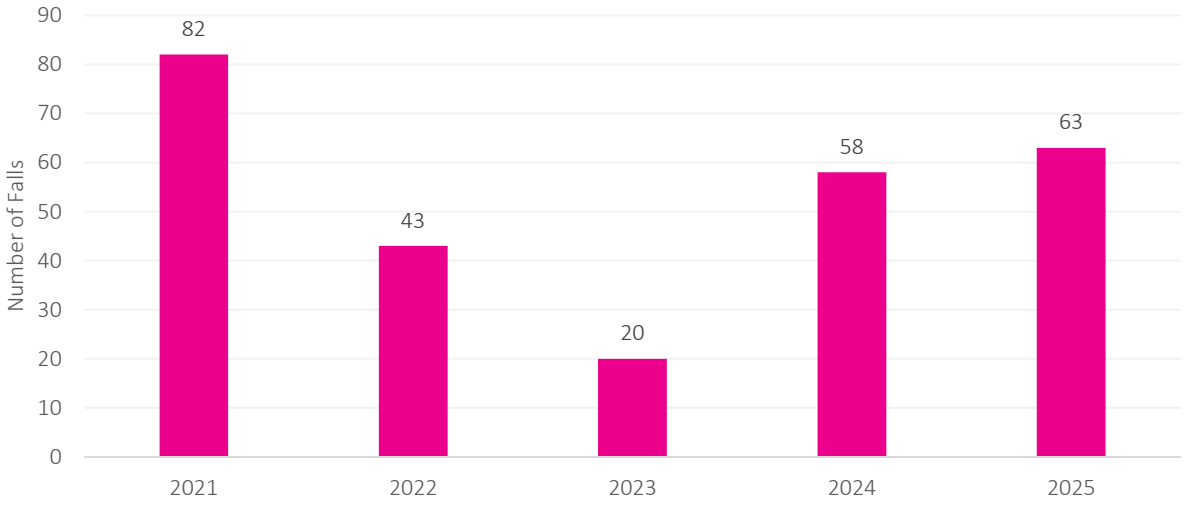
Figure 66: Alcohol-related Road Crashes Admissions by Age Group, Rarotonga 2021-2025



Falls Breakdown by Year

The falls presented in Figure 66 include all types of accidental incidents, such as those occurring at home, from ladders, involving glass, in workplaces, and during sports activities. Over the five-year period, the highest number of falls was recorded in 2024 (82 cases), which declined to 63 cases in 2025. Overall, this represents a 23% decrease in total falls between 2024 and 2025.

Figure 66: Number of Incidents of falls by Year, Cook Islands 2021-2025

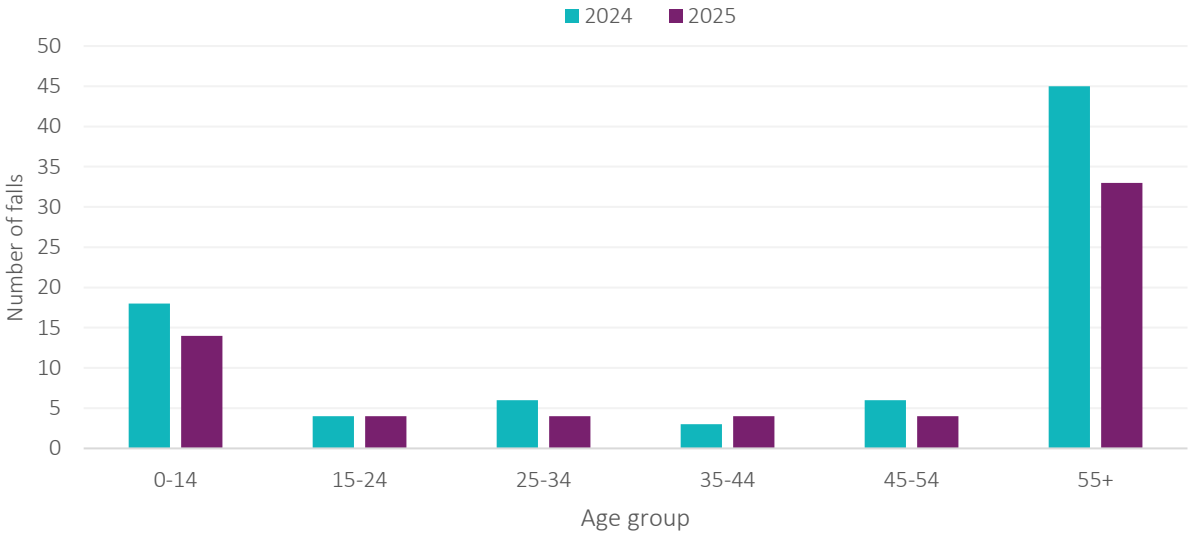


Note: Numbers are provisional and subject to change, figures have been updated since previous reports.

Falls by Age Group

Figure 67 shows that falls were highest among those aged 55 years and above in both 2024 and 2025, although numbers declined in 2025 compared to the previous year. Most other age groups showed slight decreases or remained relatively stable, with only minor variation between the two years.

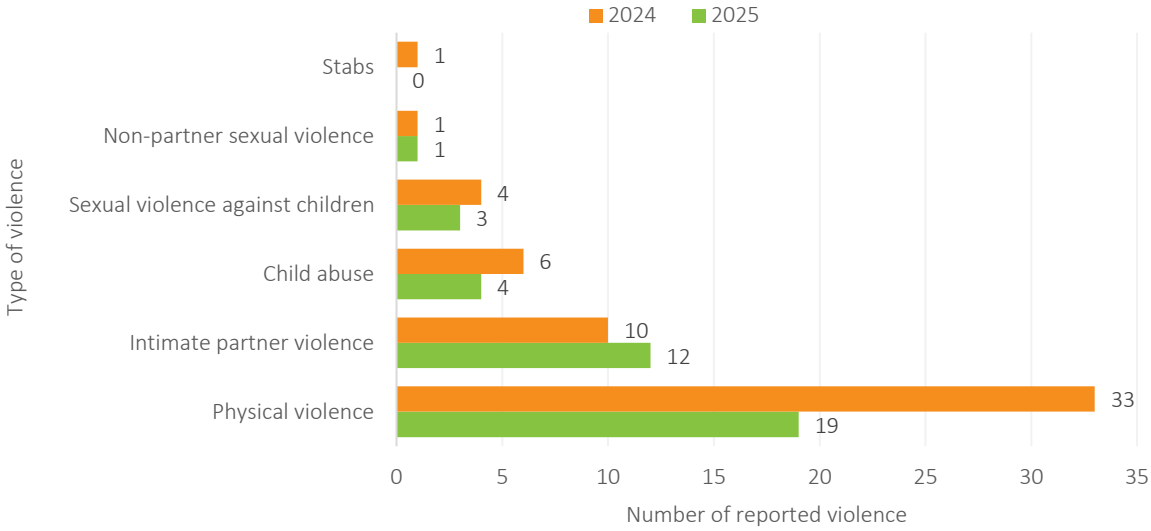
Figure 67: Number of Incident Falls by Age Group, Cook Islands 2024-2025



Violence Breakdown

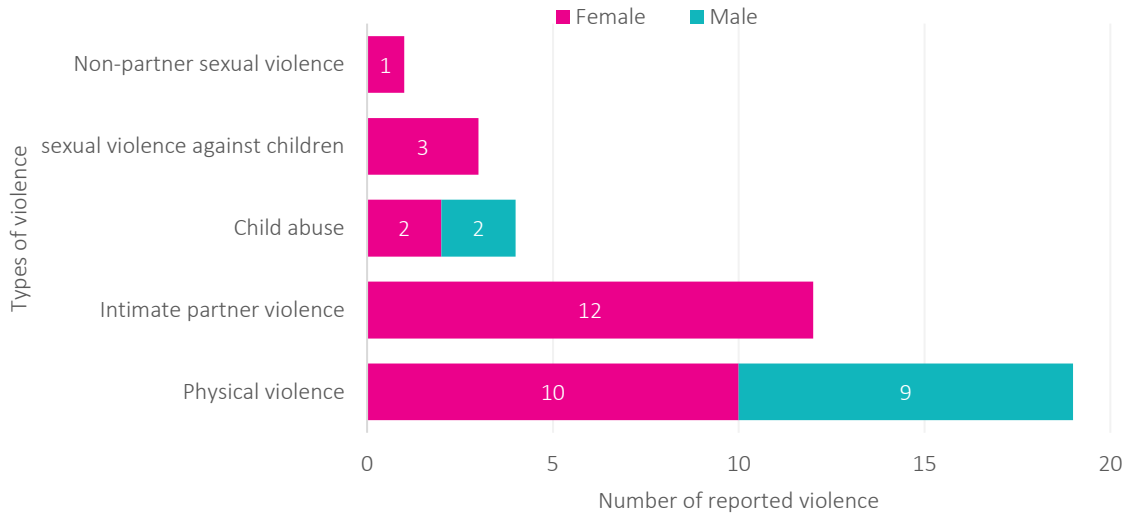
Figure 68 shows physical violence was the most reported incident in 2024 with a significant decline in 2025. Intimate partner violence showed an increase in 2025, while child abuse and sexual violence against children decreased. Non-partner sexual violence and stabbing incidents remained minimal across both years.

Figure 68: Number of Incident Violence by Type and Year, Cook Islands 2024- 2025



Of the 39 total violence incidents recorded in 2025, females (28 incidents) were more affected than males (11 incidents) as shown in figure 69. The most common reported incident was physical violence (female: 10, male: 9) while intimate-partner violence was exclusively reported by females. Child abuse affected both sexes, whilst sexual violence against children was reported by 3 females.

Figure 69: Number of Incident Violence by Type and Sex, Cook Islands 2025



Appendix

MedTech Evolution Screening Templates

SCREENING	MEDTECH CODE
NCD Register	NCDREG
Fish Poisoning	FISH
Dengue-Zika-Chickungunya	DENZIK
Syndrome- for acute fever & rash, diarrhea, prolonged fever and influenza like-illness	SYND, ILI
Admission	ADM
Discharged	DIS
Death	D
Cook Islands Injury Surveillance	CIIS
Road traffic accidents	MVA
Baby birth details	BIRTH
Mother details	BIRTH2
Antenatal clinic	ANC
Postnatal clinic	PNC
Primary health care (Outpatient)	OPD
Triage	TRIAGE
Patient referrals NZ	REFER
Patient referrals OI	REFOI
Specialist Visits	HSV
Maternal and child oral health	MCHOH
Operation Theatre	OT
Breastfeeding	BF1, BF2, BFBLOG

Note: The PAP SMEAR screening template was not used in this 2025 bulletin.

POPULATION

Definitions:

- ***Population size:*** The total number of individuals residing in a specific geographic area at a specific point in time.
- ***Age Distribution:*** The proportion or percentage of individuals in different age groups within the population.

Methodology/system issues/sources:

- Data is sourced from 2021 Census Report, Population and Demographic Characteristics
- All denominator calculations related to population used the resident and mid-year estimates.

Table 1: Cook Islands population, size, change, distribution and density

Island/ Region	Area (km²)	Total population			Population change		Population distribution	Density
		2011	2016	2021	(2016-2021)		2021	
					Total	%	%	pp per km²
Rarotonga	**67.1**	**13,095**	**13,007**	**10,898**	**-2,109**	**-16**	**72**	**162**
Southern Islands	**145.2**	**3,586**	**3,326**	**3,040**	**-286**	**-9**	**20**	**21**
Aitutaki	18.3	2,038	1,941	1,782	**-159**	**-8**	12	97
Mangaia	51.8	572	499	471	**-28**	**-6**	3	9
Atiu	26.9	480	434	383	**-51**	**-12**	3	14
Mauke	18.4	307	297	249	**-48**	**-16**	2	14
Mitiaro	22.3	189	155	155	**0**	**0**	1	7
Manuae	6.2	-	-	-	-	-	-	-
Takutea	1.3	-	-	-	-	-	-	-
Northern Islands	**24.4**	**1,113**	**1,101**	**1,102**	**1**	0	**7**	**45**
Palmerston	2.1	60	58	25	**-33**	-57	0	12
Pukapuka	1.3	451	444	456	**12**	3	3	351
Nassau	1.3	73	78	92	**14**	18	1	71
Manihiki	5.4	239	212	215	**3**	1	1	40
Rakahanga	4.1	77	83	81	**-2**	-2	1	20
Penrhyn	9.8	213	226	233	**7**	3	2	24
Suwarrow	0.4	-	-	-	-	-	-	-
Cook Islands	**236.7**	**17,794**	**17,434**	**15,040**	**-2,394**	**-14**	**100**	**64**

LIFE EXPECTANCY

Definitions:

- ***Life expectancy:*** is an estimate of the average number of years a person can expect to live, based on age-specific death rates in a given year.
- ***Life expectancy at birth:*** is an estimated measure for the average number of years a newborn may live up to, if the current mortality rates remain constant throughout their lifetime.
- ***Life tables:*** A tabular display of life expectancy and the probability of dying at each age for a given population, according to the age-specific death rates prevailing at the time. The life table gives an organized, complete picture of a population's mortality.
- ***Abridge life table:*** is used for our Cook Islands calculation of the life table due to insufficient data to do an analysis by single year age groups that are based on assumptions that death rates are similar at neighboring ages.

Methodology/system issues/sources:

- The population size for the Cook Islands was too small to allow the calculation of complete life tables with accuracy. Instead an abridged life table is used with ages grouped into 5 year age categories.
- The Chiang method was used to measure the confidence intervals for our life expectancy, which is the most appropriate for small populations, which may have some missing information in the life table.
- Five year mortality data were used for the calculation of these life tables to avoid year to year stochastic variation that is common in small populations.
- Aggregation of data from individual years makes comparison between periods statistically meaningful.
- Resident population from the Census of Population and Dwellings 2021 was used for population data
- Standard methods of calculation were used for indicators reported.
- One major factor contributing to an accuracy gap in life expectancy calculations is deaths occurring overseas that are not reported back into the system.

Table 2: Life table for males 2025

Life table <5 - ≥75						Death rate	Probability of dying	surviving	Life table parameters Radix	deaths			Life expectancy		
Age	x	nx	ax	pop (Nx)	death	mx	qx	px	lx	dx	Lx	Tx	ex	L 95% CI	U 95% CI
<5	0	5	0.2	572	1.6	0.00280	0.01383	0.98617	100000	1383	494467	7333833	73.34	69.90	76.78
5-9	5	5	0.5	664	0.2	0.00030	0.00150	0.99850	98617	148	492713	6839366	69.35	66.25	72.46
10-14	10	5	0.5	719	0	0.00000	0.00000	1.00000	98468	0	492342	6346653	64.45	61.37	67.53
15-19	15	5	0.5	579	0.6	0.00104	0.00517	0.99483	98468	509	491070	5854310	59.45	56.37	62.53
20-24	20	5	0.5	397	1	0.00252	0.01252	0.98748	97960	1226	486733	5363240	54.75	51.75	57.75
25-29	25	5	0.5	388	0.8	0.00206	0.01026	0.98974	96734	992	481187	4876507	50.41	47.67	53.16
30-34	30	5	0.5	449	0.4	0.00089	0.00444	0.99556	95741	426	477643	4395320	45.91	43.36	48.46
35-39	35	5	0.5	451	0.6	0.00133	0.00663	0.99337	95316	632	475000	3917676	41.10	38.61	43.59
40-44	40	5	0.5	427	1.2	0.00281	0.01395	0.98605	94684	1321	470117	3442677	36.36	33.94	38.78
45-49	45	5	0.5	455	2	0.00440	0.02174	0.97826	93363	2030	461740	2972560	31.84	29.54	34.13
50-54	50	5	0.5	525	4.6	0.00876	0.04287	0.95713	91333	3915	446877	2510820	27.49	25.33	29.65
55-59	55	5	0.5	518	4	0.00772	0.03788	0.96212	87418	3311	428810	2063943	23.61	21.61	25.61
60-64	60	5	0.5	430	7.2	0.01674	0.08036	0.91964	84106	6759	403636	1635133	19.44	17.53	21.35
65-69	65	5	0.5	287	8	0.02787	0.13029	0.86971	77348	10078	361545	1231497	15.92	14.18	17.66
70-74	70	5	0.5	231	9	0.03896	0.17751	0.82249	67270	11941	306496	869952	12.93	11.60	14.27
75+	75	20	0.5	277	27.2	0.09819	1.00000	0.00000	55329	55329	563456	563456	10.18		

Table 2.1: Life table for females 2025

Life table <5 - ≥75						Death rate	Probability of dying	surviving	Life table parameters Radix	deaths			Life expectancy		
Age	x	nx	ax	pop (Nx)	death	mx	qx	px	lx	dx	Lx	Tx	ex	L 95% CI	U 95% CI
<5	0	5	0.2	541	2.2	0.00407	0.02001	0.97999	100000	2001	491997	7872142	78.72	75.33	82.11
5-9	5	5	0.5	600	0	0.00000	0.00000	1.00000	97999	0	489996	7380145	75.31	72.57	78.05
10-14	10	5	0.5	672	0	0.00000	0.00000	1.00000	97999	0	489996	6890149	70.31	67.57	73.05
15-19	15	5	0.5	582	0.2	0.00034	0.00172	0.99828	97999	168	489576	6400153	65.31	62.57	68.05
20-24	20	5	0.5	433	0	0.00000	0.00000	1.00000	97831	0	489155	5910577	60.42	57.71	63.12
25-29	25	5	0.5	487	0.4	0.00082	0.00410	0.99590	97831	401	488153	5421422	55.42	52.71	58.12
30-34	30	5	0.5	482	0.2	0.00041	0.00207	0.99793	97430	202	486646	4933269	50.63	48.01	53.26
35-39	35	5	0.5	493	0.8	0.00162	0.00808	0.99192	97228	786	484177	4446623	45.73	43.14	48.33
40-44	40	5	0.5	484	1.2	0.00248	0.01232	0.98768	96442	1188	479242	3962447	41.09	38.59	43.59
45-49	45	5	0.5	518	1.2	0.00232	0.01152	0.98848	95254	1097	473529	3483205	36.57	34.19	38.95
50-54	50	5	0.5	514	1.8	0.00350	0.01736	0.98264	94157	1634	466701	3009676	31.96	29.67	34.26
55-59	55	5	0.5	511	2.8	0.00548	0.02703	0.97297	92523	2501	456363	2542975	27.48	25.28	29.69
60-64	60	5	0.5	396	5.2	0.01313	0.06357	0.93643	90022	5723	435805	2086612	23.18	21.06	25.29
65-69	65	5	0.5	305	4.2	0.01377	0.06656	0.93344	84300	5611	407470	1650807	19.58	17.70	21.47
70-74	70	5	0.5	217	7.2	0.03318	0.15319	0.84681	78689	12054	363307	1243337	15.80	14.18	17.42
75+	75	26	0.5	383	29	0.07572	1.00000	0.00000	66634	66634	880030	880030	13.21		

ANTENATAL AND POSTNATAL COVERAGE

Definitions:

- ***Antenatal coverage:*** Percentage of women aged 15–49 years with a live birth in a given time period who received antenatal care, four times or more times from any provider.
- ***Postnatal coverage:*** Proportion of newborns who have a postnatal contact with a health provider within 2 days of delivery.
- ***Postpartum coverage:*** Proportion of women who have postpartum contact with a health provider within 2 days of delivery.

Methodology/system issues/sources:

- Data is sourced from Medtech patient daily notes as well as postnatal and antenatal classifications.
- Postnatal and postpartum coverage were combined as cares are done for both mother and baby during visits.

Table 3: Antenatal and Postnatal coverage, Cook Islands 2024-2025

	2024	2025
Pregnant women with ≥1 antenatal visit	99%	99%
Pregnant women with ≥4 antenatal visits	93%	95%
Postnatal care coverage (mother & newborn)	100%	100%

BREASTFEEDING

Methodology/system issues/sources:

- Data is sourced from the Medtech breastfeeding screening templates (BFB and BF1 and BFBLOG).
- Denominators were calculated using an age-eligible cohort approach, including infants who reached 6 weeks, 3 months, and 5 months of age during 2025.

LIVE BIRTHS

Definitions:

- ***Live Births:*** The total number of births in a given year where the baby shows any sign of life (such as breathing, heartbeat, or voluntary muscle movement) regardless of gestational age.
- ***Crude Birth Rate (CBR):*** The number of live births per 1,000 people in a given population per year.
- ***Low Birth Weight (LBW):*** Infants born weighing less than 2,500 grams (5.5 pounds) regardless of gestational age.
- ***A skilled health professional:*** is a qualified, accredited worker such as a doctor, nurse, or midwife competent in providing evidence-based, quality health services. They are trained, educated, and licensed to diagnose, treat, and prevent illnesses, often working within a team to provide specialized care, particularly in maternal and newborn services

Formulas:

$$\text{CBR} = \frac{\text{Number of live births in a year}}{\text{Total Population}} \times 1{,}000 \qquad \text{LBW} = \frac{\text{Number of live births <2,500 grams}}{\text{Total number of live births}} \times 1{,}000$$

Methodology/system issues/sources:

- Data is sourced from Medtech birth screening template.
- Total live births does not include fetal deaths.
- Birth figures may differ from those reported by National Statistics due to differences in data sources and methodology. TMO uses raw line list data based on the recorded time of birth and excludes visitors. In contrast, figures from the Ministry of Justice and the National Statistics Office are registry-based and only captured upon official registration, which may result in variations.

Table 4: Live births by sex and year, Cook Islands 2016-2024

Year	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Male	125	117	121	104	124	111	115	98	105	94
Female	118	114	118	128	133	95	114	107	91	88
Total	243	231	239	232	257	206	229	205	196	182

Table 4.1: Live births to low birth weight cases, Cook Islands 2016-2025

Year	Live Births	Number of cases	% to live births
2016	243	12	5%
2017	231	15	7%
2018	239	14	6%
2019	232	8	4%
2020	257	12	5%
2021	206	9	4%
2022	229	6	3%
2023	205	8	4%
2024	196	7	4%
2025	182	6	3%

Table 4.2: Distribution of live births by island and sex, Cook Islands 2021-2025

REGION & ISLAND	2021			2022			2023			2024			2025		
	Both Sexes	Male	Female	Both Sexes	Male	Female	Both Sexes	Male	Female	Both Sexes	Male	Female	Both Sexes	Male	Female
COOK ISLANDS	206	111	95	229	115	114	205	98	107	196	105	91	182	94	88
RAROTONGA	206	111	95	223	112	111	202	97	105	188	100	88	178	91	87
SOUTHERN GROUP	0	0	0	5	3	2	3	1	2	8	5	3	4	3	1
excluding Rarotonga															
Aitutaki	0	0	0	1	1	0	2	0	2	7	5	2	3	3	0
Mangaia	0	0	0	3	1	2	1	1	0	1	0	1	1	0	1
Atiu	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Mauke	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0
Mitiaro	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
NORTHERN GROUP	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0
Palmerston	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Pukapuka/Nassau	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Manihiki	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Rakahanga	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Penrhyn	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0

FERTILITY RATE

Definitions:

- ***Total Fertility Rate (TFR):*** The average number of children a woman could give birth to during her reproductive years (15-49 years), assuming current age-specific birth rates remain constant throughout her reproductive lifespan.
- ***Age-specific Fertility Rate (ASFR):*** The number of live births per 1,000 women in a specific age group in a given year.

Formulas:

$$\text{TFR} = \frac{\text{Total number of mothers given birth}}{\text{Total number of female resident population in a year}} \times 1{,}000 \qquad \text{ASFR} = \frac{\text{Age-specific number of mothers given birth}}{\text{Age-specific female population}} \times 1{,}000$$

Methodology/system issues/sources:

- Data is sourced from Medtech birth and mother screening template.

Table 5: Mothers given birth and fertility rates by age groupings, Cook Islands 2016-2025

Age Group	Female Resident Population				Number of mothers									
	2006	2011	2016	2021	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
15-19	630	597	711	582	24	25	22	9	18	19	8	20	20	20
20-24	545	512	656	433	63	56	74	60	73	57	60	47	42	37
25-29	473	493	612	487	56	76	63	61	60	62	58	52	54	42
30-34	554	462	595	482	59	42	43	52	44	40	52	52	44	50
35-39	551	521	533	493	29	20	26	26	33	17	36	26	25	18
40-44	540	542	601	484	9	12	11	10	11	8	13	6	11	14
45-49	457	528	625	518	1	0	0	1	1	2	1	0	0	0
Total	3,750	3,655	4333	3479	241	231	239	219	240	205	228	203	196	181
Age-Specific Fertility Rate (per 1'000 Women)														
15-19					34	35	31	13	25	33	14	34	34	34
20-24					123	109	149	91	111	132	139	109	97	85
25-29					114	154	134	100	98	127	119	107	111	86
30-34					128	91	89	87	74	83	108	108	91	104
35-39					56	38	60	49	62	34	73	53	51	37
40-44					17	22	21	17	18	17	27	12	23	29
45-49					2	0	0	2	2	4	2	0	0	0
General Fertility Rate (per 1'000 Women)					66	63	68	51	55	59	66	47	56	52
Total Fertility Rate					2.4	2.3	2.5	1.8	2.0	2.1	2.4	2.1	2.0	1.9

ADOLESCENT HEALTH

Definitions:

- ***Adolescent/Teenage Pregnancy:*** Pregnancy occurring in individuals between the ages of 15 and 19 years.
- ***Adolescent Birth:*** The occurrence of a live birth to a mother aged 15 and 19 years.
- ***Adolescent Birth Rate:*** The annual number of births to females aged 10-14 or 15-19 years per 1,000 females in the respective age group.

Methodology/system issues/sources:

- Data is sourced from Medtech birth screening template.
- The count of adolescent pregnancies includes women who have experienced miscarriages or given birth.

Table 6: Total number of adolescent pregnancy, Cook Islands 2021-2025

Year	Alive	Stillbirth	Total	%
2021	19	0	19	21%
2022	8	0	8	9%
2023	20	3	23	26%
2024	20	0	20	22%
2025	20	0	20	22%

Table 6.1: Age distribution of adolescent mothers, Cook Islands 2023-2025

Age	2023	2024	2025	Total
15yrs	4	0	0	4
16yrs	3	1	1	5
17yrs	5	4	7	16
18yrs	5	2	9	16
19yrs	6	13	3	22

CONTRACEPTIVES

Definitions:

- ***Contraceptive:*** The deliberate use of artificial methods or techniques to prevent pregnancy.
- ***Contraceptive Prevalence Rate (CPR):*** The percentage of women aged 15-49 years, married or in-union, who are currently using, or whose sexual partner is using, at least one method of contraception, regardless of the method used.

Formula:

$$CPR = \frac{\text{Number of women (15-49 years) using contraceptives in a year}}{\text{Total number of women (15-49 years) population}} \times 100$$

Methodology/system issues/sources:

- Data is sourced from Medtech contraceptive classifications.

Table 7: Current users: Women on family planning contraceptives by year, Cook Islands 2016-2025

Contraceptive Type	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
All Methods	990	963	1044	830	762	623	916	1310	1158	1025
Prevalence Rate (%)	22.8	26.5	24.1	19.2	17.6	17.8	26.2	37.5	33.2	29.3
Oral Contraceptive (Pills)	393	380	130	65	49	9	29	225	214	191
Intra Uterine Device	7	2	13	6	6	6	9	12	21	15
Depo Provera (Injections)	482	472	772	651	613	508	865	862	818	732
Norplant/Jadelle	81	98	125	100	94	100	6	123	105	87
Condom	22	2	0	0	0	0	0	0	0	0
Others	5	9	4	0	0	0	7	26	0	0

Table 7.1: Contraceptives by age groups, Cook Islands 2025

Age group	Types				Total Users	Percent
	Depo Provera	Intra Uterine Device	Oral	Norplant / Jadelle		
15-19	138	0	20	10	168	16%
20-24	120	0	27	13	160	16%
25-29	96	6	27	9	138	13%
30-34	129	3	34	18	184	18%
35-39	107	1	33	21	162	16%
40-44	92	1	33	8	134	13%
45-49	50	4	17	8	79	8%

MORTALITY

Definitions:

- ***Mortality:*** The state of being subject to death; the number of deaths in a population, typically expressed as a rate per 1,000 or 100,000 individuals per year.
- ***Crude Death Rate:*** The total number of deaths in a population during a specified period per 1,000 individuals in that population
- ***Cause of Death:*** The disease, condition, or injury that directly leads to a person's death. This can include underlying conditions and contributing factors that result in mortality.
- ***Underlying Cause of Death:*** The disease or condition that initiated the chain of events leading directly to death. It is the primary condition that started the decline in health resulting in death.
- ***ICD-10:*** The International Classification of Diseases, 10th Revision (ICD-10) is a medical classification list by the World Health Organization (WHO). It contains codes for diseases, signs and symptoms, abnormal findings, complaints, social circumstances, and external causes of injury or diseases.

Formulas:

$$CDR = \frac{Total\ number\ of\ deaths\ in\ a\ year}{Total\ population}\ x\ 1{,}000$$

Methodological/ System Issues:

- Data is sourced from Medtech and Ministry of Justice death register.
- Deaths occurring overseas are not captured/reported back into the system
- Death screenings are not consistently filled in at the time of occurrence, posing a challenge during the extraction of the register and resulting in some deaths not being captured.
- Excludes all visitors dying in the Cook Islands.
- Source for population data is Statistics Cook Islands Quarterly Vital Statistics and Population estimates
- Rates are calculated per 1,000 and 100,000 resident population

Table 8: Deaths by region and islands, year and sex, Cook Islands 2021-2025

REGION & ISLAND	2021			2022			2023			2024			2025		
	Both Sexes	Male	Female	Both Sexes	Male	Female	Both Sexes	Male	Female	Both Sexes	Male	Female	Both Sexes	Male	Female
COOK ISLANDS	126	70	56	106	53	53	130	77	53	132	70	62	130	72	58
RAROTONGA	90	49	41	80	39	41	87	51	36	85	48	37	101	55	46
SOUTHERN GROUP excluding Rarotonga	31	17	14	21	11	10	32	18	14	38	19	19	23	13	10
Aitutaki	17	7	10	12	5	7	16	7	9	21	12	9	15	8	7
Mangaia	2	2	0	3	1	2	7	5	2	7	3	4	2	1	1
Atiu	5	4	1	4	4	0	5	3	2	6	2	4	3	2	1
Mauke	6	4	2	2	1	1	4	3	1	2	1	1	2	1	1
Mitiaro	1	0	1	0	0	0	0	0	0	2	1	1	1	1	0
NORTHERN GROUP	5	4	1	5	3	2	11	8	3	9	3	6	6	4	2
Palmerston	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Pukapuka/Nassau	1	1	0	3	2	1	5	4	1	3	0	3	3	2	1
Manihiki	4	3	1	1	0	1	2	1	1	3	1	2	3	2	1
Rakahanga	0	0	0	1	1	0	1	0	1	2	2	0	0	0	0
Penrhyn	0	0	0	0	0	0	3	3	0	1	0	1	0	0	0

Table 8.1: Mortality by the underlying cause, age grouping and sex, Cook Islands 2025

ICD-10		All Age		<1		15-24		25-34		35-44		45-54		55-64		65-74		75-84		85+	
Tab Code	Underlying Cause of Death	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M
	ALL CAUSES	**58**	**72**	**2**	**0**	**0**	**1**	**1**	**2**	**3**	**4**	**2**	**9**	**10**	**10**	**12**	**21**	**12**	**18**	**16**	**7**
A00-B99	**Certain infectious and parasitic diseases**	**0**	**1**								**1**										
	B20-B24 Human immunodeficiency virus [HIV] disease	0	1								1										
C00-D48	**Neoplasms**	**15**	**18**									**2**	**4**	**4**	**3**	**4**	**5**	**5**	**4**		**2**
	C00-C14 Malignant neoplasms of lip, oral cavity and pharynx	0	1												1						
	C15-C26 Malignant neoplasms of digestive organs	3	5										1	1		2	3		1		
	C22 Malignant neoplasm of liver and intrahepatic bile ducts	0	1										1								
	C34 Malignant neoplasm of bronchus and lung	2	6									1	1		2	1	1		1		1
	C43-C44 Melanoma and other malignant neoplasms of skin	1	0															1			
	C50 Malignant neoplasm of breast	4	0											1				3			
	C51-C58 Malignant neoplasms of female genital organs	4	0									1		1		1		1			
	C60-C63 Malignant neoplasms of male genital organs	0	4														1		2		1
	C64-C68 Malignant neoplasms of urinary tract	1	0											1							
	C83 Non-follicular lymphoma	0	1										1								
E00-E88	**Endocrine, nutritional and metabolic diseases**	**7**	**7**							**1**			**1**	**1**	**2**	**2**	**1**	**1**	**3**	**2**	
	E10-E14 Diabetes mellitus	6	6										1	1	2	2	1	1	2	2	
	E65-E68 Obesity and other hyperalimentation	1	1							1									1		
F00-F99	**Mental and behavioural disorders**	**3**	**1**												**1**					**3**	
	F00-F03 Dementia	3	0																	3	
	F10-F19 Mental and behavioural disorders due to psychoactive substance use	0	1												1						
G00-G99	**Diseases of the nervous system**	**0**	**1**																**1**		
	G20 Parkinson disease	0	1																1		
I00-I99	**Diseases of the circulatory system**	**15**	**27**					**1**		**1**	**1**		**4**	**1**	**3**		**9**	**4**	**7**	**8**	**3**
	I10-I15 Hypertensive diseases	8	12										3		2		2	3	5	5	
	I20-I25 Ischaemic heart diseases	2	11					1			1		1				5	1	1		3
	I30-I52 Other forms of heart disease	2	3												1		1		1	2	
	I60-I69 Cerebrovascular diseases	3	1							1				1			1			1	
J00-J98	**Diseases of the respiratory system**	**2**	**2**											**1**		**1**	**1**		**1**		
	J09-J18 Influenza and Pneumonia	0	2														1		1		
	J40-J47 Chronic lower respiratory diseases	2	0											1		1					
K00-K93	**Disease of the digestive system**	**5**	**4**						**1**					**1**		**2**	**2**		**1**	**2**	
L00-L98	**Diseases of the skin and subcutaneous tissue**	**0**	**1**																**1**		
M00-M99	**Diseases of the musculoskeletal system and connective tissue**	**1**	**0**															**1**			
N00-N98	**Disease of the genitourinary system**	**2**	**1**							**1**						**1**					**1**
	N17-N19 Renal failure	2	0							1						1					
	N30-N39 Other diseases of urinary system	0	1																		1
P00-P96	**Certain conditions originating in the perinatal period**	**2**	**0**	**2**																	
R00-R99	**Symptoms, signs & abnormal clinical & laboratory findings, n.e.c.**	**1**	**5**								**1**				**1**		**2**			**1**	**1**
	R95-R99 Ill-defined and unknown causes of mortality	1	5								1				1		2			1	1
S00-T98	**Injury, poisoning and certain other consequences of external causes**	**1**	**1**														**1**	**1**			
	S00-S09 Injuries to the head	0	1														1				
	S70-S79 Injuries to the hip and thigh	1	0															1			
V01-Y98	**External causes of mortality**	**3**	**4**				**1**		**1**		**2**			**1**		**2**					
	V20-V29 Motorcycle rider injured in transport accident	3	2						1		1			1		2					
	W00-X59 Other external causes of accidental injury	0	1				1														
	X60-X84 Intentional self-harm	0	1								1										

Table 8.2: Selected Causes of Death and rate by year, Cook Islands 2021-2025

Cause of Death	2021 Number of death	2021 Rate per 100,000	2022 Number of death	2022 Rate per 100,000	2023 Number of death	2023 Rate per 100,000	2024 Number of death	2024 Rate per 100,000	2025 Number of death	2025 Rate per 100,000
Diseases of the Circulatory System	45	261.6	46	294.9	48	324.3	63	362.1	42	241.4
Hypertension	17	98.8	25	160.3	28	189.2	26	149.4	20	114.9
Ischaemic heart disease	13	75.6	5	32.1	6	40.5	10	57.5	13	74.7
Celebrovascular Disease	5	29.1	9	57.7	4	27.0	6	34.5	4	23.0
Other	10	58.1	7	44.9	10	67.6	21	120.7	5	28.7
Neoplasms	21	122.1	16	102.6	19	128.4	24	137.9	33	189.7
Ovary	1	5.8	1	6.4	1	6.8	0	0.0	0	0.0
Trachea, Bronchus & Lungs	6	34.9	4	25.6	6	40.5	1	5.7	8	46.0
Prostate	5	29.1	1	6.4	2	13.5	4	23.0	4	23.0
Female Breast	2	11.6	4	25.6	2	13.5	4	23.0	4	23.0
Digestive system					0		4	23.0	8	46.0
Other	7	40.7	6	38.5	8	54.1	11	63.2	9	51.7
Diseases of the Respiratory System	9	52.3	11	70.5	14	94.6	2	11.5	4	23.0
Pneumonia	5	29.1	8	51.3	9	60.8	0	0.0	2	11.5
Bronchitis, Emphysema & Asthma	2	11.6	1	6.4	4	27.0	0	0.0	2	11.5
Other	2	11.6	2	12.8	1	6.8	2	11.5	0	0.0
Endocrine, Nutritional & Metabolic Diseases & Immunity Disorders	33	191.9	23	147.4	26	175.7	18	103.4	14	80.5
Diabetes Mellitus	33	191.9	22	141.0	25	168.9	13	74.7	12	69.0
Other	0	0.0	1	6.4	1	6.8	5	28.7	2	11.5
Symptoms, Signs & Ill-Defined Conditions	4	23.3	0	0.0	3	20.3	12	69.0	6	34.5
Injury, poisoning and certain other consequences of external causes	8	46.5	1	6.4	6	40.5	0	0.0	2	11.5
Injuries to the head	5	29.1	0	0.0	4	27.0	0	0.0	1	5.7
Other	3	17.4	1	6.4	2	13.5	0	0.0	1	5.7
Diseases of the blood and bloodforming organs	1	5.8	1	6.4	1	6.8	0	0.0	0	0.0
Diseases of the Nervous System	0	0.0	0	0.0	2	13.5	0	0.0	1	5.7
Diseases of the Digestive System	3	17.4	1	6.4	3	20.3	1	5.7	9	51.7
Ulcer of Stomach and Duodenum		0.0	0	0.0	0	0.0	0	0.0	1	5.7
Chronic Liver disease and Cirrhosis		0.0	0	0.0	0	0.0	0	0.0	0	0.0
Other	3	17.4	1	6.4	3	20.3	1	5.7	8	46.0
Certain Conditions Originating in the Perinatal Period	0	0.0	3	19.2	5	33.8	0	0.0	2	11.5
Congenital malformations, deformations & chromosomal abnormalities	0	0.0	1	6.4	0	0.0	0	0.0	0	0.0
Diseases of the Genitourinary System	2	11.6	1	6.4	2	13.5	1	5.7	3	17.2
EXTERNAL CAUSES OF INJURY AND POISONING	8	46.5	1	6.4	6	40.5	5	28.7	7	40.2
Transport accidents	4	23.3	0	0.0	3	20.3	1	5.7	5	28.7
Intentional self-harm	2	11.6	0	0.0	1	6.8	3	17.2	1	5.7
Falls	2	11.6	0	0.0	1	6.8	0	0.0	0	0.0
Other	0	0.0	1	6.4	1	6.8	1	5.7	1	5.7

NCD LIFETABLES

Definitions:

- ***NCD Life tables:*** are statistical models used to summarize the mortality patterns of populations by age and sex. These tables provide age-specific death rates and estimate the probability of death between different age intervals. They help in understanding the overall mortality rate of NCDs such as heart disease, cancer and diabetes within a population.

Methodological/ System Issues:

- (Refer to 2. Life Expectancy methodology)
- ICD-10 NCD groupings were used to compute for the NCD lifetables

Table 9: NCD Life Table for Males 2025

Life table <5 - ≥75						Death rate	Probability of dying	surviving	Life table parameters Radix	deaths			Life expectancy		
Age	x	nx	ax	pop (Nx)	death	mx	qx	px	lx	dx	Lx	Tx	ex	L 95% CI	U 95% CI
<5	0	5	0.2	572	0	0.00000	0.00000	1.00000	100000	0	500000	7903131	79.03	76.40	81.67
5-9	5	5	0.5	664	0	0.00000	0.00000	1.00000	100000	0	500000	7403131	74.03	71.40	76.67
10-14	10	5	0.5	719	0	0.00000	0.00000	1.00000	100000	0	500000	6903131	69.03	66.40	71.67
15-19	15	5	0.5	579	0	0.00000	0.00000	1.00000	100000	0	500000	6403131	64.03	61.40	66.67
20-24	20	5	0.5	397	0.2	0.00050	0.00252	0.99748	100000	252	499371	5903131	59.03	56.40	61.67
25-29	25	5	0.5	388	0.2	0.00052	0.00257	0.99743	99748	257	498100	5403760	54.17	51.61	56.74
30-34	30	5	0.5	449	0	0.00000	0.00000	1.00000	99492	0	497458	4905660	49.31	46.80	51.81
35-39	35	5	0.5	451	0	0.00000	0.00000	1.00000	99492	0	497458	4408201	44.31	41.80	46.81
40-44	40	5	0.5	427	0.6	0.00141	0.00700	0.99300	99492	697	495717	3910743	39.31	36.80	41.81
45-49	45	5	0.5	455	1.4	0.00308	0.01527	0.98473	98795	1508	490205	3415026	34.57	32.13	37.00
50-54	50	5	0.5	525	3.6	0.00686	0.03371	0.96629	97287	3279	478236	2924821	30.06	27.73	32.39
55-59	55	5	0.5	518	3	0.00579	0.02854	0.97146	94007	2683	463329	2446585	26.03	23.84	28.22
60-64	60	5	0.5	430	6	0.01395	0.06742	0.93258	91324	6157	441229	1983257	21.72	19.61	23.83
65-69	65	5	0.5	287	7.4	0.02578	0.12111	0.87889	85167	10315	400050	1542028	18.11	16.16	20.05
70-74	70	5	0.5	231	7.4	0.03203	0.14830	0.85170	74853	11100	346512	1141978	15.26	13.78	16.73
75+	75	25	0.5	277	22.2	0.08014	1.00000	0.00000	63752	63752	795466	795466	12.48		

Table 9.1: NCD life table for females 2025

Life table <5 - ≥75						Death rate	Probability of dying	surviving	Life table parameters Radix	deaths			Life expectancy		
Age	x	nx	ax	pop (Nx)	death	mx	qx	px	lx	dx	Lx	Tx	ex	L 95% CI	U 95% CI
<5	0	5	0.2	541	0	0.00000	0.00000	1.00000	100000	0	500000	8377504	83.78	81.00	86.55
5-9	5	5	0.5	600	0	0.00000	0.00000	1.00000	100000	0	500000	7877504	78.78	76.00	81.55
10-14	10	5	0.5	672	0	0.00000	0.00000	1.00000	100000	0	500000	7377504	73.78	71.00	76.55
15-19	15	5	0.5	582	0	0.00000	0.00000	1.00000	100000	0	500000	6877504	68.78	66.00	71.55
20-24	20	5	0.5	433	0	0.00000	0.00000	1.00000	100000	0	500000	6377504	63.78	61.00	66.55
25-29	25	5	0.5	487	0	0.00000	0.00000	1.00000	100000	0	500000	5877504	58.78	56.00	61.55
30-34	30	5	0.5	482	0.2	0.00041	0.00207	0.99793	100000	207	499482	5377504	53.78	51.00	56.55
35-39	35	5	0.5	493	0.4	0.00081	0.00405	0.99595	99793	404	497954	4878022	48.88	46.14	51.62
40-44	40	5	0.5	484	0.8	0.00165	0.00823	0.99177	99389	818	494899	4380069	44.07	41.39	46.76
45-49	45	5	0.5	518	1	0.00193	0.00961	0.99039	98571	947	490486	3885170	39.42	36.82	42.01
50-54	50	5	0.5	514	1.8	0.00350	0.01736	0.98264	97624	1695	483883	3394684	34.77	32.25	37.30
55-59	55	5	0.5	511	2.8	0.00548	0.02703	0.97297	95929	2593	473165	2910801	30.34	27.91	32.77
60-64	60	5	0.5	396	4.2	0.01061	0.05166	0.94834	93337	4822	454629	2437636	26.12	23.79	28.44
65-69	65	5	0.5	305	3.6	0.01180	0.05732	0.94268	88515	5074	429889	1983008	22.40	20.30	24.50
70-74	70	5	0.5	217	6.2	0.02857	0.13333	0.86667	83441	11125	389390	1553119	18.61	16.80	20.43
75+	75	32	0.5	383	23.8	0.06214	1.00000	0.00000	72315	72315	1163729	1163729	16.09		

NOTIFIABLE DISEASES

Definitions:

- ***Notifiable diseases:*** Are infectious diseases that healthcare providers and laboratories are required by law to report to public health authorities. These diseases are typically of public health concern due to their potential for rapid spread, severity, or impact on the community.
- ***Ciguatera Poisoning:*** Foodborne illness caused by eating fish contaminated with ciguatoxins, leading to symptoms like nausea, vomiting, diarrhoea, abdominal pain, and neurological issues such as tingling or temperature reversal.
- ***Dengue Fever:*** Dengue is a viral infection caused by the dengue virus (DENV), which is transmitted to humans through the bite of an infected Aedes aegypti mosquito. It is more common in tropical and subtropical climates.

Methodology/system issues/sources:

- Data is sourced from Medtech Evolution, ciguatera screening template and notifiable disease classifications.
- https://www.who.int/news-room/fact-sheets/detail/dengue-and-severe-dengue
- https://www.health.gov.ck/wp-content/uploads/2025/05/Media-Release-Dengue-Fever-Outbreak-22-MAY-2025.pdf

Table 10: Suspected Cases of Notifiable Disease by Months, Cook Islands 2025

Notifiable diseases	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Acute respiratory infections	38	36	62	26	29	67	112	187	82	61	33	41	774
Asthma	16	23	23	22	19	36	38	37	19	20	23	22	298
Bronchitis	17	9	13	6	18	42	45	44	25	30	15	14	278
Candidiasis	3	2	1	2	3	3	3		4	1		4	26
Chickenpox	17	9	8	2	2	7	19	8	2	2	3	11	90
Chlamydia cervicitis								1		3	1	2	7
Ciguatera Fish Poisoning	2	7	1	2	7	1	7	5	7	9	4	7	59
Conjunctivitis	14	13	16	16	14	10	16	31	15	14	5	8	172
COVID-19					4			1					5
Dengue Fever		2		3	12	33	34	34	43	34	64	120	379
Food Poisoning	3	1	3	2	1	1	2	1	2	1		3	20
Gastroenteritis	104	92	70	57	78	76	68	92	102	178	90	84	1091
Gonorrhoea			1	1				1		2			5
Hepatitis	1	1	3	3	5		3	1	4			9	30
HIV							1						1
Influenza	1						1	9	13	5			29
Influenza like Illness	99	80	97	69	84	128	159	223	138	120	81	106	1384
Leprosy								1					1
Meningitis								1		1		1	3
Mumps									1				1
Pertussis			1										1
Pneumonia	2	4		3	3		3	4	4	1	3	1	28
Pneumonia or influenza NOS	1	1	1	2	2	1	7	5	4	1	2	3	30
Rheumatic Fever	1		1	1	1	2	1	1					8
Ringworm	6	3	6	2	2	2	1	8	3	6	7	4	50
Scabies	13	10	16	9	9	12	12	10	11	8	14	8	132
Sepsis			2	3	1	2	2	3	2	1	1	3	20
Suppurative otitis media	22	17	16	10	9	9	6	8	11	19	8	22	157
Syphilis	1							1				1	3
Trichomonas			1		1					1			3
Grand Total	**390**	**350**	**374**	**275**	**315**	**419**	**532**	**725**	**475**	**514**	**315**	**386**	**5092**

Table 10.1: Suspected cases of fish poisoning by months, Cook Islands 2023 - 2025

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
2023	1	2	8	7	2	3	5	1	5	1	3	2	40
2024	0	3	1	6	2	2	2	5	1	0	3	0	25
2025	2	7	1	2	7	1	7	5	7	9	4	7	59

SEXUALLY TRANSMITTED INFECTIONS (STI)

Definitions

- ***STIs:*** are infections transmitted through sexual contact, including vaginal, anal, or oral intercourse. They can be caused by bacteria, viruses, or parasites and may present with symptoms such as genital sores, discharge, or pain, though many infections can be asymptomatic.
- ***Syphilis:*** Bacterial infection transmitted sexually or from mother to child; progresses through stages, causing serious complications.
- ***NSU (Non-Specific Urethritis):*** Urethral inflammation not caused by gonorrhoea or chlamydia, often due to other bacteria or irritants.
- ***Trichomoniasis (TV):*** STI caused by Trichomonas vaginalis, infecting genital tract; symptoms include discharge and itching.
- ***Chlamydia:*** Common STI often asymptomatic; affects genitals, rectum, and throat.
- ***Hepatitis B (Hep B):*** Viral infection (HBV) affecting liver, transmitted through blood or body fluids.
- ***HIV:*** a virus that attacks the body's immune system, weakening its ability to fight infections and diseases. If left untreated, HIV can lead to AIDS (Acquired Immunodeficiency Syndrome). It spreads through contact with certain body fluids like blood, semen, or breast milk.
- ***Candidiasis:*** a type of yeast (fungus) that naturally lives on the skin and inside the body. It can cause infections when it grows out of balance. Please note that Candidiasis was removed from this section as it is not officially classified as STI.

Formulas:

$$Treatment\ success\ rate = \frac{Cured + Treatment\ completed}{Total\ registered\ new\ \&\ relapse\ cases}$$

Methodology/system issues/sources:

- Data is sourced from records maintained by TMO laboratory
- The data reflects what is currently accessible and traceable.

Table 11: Laboratory positive new cases by disease and year, Cook Islands 2016-2025

STI confirmed cases	YEAR												
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Gonorrhoea	6	2	1	2	11	42	38	4	10	1	11	0	0
HIV	0	0	0	0	0	0	0	0	0	0	1	1	0
Syphilis	0	0	1	1	1	5	4	4	4	8	7	2	0
Non Specific Urethritis	6	0	0	0	0	3	3	3	3	2	3	0	0
Trichomonas Vaginalis	9	1	0	0	0	6	2	3	3	2	2	5	0
Chlamydia	39	28	30	37	108	108	100	0	0	0	0	0	0
Hepatitis B	5	6	6	8	9	3	8	8	9	4	6	11	0
Total	65	37	38	48	129	167	155	22	29	17	30	19	0

Table 11.1: Laboratory positive new cases by age and sex, Cook Islands 2025

2025 **POSITIVE NEW CASES**	Hep B		Syphilis		HIV		Chlamydia		N. Gonorrhoea	
Gender	F	M	F	M	F	M	F	M	F	M
Total Pos	3	10	1	4	0	*1	55	6	17	6
10 - 14 yrs	0	0	0	0	0	0	0	0	0	0
15-19 yrs	0	0	1	0	0	0	13	3	6	4
20-24 yrs	0	1	0	0	0	0	18	2	6	1
25-29 yrs	0	0	0	1	0	0	14	0	3	0
30-34 yrs	1	0	0	0	0	1	8	1	2	1
35+ yrs	2	9	1	3	0	0	2	0	0	0

NON-COMMUNICABLE DISEASES (NCDS)

Definitions:

- ***NCD (Non-Communicable Disease):*** Diseases that are not transmissible directly from one person to another, often chronic in nature and influenced by lifestyle factors, such as cardiovascular diseases, diabetes, cancer, and chronic respiratory diseases.
- ***Prevalence:*** The proportion of individuals in a population who have a specific disease or condition at a particular point in time.
- ***Incidence:*** The number of new cases of a disease or condition that develop in a population over a specified period.
- ***Cancer:*** Cancer refers to a group of diseases characterized by the uncontrolled growth and spread of abnormal cells. These cells can invade and destroy normal tissues and organs, potentially spreading to other parts of the body (metastasis).

Formulas:

$$Incidence\ rate\ (\%) = \frac{Number\ of\ new\ cases}{Population\ at\ risk} x\ 1{,}000$$

Methodology / System Issues / Sources:

- Data is sourced from MedTech Evolution, NCD Register and Cook Islands Register (CanReg5)
- Source of population data is the Statistics Office (MFEM)
- Cardiovascular Disease includes hypertension, stroke, renal failure, heart failure, heart disease, myocardial infarction.
- Chronic Respiratory Disease includes chronic bronchitis, asthma, emphysema, and bronchiectasis.

Table 12: NCD by Year and Disease, Cook Islands 2021-2025

Year	Resident Population Estimate	Total Number with NCD	Incidence	Incidence Rate (%)	Prevalence	Cardiovascular Diseases (CVD)	Incidence	Incidence Rate (%)	Prevalence
before 2009						1,543			
2009	13,300	2,634				1,402			
2010	11,900	2,923	289	24	246	1,571	169	14	132
2011	14,700	3,226	303	21	219	1,730	159	11	118
2012	14,300	3,578	352	25	250	1,944	214	15	136
2013	14,100	3,895	317	22	276	2,140	196	14	152
2014	13,600	4,032	137	10	296	2,310	170	13	170
2015	13,000	4,312	280	22	332	2,475	165	13	190
2016	11,500	4,600	288	25	400	2,646	171	15	230
2017	11,500	4,879	279	24	424	2,743	97	8	239
2018	10,649	5,000	121	11	470	2,953	210	20	277
2019	10,649	5,216	216	20	490	3,305	352	33	310
2020	10,649	5,498	282	26	516	3,803	498	47	357
2021	17,200	5,504	225	13	529	3,897	94	5	362
2022	17,600	5,488	315	18	547	3,965	68	4	366
2023	16,800	5,809	532	32	579	4,036	71	4	371
2024	17,400	5,663	372	21	600	4,052	16	1	372
2025	17,300	5,756	93	5	333	4,269	217	13	247

Diabetes mellitus	Incidence	Incidence Rate (%)	Prevalence	Cancer	Incidence	Incidence Rate (%)	Prevalence	Chronic Obstructive Pulmonary Disease (COPD)	Incidence	Incidence Rate (%)	Prevalence
681				148				600			
658				145				590			
740	82	7	62	171	26	2	14	640	50	4	54
831	91	6	57	200	29	2	14	709	69	5	48
927	96	7	65	228	28	2	16	767	58	4	54
1,030	103	7	73	245	17	1	17	815	48	3	58
1,140	110	8	84	264	19	1	19	879	64	5	65
1,267	127	10	97	282	18	1	22	925	46	4	71
1,413	146	13	123	313	31	3	27	981	56	5	85
1,473	60	5	128	338	25	2	29	1,000	19	2	87
1,596	123	12	150	361	23	2	34	1,050	50	5	99
1,679	83	8	158	396	35	3	37	1,075	25	2	101
1,711	32	3	161	407	11	1	38	1,091	16	2	102
1,799	88	5	166	434	27	2	40	1,113	22	1	103
1,866	67	4	170	485	51	3	42	1,141	28	2	105
2,004	138	8	178	539	54	3	46	1,194	53	3	108
2,174	170	10	188	589	50	3	49	1,244	50	3	111
2,344	170	10	136	654	65	4	38	1,250	6	0.4	72

Table 12.1: Incidence of Cancer Cases by Site, Sex and Age Groups, Cook Islands 2025

ICD 10 CODE	SITE	MALE 0-14	15-29	30-44	45-59	60-75	75+	Total	% Distribution
C00-C80	ALL SITES	0	1	0	2	23	9	35	100.0%
C00-C14	Malignant neoplams of lip, oral cavity, and pharynx	0	0	0	0	2	0	2	5.7%
C15-C26	Malignant neoplasms of digestive organs	0	0	0	1	1	0	2	5.7%
C30-C39	Malignant neoplasms of respiratory and intrathoracic organs	0	0	0	0	2	0	2	5.7%
C43-C44	Melanoma and other malignant neoplasms of skin	0	0	0	1	10	3	14	40.0%
C60-C63	Malignant neoplasms of male genital organs	0	0	0	0	1	2	3	8.6%
C69-C72	Malignant neoplasms of eye, brain and other parts of central nervous system	0	0	0	0	1	0	1	2.9%
C76-C80	Malignant neoplasms of ill-defined, secondary and unspecified sites	0	1	0	0	0	0	1	2.9%
D00-D09	in situ neoplasm	0	0	0	0	6	4	10	28.6%
		FEMALE							
C00-C80		0	0	9	8	11	12	40	100.0%
C15-C26	Malignant neoplasms of digestive organs	0	0	0	0	0	1	1	2.5%
C30-C39	Malignant neoplasms of respiratory and intrathoracic organs	0	0	0	0	1	1	2	5.0%
C43-C44	Melanoma and other malignant neoplasms of skin	0	0	0	2	1	3	6	15.0%
C50	Breast	0	0	2	3	7	5	17	42.5%
C51-C58	Female genital organs	0	0	5	2	1	0	8	20.0%
C73-C75	Malignant neoplasms of thryroid and other endocrine glands	0	0	1	0	0	0	1	2.5%
C76-C80	Malignant neoplasms of ill-defined, secondary and unspecified sites	0	0	0	1	0	0	1	2.5%
D00-D09	in situ neoplasm	0	0	1	0	1	2	4	10.0%

OUTPATIENT

Definitions:

- ***Consultations:*** Consultations are discussions between healthcare professionals and patients where medical advice, diagnosis, treatment options, or health education are provided, typically in clinical settings.

Methodological/ System Issues:

- Data is sourced from Medtech (Outpatient) classification templates.
- Medtech experienced issues from the second half of 2014 through May 2015, resulting in the loss of all data from that period.

Table 13: Outpatient consultations by year, sex and age group, Cook Islands 2016-2025

Year	Total	Age Groups															
		0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+	Unknown
	Sex: Both																
2016	46,601	5,736	3,134	2,666	2,771	2,695	2,475	2,117	2,188	2,585	3,187	3,599	3,344	2,642	2,406	5,044	12
2017	52,316	5,239	4,200	2,755	2,975	3,129	3,430	3,068	3,017	3,128	3,704	3,845	3,619	2,725	2,386	5,086	10
2018	56,218	5,196	4,054	2,964	3,210	3,154	3,511	3,211	3,368	3,481	3,717	4,236	4,436	3,240	2,708	5,732	0
2019	58,148	5,388	4,035	2,836	3,112	3,556	4,044	3,441	3,626	3,651	3,912	4,411	4,555	3,292	2,557	5,732	0
2020	35,535	2,995	2,154	1,756	1,674	1,856	2,081	2,074	2,174	2,017	2,591	2,883	2,950	2,247	1,968	4,115	0
2021	32,474	3,029	1,794	1,460	1,577	1,430	1,752	1,841	1,965	1,723	2,183	2,533	2,510	2,207	2,072	4,394	4
2022	37,903	3,301	2,007	1,695	1,647	1,712	2,025	2,335	2,073	2,043	2,449	3,045	3,359	2,751	2,339	5,113	9
2023	37,667	3,380	2,234	1,849	1,878	1,653	2,195	2,416	2,107	2,160	2,259	2,758	2,965	2,649	2,174	4,961	29
2024	32,633	2,579	2,123	1,671	1,626	1,469	1,677	2,213	2,099	2,025	1,926	2,073	2,435	2,494	1,971	4,235	17
2025	37,050	3,145	2,441	1,812	2,003	1,660	1,760	2,211	2,263	2,286	2,124	2,430	2,694	2,946	2,626	4,649	0
	Sex: Male																
2016	23,897	3,067	1,579	1,411	1,320	1,187	1,166	940	1,087	1,221	1,827	1,857	1,810	1,435	1,332	2,653	5
2017	26,491	2,720	2,195	1,400	1,340	1,478	1,576	1,442	1,442	1,558	2,003	1,935	1,898	1,482	1,294	2,724	4
2018	28,316	2,732	2,137	1,476	1,440	1,409	1,617	1,513	1,665	1,830	1,958	2,124	2,268	1,657	1,548	2,942	0
2019	29,544	2,965	2,093	1,485	1,443	1,574	1,866	1,655	1,689	1,894	2,165	2,221	2,436	1,714	1,427	2,917	0
2020	16,325	1,479	1,180	967	780	855	1,011	1,036	1,124	972	1,366	1,561	1,700	1,218	1,076	2,104	0
2021	15,937	1,434	809	674	891	869	963	925	971	896	1,094	1,180	1,134	987	996	2,112	2
2022	19,411	1,556	974	727	970	1,100	1,200	1,285	1,106	1,158	1,282	1,516	1,627	1,279	1,205	2,422	4
2023	19,204	1,587	1,063	819	1,083	1,061	1,296	1,351	1,154	1,149	1,206	1,282	1,520	1,223	1,050	2,349	11
2024	16,721	1,449	1,071	885	788	675	827	1,096	993	990	920	1,047	1,231	1,341	1,099	2,302	7
2025	18,636	1,745	1,223	1,018	988	680	826	1,122	1,075	1,074	989	1,186	1,281	1,564	1,466	2,399	0
	Sex: Female																
2016	22,704	2,669	1,555	1,255	1,451	1,508	1,309	1,177	1,101	1,364	1,360	1,742	1,534	1,207	1,074	2,391	7
2017	25,825	2,519	2,005	1,355	1,635	1,651	1,854	1,626	1,575	1,570	1,701	1,910	1,721	1,243	1,092	2,362	6
2018	27,902	2,464	1,917	1,488	1,770	1,745	1,894	1,698	1,703	1,651	1,759	2,112	2,168	1,583	1,160	2,790	0
2019	25,756	2,411	1,936	1,350	1,669	1,978	2,178	1,785	1,933	1,757	1,744	2,189	2,118	1,578	1,130	2,803	0
2020	15,082	1,515	969	788	892	998	1,070	1,038	1,050	1,045	1,225	1,321	1,250	1,029	892	2,023	0
2021	16,537	1,595	985	786	686	561	789	916	994	827	1,089	1,353	1,376	1,220	1,076	2,282	2
2022	18,492	1,745	1,033	968	677	612	825	1,050	967	885	1,167	1,529	1,732	1,472	1,134	2,691	5
2023	18,463	1,793	1,171	1,030	795	592	899	1,065	953	1,011	1,053	1,476	1,445	1,426	1,124	2,612	18
2024	15,912	1130	1052	786	838	794	850	1117	1106	1035	1006	1026	1204	1153	872	1933	10
2025	18,414	1400	1218	794	1015	980	934	1089	1188	1212	1135	1244	1413	1382	1160	2250	0

Note: Medtech problem in second half 2014 up to May 2015, losing all data in that period

INPATIENT

Definitions:

- ***Inpatient:*** Medical treatment or care provided to a patient who has been admitted to a hospital or healthcare facility and stays overnight or for an extended period.
- ***Morbidity:*** Morbidity data is the information registered on the state of being symptomatic or unhealthy due to a disease or health-related condition.
- ***Bed occupancy:*** refers to the percentage of available beds that are currently occupied by patients.
- ***Surgical volume:*** total number of surgical procedures performed at a hospital.

Formula:

$$\text{Bed Occupancy (\%)} = \frac{\text{Inpatient days of care}}{\text{Bed days available}} \text{x100}$$

Methodology/system issues/sources:

- Data is sourced from Medtech Outpatient, Admissions and Discharge register.
- Medtech experienced issues from the second half of 2014 through May 2015, resulting in the loss of all data from that period.

Table 14: Patients admitted and discharged from Hospital by region and island and bed occupancy, Cook Islands 2025

REGION & ISLAND	Number of				Average Occupied Bed	% Bed Occupancy
	Admissions	Discharges	Bed Days Used	Bed Days Available		
COOK ISLANDS	1,783	1,532	5,419	55,480	14.8	9.8
RAROTONGA	1,441	1,271	4,551	29,200	12.5	15.6
SOUTHERN GROUP excluding Rarotonga	311	238	804	16,425	2.2	4.9
Aitutaki	246	210	754	9,490	2.1	7.9
Mangaia	47	22	43	1,825	0.1	2.4
Atiu	1	0	0	2,190	0.0	0.0
Mauke	5	2	2	2,190	0.0	0.1
Mitiaro	12	4	5	730	0.0	0.7
NORTHERN GROUP	31	23	64	9,855	0.2	0.6
Palmerston	0	0	0	0	0.0	0.0
Pukapuka/Nassau	12	9	33	4,015	0.1	0.8
Manihiki	7	5	7	2,920	0.0	0.2
Rakahanga	0	0	0	730	0.0	0.0
Penrhyn	12	9	24	2,190	0.1	1.1

PATIENT REFERRALS

Definitions:

- ***Patient Referral:*** The process where a healthcare provider directs a patient to another provider or specialist for further assessment, treatment, or consultation.
- ***Domestic referrals:*** Referring patients from the Pa Enua islands to Rarotonga for advanced care.
- ***International referrals:*** Referring patients overseas, typically to New Zealand, for specialized treatment not available locally.

Methodology/system issues/sources:

- Data is sourced from TMO finance records.

Table 15: Number of domestic and international referrals, Cook Islands 2024-2025

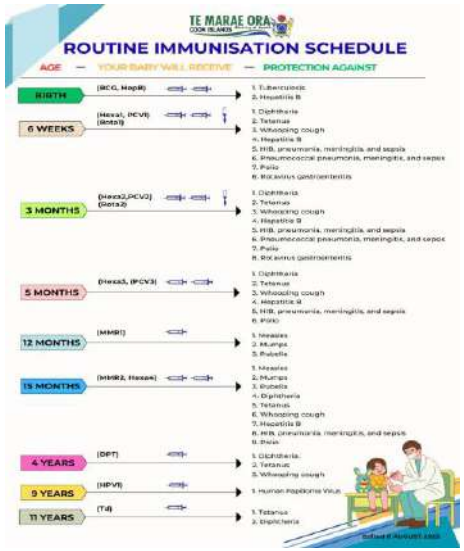
	Domestic referrals	International referrals
2023	324	240
2024	613	323
2025	554	327

IMMUNISATION

Definitions:

- ***Immunisation:*** A process by which a person becomes protected against a disease through vaccination. Vaccines stimulate the body's own immune system to protect the person against subsequent infection or disease.

Child Immunisation Schedule 2025:



Formula:

$$\textbf{Immunization Coverage Rate (\%)} = \left(\frac{\text{Number of doses administered through routine services}}{\text{Number in the targeted eligible population}}\right) \times 100$$

Methodology/system issues/sources:

- Data is sourced from MedTech Evolution - National Immunisation Register (NIR).
- The reported percentages include instances of refusals, migrations, and catch-up cases.
- PCV and Rotavirus was introduced in April 2022.

- The immunisation schedule has been updated to replace Pentavalent, OPV and IPV with the all-in-one Hexavalent vaccine effective 1st August 2025.

ORAL HEALTH

Definitions:

- ***Restoration:*** Repairing or replacing damaged teeth using materials like amalgam, composite, or crowns to restore function and appearance.
- ***Endodontics:*** Focuses on treating the inside of the tooth, including root canal therapy for infected or damaged dental pulp.
- ***Extractions:*** Removing a tooth from the jaw, often due to decay, trauma, or for orthodontic reasons.
- ***Orthodontics:*** Corrects misaligned teeth and jaws using braces, aligners, or other devices.
- ***Prosthodontics:*** Replaces missing teeth and oral structures with dentures, bridges, or implants.
- ***Periodontics:*** Treats gum disease and conditions affecting the gums and supporting tissues of the teeth.
- ***Preventative:*** Dental care aimed at preventing disease, such as checkups, cleanings, fluoride, and sealants.

Methodology/system issues/sources:

- Data is sourced from Medtech Oral Health classifications

Table 16: Oral Health services by year, Cook Islands 2022-2025

Oral Services	2022	2023	2024	2025
Consults/Screening	698	2438	2038	4512
Restoration	1194	1231	2084	2016
Endodontics	312	249	478	555
Oral surgery/Extractions	994	955	1531	1524
Paediatrics/Orthodontic	477	14	991	1570
Prothodontic	204	145	339	438
Periodontic	117	119	287	252
Preventative	351	309	1088	1237
Others	42	55	51	129
Total	4389	5515	8887	12233

Table 16.1: Oral Health services by age and sex, Cook Islands 2023- 2025

Age group	2023		2024		2025	
	Femal	Male	Female	Male	Female	Male
0-4	86	67	248	198	226	206
5-14	996	952	1133	1077	2324	2023
15-24	441	380	817	477	1091	645
25-34	291	154	586	288	663	354
35-44	272	182	546	392	592	382
45-54	302	194	471	433	548	517
55-64	308	302	637	538	771	635
65-75	217	202	362	353	410	541
75+	90	79	147	184	140	165
Total	3003	2512	4947	3940	6765	5468

HEALTH WORKFORCE

Definitions:

- ***Health Workforce:*** The total number of individuals engaged in the delivery of healthcare services. This includes a wide range of professionals such as doctors, nurses, dentists, allied health professionals, support staff, and administrators.

- ***Workforce density:*** The number of health workers per a specified population size, per 10,000 people

Formulas:

$$Workforce\ density = \frac{Number\ of\ health\ professionals}{Total\ population} x\ 1{,}000$$

Methodological/ System Issues:

- Data is sourced from TMO Human Resources (HR) and Public Service Commission (PSC) employee listing
- Data was collected at specific times each year and does not account for staff who were present or absent at other times.
- Workforce is inclusive of Contract for Service (CFS), locums and volunteers.
- Data is provisional and subject to change in future reports.

MENTAL HEALTH

Definitions:

Mental Disorders: conditions that involve significant disturbances in thinking, emotional regulation, or behavior. These disorders are typically associated with distress or impaired functioning in personal, social, or occupational activities. Mental disorders encompass a wide range of conditions, including depression, anxiety disorders, schizophrenia, and bipolar disorder, among others.

Developmental: a condition where a child's growth in areas like talking, moving, thinking, or behaving is slower or different from other children.

Mood: Primarily includes cases of depression.

Psychosocial: Covers eating disorders, trauma, violence, and family-related issues.

Methodological/ System Issues:

- Data is sourced from Medtech Evolution Mental Health classifications
- Mental health data collection changed in August 2025 with the introduction of the updated Mental Health Screening template.

Table 17: Mental health disorders by age groups and sex, Cook Islands 2025

	Female					Male				
DISORDERS	0-14	15-24	25-44	45-64	65+	0-14	15-24	25-44	45-64	65+
Addiction			1							1
Anxiety		7	11	8	5	1	5	6	7	2
Dementia					3					1
Development	6	1	2		1	6		1	1	
Mood			3	2	1		2	2	1	1
Neuro related	2		4	3		3	3	4	6	2
Psychosocial		2	3	1					1	
Psychotic			2	2	2		1	9	5	
Pyschosocial								1		
Self-harm			1					1		

WATER QUALITY

Definitions:

- ***Water Quality:*** Measures the safety and cleanliness of water for human use, including testing for contaminants and harmful substances.
- ***HS2 Testing***: A specific test used to detect hydrogen sulfide (H_2S) in water, indicating possible bacterial contamination.

Methodology/system issues/sources:

- Data is sourced from public health records.

Table 18: Water Test Results by Sites, Cook Islands 2024

Islands	Sites	Total sites	Results		Total H2S tests performed	
			Safe	Fail		
Rarotonga	Community	16	98	3	101	268
	Schools	23	131	13	144	
	Health facilities	8	19	2	21	
	Private	2	2	0	2	
Aitutaki	Community	10	39	2	41	55
	Schools	5	12	1	13	
	Health facilities	1	1	0	1	
	Private	0	0	0	0	
Mangaia	Community	6	16	7	23	33
	Schools	2	5	2	7	
	Health facility	1	2	1	3	
	Private	0	0	0	0	
Atiu	Community	6	14	0	14	17
	Schools	1	3	0	3	
	Health facility	1	0	0	0	
	Private	0	0	0	0	
Mauke	Community	8	5	0	5	14
	Schools	1	7	1	8	
	Health facility	1	1	0	1	
	Service pumps	2	0	0	0	
Mitiaro	Community	8	19	3	22	29
	Schools	1	4	0	4	
	Health facility	1	2	0	2	
	Private	1	1	0	1	
Pukapuka	Community	1	1	0	1	6
	Schools	1	5	0	5	
	Health facility	1	0	0	0	
	Private	0	0	0	0	
Penryhn	Community	2	8	0	8	14
	Schools	2	6	0	6	
	Health facility	1	0	0	0	
	Private	0	0	0	0	
Manihiki	Community	6	8	0	8	14
	Schools	2	6	0	6	
	Health facility	2	0	0	0	
	Private	0	0	0	0	
Rakahanga	Community	1	2	0	2	4
	Schools	1	2	0	2	
	Health facility	1	0	0	0	
	Private	0	0	0	0	
Nassau		na	na	na	na	

HEALTHCARE FACILITIES

Definitions:

- ***Healthcare Facility:*** A place that provides healthcare services. These facilities range from small clinics and doctor's offices to large hospitals and specialized institutions, offering various levels of care to patients.
- ***Hospital:*** A large healthcare facility providing comprehensive medical services, including emergency care, inpatient care, surgeries, and specialized treatments. Hospitals often have on-site specialists (anesthesia, O&G, internal medicine, pediatrics, accidents and emergency, surgery and ophthalmology) at scheduled times, and on call at all times.
- ***Clinic:*** A healthcare facility typically focused on outpatient care. Provides basic health services including nursing care, antenatal care, baby checks, child immunization, family planning, wound dressings, medicine refills, home visits, post-natal check-ups for mother and baby, counselling and cervical cancer screening.
- ***Primary Care Center:*** A healthcare facility that provides primary healthcare services, including routine check-ups, preventive care, treatment of common illnesses, delivery by nurses and doctors and management of chronic conditions. Primary care centers often serve as the foundation of the healthcare system.
- ***Child Welfare Clinics:*** A community-based facility that provides healthcare services to the mothers and babies in collaboration with a Non-organization called Cook Islands Child Welfare Association (CICWA). For some Pa Enua, TMO health care centers are utilized for the program with Public health nurses on the island.
- ***Hospital Beds:*** defined here as beds available for patient admissions only.
- ***Private Community Clinic:*** a non-government-run health facility that provides general health services (such as triage, palliative care, home visits etc) to a local area.

Methodology/system issues/sources:

- The number of facilities are confirmed by health officers and health partners
- https://www.cookislandschildwelfare.org/rarotonga-clinics

Table 19: Health Facilities, Cook Islands 2025

REGION & ISLAND	Hospital Beds	Hospital	Primary Care Centre	Public Dental Clinics	Health Clinics	Child Welfare Clinics	Private Medical Clinics	Private Dental Clinics	Private Community Clinics	Public Pharmacies	Private Pharmacies
COOK ISLANDS	182	1	1	14	18	27	3	2	1	2	2
RAROTONGA	88	1	1	6	5	12	3	2	1	2	2
SOUTHERN GROUP excl. Rarotonga	70	0	0	5	5	12	0	0	0	0	0
Aitutaki	32	0	0	1	1	3	0	0	0	0	0
Mangaia	15	0	0	1	1	6	0	0	0	0	0
Atiu	7	0	0	1	1	1	0	0	0	0	0
Mauke	5	0	0	1	1	1	0	0	0	0	0
Mitiaro	11	0	0	1	1	1	0	0	0	0	0
NORTHERN GROUP	24	0	0	3	8	3	0	0	0	0	0
Palmerston	1	0	0	0	1	0	0	0	0	0	0
Pukapuka	8	0	0	1	1	0	0	0	0	0	0
Nassau	1	0	0	0	1	0	0	0	0	0	0
Manihiki	6	0	0	1	2	1	0	0	0	0	0
Rakahanga	2	0	0	0	1	1	0	0	0	0	0
Penrhyn	6	0	0	1	2	1	0	0	0	0	0

COOK ISLANDS INJURY SURVEILLANCE (CIIS)

Definitions:

- ***Injury surveillance:*** is the systematic collection, analysis, and interpretation of data related to injuries, including their causes, severity, and outcomes.
- ***Road crashes:*** also known as motor vehicle or transport accidents, involve collisions between vehicles or vehicles and pedestrians, resulting in property damage, injuries, or fatalities.

Methodology/system issues/sources:

- Data is sourced from Medtech CIIS, MVA screening templates, and related classifications.
- Multiple templates are used for injury surveillance, but the standard template remains underutilized, leading to inconsistencies in data collection.

Table 20: Admissions due to road traffic crashes, Rarotonga 2014-2025

Type of Accident	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Transport Crashes	68	41	42	49	49	52	42	31	45	38	12	26
Male	42	22	24	31	33	29	27	19	31	22	8	19
Female	26	19	18	18	16	23	15	12	14	16	4	7
Alcohol Related	26	18	19	23	26	25	17	18	14	19	4	14
Percentage Alcohol Related	38%	44%	45%	47%	53%	48%	40%	58%	31%	50%	33%	54%
Alcohol Related Deaths	4	3	1	3	3	4	5	0	0	2	0	0
Non Alcohol Related Deaths	1	2	0	0	0	0	0	2	0	1	0	3
Transport Crashes - Outer Islands			4	3	0	0	0	4	18	14	9	14
Number of Deaths	6	5	1	3	4	6	7	4	0	3	1	5
Resident population	13,600	13,000	11,500	11,500	14,802	14,802	14,802	14,987	14,987	14,987	14,987	14,987
Rate /100 000 pop	44.1	38.5	8.7	26.1	27.0	40.5	47.3	26.7	0.0	20.0	6.7	33.4

Table 20.1: Admissions due to alcohol related transport crashes by age grouping, Rarotonga 2014-2025

Age Group	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
0 - 14	0	0	0	0	0	0	1	2	0	0	0	0
15 - 24	12	8	6	13	11	12	8	6	6	5	1	3
25 - 34	8	7	8	3	9	9	4	4	2	6	0	5
35 - 44	1	2	2	4	3	3	1	2	2	3	1	3
45 - 54	3	1	1	3	2	1	2	3	1	3	2	2
55 +	2	0	2	0	1	1	1	1	3	2	0	0
Total	26	18	19	23	26	26	17	18	14	19	4	13

Table 20.2: Number of Injuries reported 2024-2025

Type of Injury	2024	2025
Road Crashes	231	223
Falls	82	63
Violence	55	39
Cuts	26	102
Burns	8	3
Others	4	6
Drowning	1	1

Table 20.3: Reported violence by type, sex and age 2024

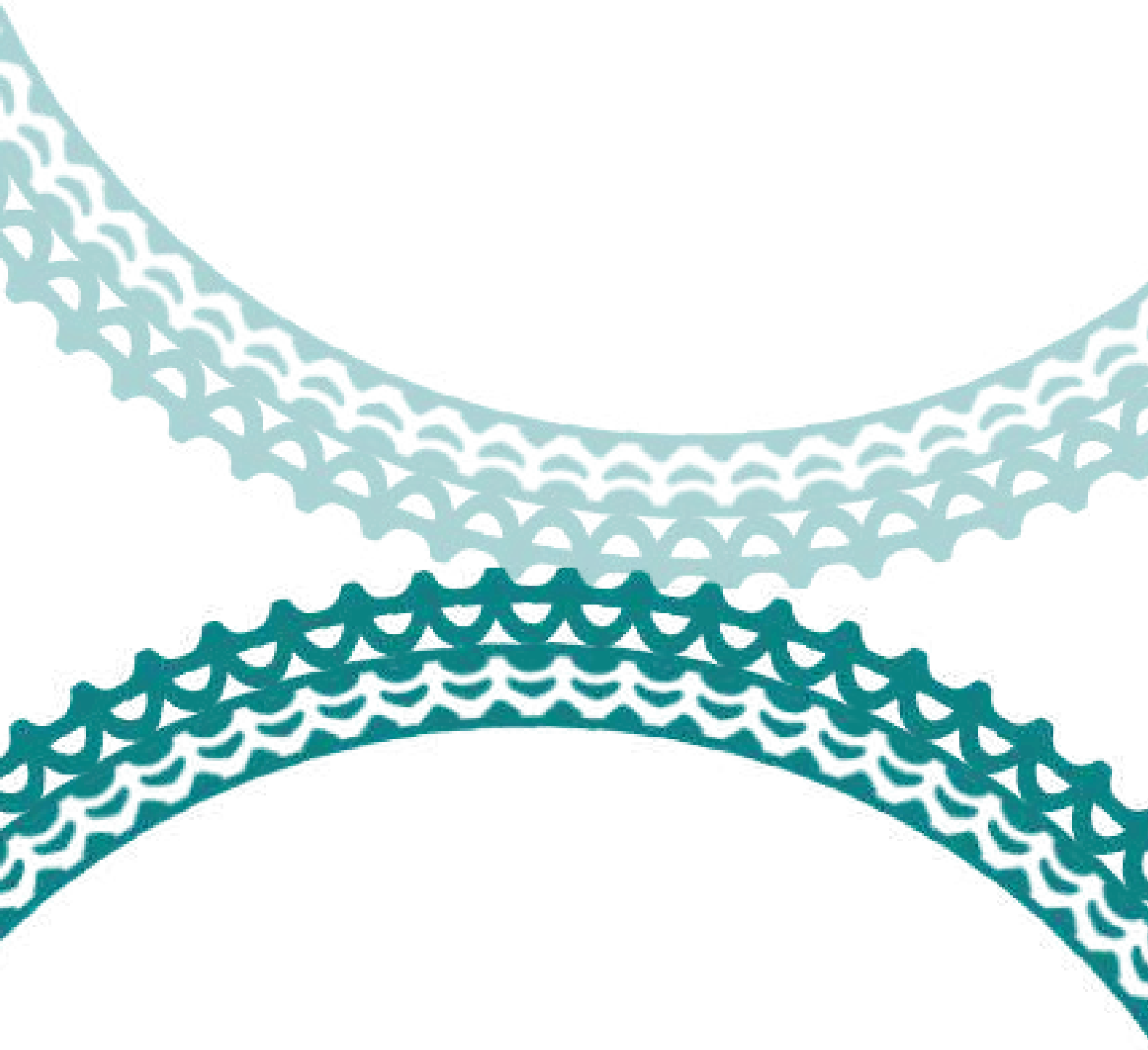
Type of violence	Sex		Age group						
	Female	Male	0-14	15-24	25-34	35-44	45-54	55+	Total
Physical violence	10	23	3	6	6	4	5	9	33
Intimate partner violence	10	0	0	0	5	3	2	0	10
Child abuse	2	4	4	2	0	0	0	0	6
ual violence against children	4	0	3	1	0	0	0	0	4
Non-partner sexual violence	1	0	0	1	0	0	0	0	1
Stab	0	1	0	0	1	0	0	0	1

Table 20.4: Reported violence by type, sex and age 2025

Type of violence	Sex		Age group						
	Female	Male	0-14	15-24	25-34	35-44	45-54	55+	Total
Physical violence	10	9	1	3	10	2	1	2	19
Intimate partner violence	12	0	0	1	3	4	4	0	12
Child abuse	2	2	2	2	0	0	0	0	4
ual violence against children	3	0	2	1	0	0	0	0	3
Non-partner sexual violence	1	0	0	0	0	1	0	0	1
Stab	0	0	0	0	0	0	0	0	0

Table 20.5: Reported falls by age and sex 2024-2025

Age	2024		2025	
Group	Female	Male	Female	Male
0-14	11	7	9	5
15-24	2	2	2	2
25-34	2	4	1	3
35-44	0	3	4	0
45-54	2	4	2	2
55+	22	23	21	12
Total	39	43	39	24



Citation: Te Marae Ora Ministry of Health Cook Islands. National Health Information Bulletin 2025
Published in April 2025 by the Ministry of Health PO Box 109, Tupapa, Rarotonga.
This document is available at health.gov.ck