COOK ISLANDS

A SITUATION ANALYSIS OF CHILDREN, YOUTH AND WOMEN

Government of the Cook Islands
with assistance from UNICEF

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CONTENTS

PART I DEVELOPMENT TRENDS IN COOK ISLANDS 9

1.1 The situation analysis 9

1.2 Cook Islands: a small island developing country 9
   1.2.1 High development standards 10
   1.2.2 A high level of development 12
   1.2.3 A high level of vulnerability 13

1.3 Patterns of change 14
   1.3.1 Population change 14
   1.3.2 Economic change 16
   1.3.3 Patterns of health 18

1.4 The social and cultural context of children’s and women’s lives 18
   1.4.1 Cook Islands society 18
   1.4.2 The place of children 19
   1.4.3 The place of youth 19
   1.4.4 The roles of women 20
   1.4.5 The role of the media in social change 20

1.5 Conclusion 21

PART II THE SITUATION OF CHILDREN 23

2.1 Children in the population 23

2.2 Children’s survival 24
   2.2.1 Infant and child mortality and illness 24
   2.2.2 Immunisation 26

2.3 Infant and child nutrition 27
   2.3.1 Breast-feeding 27
   2.3.2 Child obesity 27
   2.3.3 Dental caries 28

2.4 Child development 29
   2.4.1 Access to formal education 29
   2.4.2 Early childhood education 29
   2.4.3 Primary education 30
   2.4.4 Secondary education 31
   2.4.5 School facilities for disabled children 33

2.5 Child protection 34

2.6 Children in difficult circumstances 35
   2.6.1 Children in disputed custody 35
   2.6.2 Children who are neglected or abused 35
   2.6.3 Children who become pregnant 35
   2.6.4 Children who are exploited 36

2.7 The participation of children 37

2.8 Conclusion 37
LIST OF TABLES AND FIGURES

Tables

Table 1  Progress in Cook Islands towards the goals of the World Summit for Children  13
Table 2  Infant and Child Mortality Measurements, 1996-2002 averages  24
Table 3  Causes of Infant Deaths, 1985-2002 (deaths per 1000 live births)  25
Table 4  Causes of Child Deaths, aged 1-4 years, 1996-2002  25
Table 5  Immunisation of Children and Pregnant Women  26
Table 6  Measurement of Primary School Efficiency, 1998  30
Table 7  Low Pass Rates in New Zealand School Certificate  33
Table 8  Ministry of Justice Operational Structure  34
Table 9  Ages of Responsibility in the Cook Islands  39
Table 10  Post Secondary Education Opportunities in Rarotonga & Overseas  42
Table 11  Pregnant Women seen at Antenatal Clinic, Rarotonga, 2002-2003, by marital status  47
Table 12  Progress made on the Cook Islands Sub-Regional Action Plan 1998-2000  50
Table 13  Ten Main Causes of ill-health for adults over 25 years, by sex, 2001-2002  53
Table 14  Causes of injuries in adult women and men  54
Table 15  Female-headed households, 1996 and 2001, as a percentage of all households  60
Table 16  Percent of adults receiving welfare payments, by sex, 2000  60
Table 17  Women Directors on Government Boards and Committees  62
Table 18  Women Candidates in General Elections  63
FIGURES

Figure 1  HDI for Pacific Island Countries, 1999  10
Figure 2a Rising Life Expectancy, 1945-2000  11
Figure 2b Falling Infant Mortality Rate, 1945-2000  11
Figure 3  Government Spending on Education, 1990-2004  12
Figure 4  Population Growth by Island Group, 1951-2001  14
Figure 5  Declining School Enrolment, 1996-2003  15
Figure 6  Changing Labour Force Activity, 1981-2001  16
Figure 7  Income Range of Economically Active Adults, by Island Group, 2001  17
Figure 8  Prevalence of Diabetes & Hypertension Cases Registered by Year, 1995-2002  18
Figure 9  Children in the Population  23
Figure 10 Declining number of births, Cook Islands, 1992-2002  23
Figure 11 Infant Mortality Rate, Cook Islands, 1985-2002  24
Figure 12 Children Admitted to Rarotonga Hospital for Injuries, by age, sex & cause, 1998-2002  26
Figure 13 Percent of Overweight in Rarotonga Schools, 1991-2003  27
Figure 14 School Enrolments by age, 5-18 years, 2001  32
Figure 15 Enrolments by grade and gender  32
Figure 16 Youth as a Percentage of the Total Population, 1981-2001  39
Figure 17 The age-sex Distribution of Migrants from the Cook Islands  41
Figure 18 Rarotonga Hospital Accident Admissions, by age & sex, 1998-2002  45
Figure 19 Youths admitted to Rarotonga Hospital for Injuries, by age, sex & cause, 1998-2002  46
Figure 20 Total Fertility Rate (TFR), Cook Islands, 1992-2002  51
Figure 21 Mean Age of Child-bearing (MAC), Cook Islands, 1992-2002  51
Figure 22 Declining Number of Births, Cook Islands, 1992-2002  52
Figure 23 Gender similarity in education attainment  56
Figure 24 Employment, by age and sex, 2001  57
Figure 25a Employed population, by employer and sex, 1996  58
Figure 25b Employed population, by employer and sex, 2001  58
Figure 26 Income range of economically active adults, by sex, 2001  59
PART 1

Development trends in the Cook Islands
1.1 The situation analysis

As part of its country programmes, UNICEF assists governments to produce and update a report on development trends within each country that describes how these trends affect the well-being of children, youth and women. These reports help to direct UNICEF’s programmes and they also provide a useful reference for national bodies, the public and other development partners. This report presents an overview of the situation of children and women in the Cook Islands at the start of the 21st century. It was drafted with help from many people in the Cook Islands, and also draws upon published and unpublished information and reports.

In 1997, the Cook Island Government ratified the Convention on the Rights of the Child (CRC). UNICEF is assisting countries to implement this convention and to monitor their progress. Within two years of ratification, each government must report their progress to an international review panel in Geneva. The Cook Island report is now in draft. Progress on implementing the CRC is therefore an important backdrop to this report but will be discussed more fully in the national CRC Implementation Report.

1.2 Cook Islands: a small island developing country

The Cook Islands is a country of 15 widely dispersed small islands in the South Pacific Ocean. The population of around 18,000 people is mostly Cook Island Maori, Polynesian people indigenous to this part of the world. Just over two-thirds of the population live on Rarotonga, where Avarua, the capital and only urban centre is located. The land area of the Cook Islands is only 240 square kilometres, spread over almost 2 million square kilometres of sea. The distance between the islands is therefore very large, both in miles and the cost and other difficulties of travel that these miles translate into. It costs more to fly from Rarotonga to the Northern group, for example, than to New Zealand.

Despite the wide distance between them, and the inevitable disadvantages of isolation, all of the islands have a good standard of development. The islands of the Northern Group are most isolated by the cost of air transport and time of sea transport, and have relatively poorer access to health and education services. The islands of the Southern Group are less dispersed and have more regular transport to Rarotonga.

The national economy is based on tourism, fish exports, financial services and the pearl industry. The northern islands of Manihiki and Penrhyn are the centres of pearl farming, an industry which has taken over from the traditional agriculture sector there, although production has been reduced by disease. Other than Rarotonga, the economies of the southern islands centre on agriculture, increasingly for export. Tourism, which is concentrated on Rarotonga and Aitutaki, accounts for around 50 per cent of GDP. The tourist industry is expanding and over 80,000 tourists are expected to arrive in 2005.

Since August 1965, the Cook Islands have been a self governing parliamentary democracy in free association with New Zealand. Cook Island citizens have automatic right to New Zealand citizenship. The close connection with New Zealand influences developments in the Cook Islands in many ways.
Because Cook Islanders hold New Zealand passports, they travel freely to New Zealand and Australia and can work there. Three to four times as many Cook Islanders live overseas as in the Cook Islands itself, most of them in New Zealand. (This mobility also makes the Cook Island resident population difficult to accurately count.) The movement of people is strongly influenced by socio-economic conditions in these countries, including the higher wages, lower prices and the better quality of many goods and services there (SPC, 2004).

Cook Islanders receive social welfare payments, including child benefit, old age pension, destitute or infirm benefit, superannuation, and war pension. In 2000, around half of all females and one fifth of males over 15 received some form of welfare benefit. Females mainly received child benefits and old age pensions. Males mainly received old age pensions and superannuation (Statistics Office, 2003). These benefits are a significant source of household income, especially in the outer islands where there are relatively few sources of cash income.

Cook Island schools closely follow the New Zealand education system in its structure, content and compulsory attendance to the age of 15. The latest Education Strategic Plan aims to tailor the school system more closely to Cook Island needs, by developing relevant curriculum, ensuring equitable access and meeting quality standards.

A negative aspect of the association has been that New Zealand authorities have used the Cook Islands as a dumping ground for delinquent teenagers of Cook Island descent.

1.2.1 High development standards

The people of Cook Islands enjoy a high standard of living compared to other Pacific island countries and other developing countries in the world. The Human Development Index (HDI) for Cook Islands of 0.822 (1999) puts it second only to Palau in the Pacific island region in its high level of development, and in the same global league as Costa Rica, the Bahamas, and the Seychelles (UNDP, 2000).

![HDI for Pacific Island Countries, 1999](image-url)

The Human Development Index (HDI) is a comprehensive summary statistic of development standards in a country. The higher the HDI, the better the situation. Cook Islands has a high HDI by both Pacific regional and global standards for developing countries.

Source: UNDP, 1999
The high HDI reflects the history in the Cook Islands of a high level of government expenditure on health, education and welfare. This is reflected in the good standard of services for children throughout the country and the maintenance of government spending on health and education, even while spending on other sectors has been cut back. Government spending on health in 2002 averaged NZ$252.77 per capita, and on education NZ$425.08 per capita, the two largest items on the national budget.

- Although the range of health services is narrower in small, remote communities, the entire population has access to government-funded primary health care services, including pre-natal and post-natal care. (There is a small and growing private sector-run health service, mainly on Rarotonga.)
The Ministry of Health is now trying to improve service standards on the outer islands by developing a Telehealth system for remote diagnosis and a centralised information system.

Although some communities experience some water restrictions and the management of water resources is of concern on some islands, the entire population has access to clean drinking water and adequate sanitation.

There is a good network of government-funded primary and secondary schools on all islands, and attendance is free and compulsory. The range of tertiary education and vocational training opportunities is expanding.

The welfare system provides for people with all forms of disadvantage, as well as a standard allowance for children to ensure that their health and well-being is well catered for.

One of the biggest difficulties in multi-island states like the Cook Islands is to evenly spread the benefits of development evenly across the country. While service standards are highest on Rarotonga, a good level of development has been achieved in all islands, even the most remote. Government policies have encouraged this, but so too have the Cook Islanders’ strong sense of island identity and self-esteem. Cook Island people take pride in their community spirit and demonstration of ‘aroha’. People living abroad support their island families and communities in many ways, including remittances of cash and willing participation in fund-raising. Groups from all parts of the country enthusiastically participate in national events, such as the annual Constitution Celebrations and national school cultural competitions, to bring prestige to their home island.

**1.2.2 A high level of development**

The 1990 World Summit for Children set several goals for children. They included reducing infant and child mortality rates by one third and maternal mortality rates by one half, reducing malnutrition among children under the age of five, and ensuring that all children to have access to basic education, clean water and sanitation. The Cook Islands have met most of these goals.
## Table 1. Progress in Cook Islands towards the goals of the World Summit for Children

<table>
<thead>
<tr>
<th>Goal</th>
<th>Measurement</th>
<th>1980s</th>
<th>1990s</th>
<th>2000</th>
<th>Progress</th>
</tr>
</thead>
</table>
| Reduce mortality for children under the age of five²                | Infant mortality rate                            | 26    | 11    | 21   | ⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔⇔dept

<table>
<thead>
<tr>
<th>Reduce child malnutrition²</th>
<th>Percent of newborns weighing at least 2500 gm at birth</th>
<th>1</th>
<th>96.5</th>
<th>97.0</th>
<th>✓</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>% children under 5 yrs under-weight</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>✓</td>
</tr>
<tr>
<td>Improve adult literacy³</td>
<td>Adult literacy rate</td>
<td>98%</td>
<td>98%</td>
<td>98%</td>
<td>✓</td>
</tr>
<tr>
<td>Ensure universal access to basic education</td>
<td>Net primary enrolment⁴</td>
<td>98%</td>
<td>98%</td>
<td>98%</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>% of 10-14 yr olds in school⁴</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>✓</td>
</tr>
<tr>
<td>Ensure universal access to safe drinking water and sanitation</td>
<td>Safe drinking water²</td>
<td>81%</td>
<td>96%</td>
<td>100%</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Basic sanitation²</td>
<td>89%</td>
<td>95%</td>
<td>100%</td>
<td>✓</td>
</tr>
<tr>
<td>Reduce maternal mortality ⁴</td>
<td>Maternal mortality rate</td>
<td>46</td>
<td>20</td>
<td>0</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>% of births delivered by trained personnel</td>
<td>99%</td>
<td>99%</td>
<td>100%</td>
<td>✓</td>
</tr>
</tbody>
</table>

Symbols: ⇔ no appreciable change; ✓ already at target level.

Sources & Notes:
1. Booth, 1993. The goal was the one-third reduction of 1990 infant mortality rates by 2000, and to below 35/1000 by 2015 and to less than 70/1000 for under-five mortality.
2. Booth, 1993. The goal was the halving of the 1990 rate by 2000.
3. UNDP, 1999. In the absence of any national literacy survey, a proxy is used for adult literacy, of the percentage of adults who had 3 or more years of primary school education.
5. WHO, 1998
6. Booth and Muttiah, 1992. Maternal mortality is a particularly misleading statistic in small island populations because the conventional denominator (100,000 live births) is so large. By this conventional measurement, even a single death increases the mortality rate dramatically.

### 1.2.3 A high level of vulnerability

Although the Cook Islands have good indicators of development, these statistics are misleading in that this level of wellbeing is somewhat fragile. A small island developing state like the Cook Islands is vulnerable to events well beyond local control, particularly environmental hazards and economic shocks. This vulnerability was evident in the mid-1990s, a time of national financial crisis, a devastating hurricane in the Northern Group, and a disease outbreak that badly affected pearl production. As well, despite the high living standards and achievements in education and health, there is limited cash employment and rising unemployment. Many households get a significant part of their livelihood from remittances, pensions and welfare.
In the early 1990s, the country faced a financial crisis, with rapidly growing foreign debt. In 1996, the government carried out a radical reform of the economy. This included decreasing government spending and slashing the size of the public sector by about two-thirds, from employing 59 per cent of the labour force to around 15 per cent. Many people were made redundant or transferred between departments, and many left the country. The effects are still being felt. There has been some regrowth of employment, mainly in the private sector. A few migrants have returned, but there is still a net outflow of people. Despite improved financial management, public debt remains at about $109 million, around 46 per cent of nominal GDP. This has put a tight constraint on government spending. All sectors apart from education and health have cut back on expenditure.

1.3 Patterns of change

1.3.1 Population change
The population of the Cook Islands decreased from 1996 to 2001. Over these years, it dropped by around 17 per cent, with an average annual loss of 3.7 per cent (SPC, 2004). This happened because of high emigration and reduced fertility.

There has long been a flow of people from the outer islands to Rarotonga, and from Rarotonga overseas. The economic reforms in 1996 sharply accelerated these movements. During the 1990s, all of the islands lost people but some lost heavily. Mangaia, Atiu, Rakahanga and Penrhyn lost a third or more of their residents between 1996 and 2001. Such a loss of people can have a quite corrosive impact on the remaining community.

Figure 4. Population growth by Island Group, 1951-2001

The overall population of Cook Islands is decreasing. Within the country, there is a growing concentration of people on Rarotonga.

Source: Statistics Office: national censuses
Out-migration especially involves young people in the working age-group. As a result, the Cook Island population is getting older. The median age of the population and dependency rates are both rising. Older people, especially women, are increasingly left to care for young children, and many of the working age group have gone.

Because of this outflow of people but also because of limited education and training opportunities, there is a shortage of skilled workers. Particularly on Rarotonga and in the tourist industry, foreign workers work in all types of skilled and even unskilled jobs. A small but growing number of foreigners have settled in the Cook Islands, attracted by business opportunities, the lifestyle, and the beauty of the islands. Numbers are slowly growing of people of part Maori or other ethnicity. One aspect of growing ethnic diversity is that land is being alienated from traditional ownership to be used by newcomers and for new economic activities.

The drop in the size of outer island populations is making service delivery more expensive. School rolls have decreased, especially in the Southern Group (figure 5). Some schools have closed. Others increasingly have moved to multi-grade classes, where one teacher teaches children of different ages. Health services have also been restructured in line with both the drop in outer island populations and restrictions on government spending.

Figure 5. Declining School Enrolments, 1996-2003

[Graph showing declining school enrolments from 1996 to 2003 for Northern Group, Rarotonga, and Southern Group.]

School enrolments have remained almost steady on Rarotonga but have decreased since 1996 in the outer islands, especially the Northern Group.

Source: Ministry of Education, Statistical Bulletins

The changing age structure is putting other pressures on social services. For example, since 1990 there has been a decrease in spending on primary education relative to spending on tertiary and other training outside of the schools. This reflects a growing demand for adult education, not only because the population is ageing but also to provide the more expensive types of skill training that will foster economic activity in Cook Islands and stem out-migration.
1.3.2 Economic change

The economic reform in 1996 marked a major change in the Cook Island economy. The abrupt reduction in public sector employment threw many wage-earners out of employment and sparked a large migration of people to New Zealand. On the outer islands especially, the public sector had been the main source of cash employment. On the positive side, the reforms accelerated the growth of private sector employment, in trade, tourism and other forms of business. Figure 6 shows that employment in agriculture and fishing, the traditional mainstay of the Cook Island economy, had been decreasing since the early 1980s, while private sector employment had slowly grown. Even before the reforms, between 1991 and 1996, private sector employment grew over 50 per cent. In total over the 1990s it almost doubled. These changes have involved a greater monetization of the economy. This is marked by a rising number of unemployed people. Some of them would have previously been involved in semi-subsistence traditional agriculture but now define themselves as being without paid work and wanting it.

![Figure 6. Changing labour force activity, 1981-2001](image)

The proportion of people working in trade and business has grown since the early 1980s and decreased in agriculture and fisheries. The unemployment rate has also grown.

*Source: Statistics Office: National censuses*

Most of the private sector growth has been in tourism, financial services and pearl production and marketing. Cultured pearl production is concentrated on two islands in the Northern Group but supports many businesses in Rarotonga. Commercial farming is growing on some islands of the Southern Group. But many of the economic opportunities are concentrated in Rarotonga, along with cash incomes and wealth (Figure 7).
The lower range of average incomes on outer islands compared with Rarotonga reflects the different economies of the islands. Most paid and skilled employment is on Rarotonga. Outer island residents get more of their livelihoods from agriculture.

*Source: Census 2001*

The growing importance of cash in the Cook Island economy and society is reflected in changing food consumption, a matter more of taste than necessity as there is still a good supply of locally-grown traditional foods. It is also reflected in family life and the raising of children. Especially on Rarotonga, more men and women are in paid work, and this and other social demands absorbs a lot of their time.

*‘In Rarotonga in particular many children are part of a multi-income family with all adults working – often at night as waiters, watchmen, in telecommunications and other tasks. Some have heavy community commitments. Others are into sports and entertainment, especially housie (bingo) which keeps some mothers away from home many nights a week. Meals are haphazard, mornings are a crazy rush to get the kids to school and get to work. Kids are late because parents are late. No one has time to check on homework or spend quality time with the children.’*  

*(Vai‘imene, 2003)*

Bingo is a popular evening entertainment for women and men.
1.3.3 Changing patterns of health

For several reasons – the good control of infectious diseases, the ageing population, changing diets and less physical activity – there has been a rise in illness and death rates from non-communicable diseases, especially heart disease and diabetes. This type of disease is relatively expensive for health services and families to deal with. For example, the number of people with diabetes is quickly growing (figure 8). If uncontrolled, diabetes can lead to disabilities, even amputations, in adults. Because of the changing cost and availability of different types of food, people now eat more imported foods high in fat and sugar, rather than their traditional staples. Cook Islanders also have high consumption of alcohol and tobacco. Although sports are popular, the level of physical activity has dropped. People nowadays are more likely to move about by car or motor-scooter than on foot. Motor vehicle accidents are a major cause of injury and death at all ages. Overall, however, the health status of Cook Island people, especially children, is good compared to other people in other Pacific Island countries where infectious illnesses are less well controlled.

**Figure 8. Prevalence of diabetes & hypertension cases registered by year, 1995-2002**

There has been a large increase in the number of diabetic people since the mid 1990s.

*Source: Ministry of Health, Annual Statistical Reports*

1.4 The social and cultural context of children’s and women’s lives

1.4.1 Cook Islands society

Each of the Cook Islands has their own particular culture. The common thread between them is the great importance given to a person’s responsibilities to their family and *vaka* (land-owning unit) and the observation of custom. Cook Island cultures have of course greatly changed in response to Christianity and the transformation of society and economy over the past 200 years or so, but the observation of cultural practices in their modern form is still fundamental to people’s identity as
Cook Islanders (Crocombe et al., 2003). Cook Island society today is geographically dispersed and mobile, and people, goods, cash and messages pass to and fro between family members throughout the world. This global network of family ties continues to grow, but at the cost of less social contact between them all (Crocombe et al., 2003). Family life is still the basis of Cook Island society, even though it is being eroded by monetization and mobility (Ama, 2003).

1.4.2 The place of children

Traditionally, the upbringing of children was a community responsibility rather than directly that of the biological parents. Still today, children are often adopted or brought up by their grandparents or other close relatives, as a ‘feeding child’. In extended families that are still strong, this system works well but, with the high levels of mobility today, some women get left with children without financial or other support (CEDAW, 2003). Within their families, most children are expected to help with household chores and perhaps some farming. There is no child labour, as such, for there are laws against this and all children must attend school. The borderlines between family help and work are however blurred. Some children reportedly stay away from school at particular times, to help their family.

The last decade or so has been a time of rapid social and economic change in the Cook Islands. Children are still taught fundamental aspects of their culture, such as how they fit within their own network of kin but, other than this, there is some concern that children learn about their culture too narrowly now, mostly the songs and dances, and little of its basic values, principles, practices, guidelines and philosophy (Vai’mene, 2003). Because many adults now work, travel, or are so often busy, many children now miss out on the informal education provided by grandparents and other adults and instead learn the new ‘culture’ from television and video. There is concern in the community and schools that Maori language skills are deteriorating in children.

1.4.3 The place of youth

The age-group of youth is defined as people aged 15 to 34 but interpreted very widely in Cook Islands, sometimes including adults in their middle age. This is an age of both potential and problems, as is expressed in the National Youth Policy 2003-6. The potential relates to their future as leaders and workers and, for this potential to develop, training and other opportunities are required. The problems relate to the tendency of youths to engage in disruptive behaviour, such as crime and alcohol or drug abuse, and put themselves at risk through, for example, drunk driving and unprotected sex. As the National Youth Policy describes the situation:

‘Young people are emerging as a social grouping, facing distinct difficulties and the challenges of life. For example, young people are encountering difficulties in the labour market. This calls for effective and efficient programmes to provide better opportunities for our young people. At the same time our young people need to be encouraged to take full responsibility for their own lives. This involves teaching them to plan well for their future, learning to make wise choices in life and having attitudes that gives them a healthy self-esteem which in turn enables them to face life’s challenges more effectively.’

(Office of Youth Development, 2002).
1.4.4 The position and roles of women

Until recent years, the domain of Cook Islands women was mainly the household. Most family and community decisions were made by men, and it was considered culturally correct and proper behaviour for women to be passive enactors of these decisions (Kingston, 1999). Until recently, men generally fared better than women in their access to higher education, paid employment, and access to credit and other productive resources, although women do not lag far behind. The attitudes and aspirations of women on the outer islands, however, are mostly more conservative than on Rarotonga (Kingston, 1999).

Both men and women in Cook Islands have high life expectancy, at 74.3 years for women and 68 years for men. Girls and boys have similar school enrolment, and almost equal proportions of women and men have had some secondary education. Beyond school, however, the gender gap widens. Almost twice as many men have had tertiary education than women and more are in technical fields. The gender gap is widest in employment.

In Cook Island tradition, women have equality with men in that they have more or less equal inheritance of land and rights of land use. The principle of no discrimination by sex is also enshrined in the Constitution and in family law. There is no legislation, however, that explicitly prevents discrimination against women, such as any provision against gender discrimination in job advertisements or legislation or policies that prohibit sexual harassment at work. Nor are there ‘positive discrimination’ initiatives in place to promote equality between men and women.

Despite the common view that there is equal opportunity and everything is fine, the National Policy on Women (1995) recognised that,

“Subtle elements of discrimination against women perpetuated by culture, custom and tradition continue to exist in Cook Island society today. Women’s heavy workloads, for instance, continue to increase but, for a variety of reasons, are not equitably shared. The continued stereotyping and confining of women’s roles and responsibilities to the domestic arena limits their participation in the development process. Obstacles causing the limitations, however, are self-perpetuated as many women continue to cling to strongly-held views regarding their ‘proper’ role in the community.”

Although this was written almost ten years ago, and times have certainly changed since, subtle forms of discrimination still remain. In effect, considerable discrimination against women persists (CEDAW, 2003).

1.4.5 The role of the media in social change

Mass media in the Cook Islands include most modern forms of communication, namely local newspapers, radio and television, as well as imported newspapers and magazines, videos and, with still limited connection, internet. For young children, television and video are the media that they have most access to and, as well, have greatest impact upon them. 'The greatest cultural educators that
now shape [children’s] values and attitudes are not parents or grandparents, or teachers or churches, they are television and video – the latter mainly low quality American productions’ (Vai’imene, 2003). The TV stations include some local content, mostly news, but most programming is foreign. While there is control over the TV programmes, there is very little control over the videos children watch, often brought into the home by older people and left for the children to watch unsupervised.

There is one daily and two weekly newspapers, which are widely read in the Cook Islands and by emigrants elsewhere. There is no censorship and a lot of attention is given to politicians and government programmes, often in quite critical and discordant ways. There has been no study as to how this type of dialogue may affect young people’s attitudes to their government and leaders. The newspapers and TV programmes also provide public information messages and promote issues such as healthy diets and exercise.

1.5 Conclusions

By most indicators of development, the Cook Islands is a well developed country with a generally high standard of living. This level of well-being is somewhat fragile, however, as the country is vulnerable to economic and physical hazards and the range of challenges that face small, multi-island states. Rapid economic and social change over the past decade has had large repercussions on the society and particularly on the size and structure of the population. The country is losing people and it is not at all clear whether this trend will slow down before outer island communities, particularly, are damaged beyond repair. Emerging issues include new patterns of ill-health, mostly linked to lifestyles and high levels of substance abuse; increased monetization of the society and changing demands on adults and children; and cultural changes, particularly those linked to the large presence of television and video in the lives of young children. The following chapters of this report examine the impact of these changes on the lives of children, youth and women in the Cook Islands.
PART 2

THE SITUATION OF CHILDREN
2.1 Children in the population

Children under the age of 15 make up around one third (31 per cent) of the population of the Cook Islands. That percentage is dropping slowly due to the slowing down of the fertility rate.

![Figure 9. Children in the population](image)

Children make up almost one third of the Cook Island population

Source: Census 2001

The annual number of births in Cook Islands decreased sharply during the 1990s. There are now only a few births each year in the outer islands. This is partly because many young people have migrated but also because livelihood and other opportunities are changing, especially for women, and this affects the choices people make about the number of children they have. Family planning services are readily available throughout the country.

![Figure 10. Declining number of births, Cook Islands, 1992-2002](image)

The annual number of births has decreased since the early 1990s

Source: Ministry of Health, annual statistical bulletins
2.2 Children’s survival

2.2.1 Infant and child mortality and illness

The infant mortality rate, which counts the number of infant deaths per 1,000 live births, has fallen in the Cook Islands over the past three decades. The current figure of around 16 is low compared to other Pacific island countries, yet is still more than double that of New Zealand (6.1) (SPC, 2004).

Table 2. Infant and child mortality measurements, 1996-2002 averages

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>Males</th>
<th>Females</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infant mortality rate</td>
<td>21.0</td>
<td>24.0</td>
<td>18.0</td>
</tr>
<tr>
<td>Child mortality rate*</td>
<td>5.5</td>
<td>7.0</td>
<td>3.8</td>
</tr>
<tr>
<td>Under 5 mortality</td>
<td>26.1</td>
<td>31.3</td>
<td>20.8</td>
</tr>
</tbody>
</table>

*Child mortality rate refers to deaths of children aged 1 to 5; Under 5 mortality refers to all deaths from birth to age 5.

Source: SPC, 2004

The infant mortality rate is very unsteady in small populations like the Cook Islands because only one or two deaths make a misleadingly big difference.

Figure 11. Infant Mortality Rate, Cook Islands, 1985-2002

The infant mortality rate (IMR) is estimated at 15.8 for 1996-2002.


Table 3 shows that, over the last decade, infant mortality has dropped mainly because of better health care for premature babies. Other causes of infant deaths are pneumonia and infectious diseases, mainly diarrhoea. There are no clear differences in infant death rates in different parts of the country. Most high risk births are delivered in Rarotonga where health care facilities are best but, for that reason, most infant deaths also occur there. Infant and child deaths are mostly male, but this is the normal pattern.
Table 3. Causes of Infant Deaths, 1985-2002 (deaths per 1000 live births)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Related to prematurity</td>
<td>15.2</td>
<td>9.8</td>
<td>1.7</td>
</tr>
<tr>
<td>Ill-defined conditions</td>
<td>2.7</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Pneumonia</td>
<td>1.9</td>
<td>7.9</td>
<td>0</td>
</tr>
<tr>
<td>Infectious &amp; parasitic diseases</td>
<td>1.1</td>
<td>0</td>
<td>1.7</td>
</tr>
<tr>
<td>Nutritional &amp; metabolic diseases</td>
<td>0.8</td>
<td>3.9</td>
<td>0</td>
</tr>
<tr>
<td>Others</td>
<td>2.3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>24</td>
<td>21.6</td>
<td>3.4</td>
</tr>
</tbody>
</table>

Source: Ministry of Health

Very few (4.4 per cent, 1998) babies are born under-weight. Most Cook Island babies are heavier at all ages than WHO standard weights-for-age. More than 30 per cent of Rarotongan infants aged 0 to 5 months and more than 20 per cent of infants aged 6 and 7 months were heavier than the standard weight-for-age defined by WHO (Ministry of Health, 1998). There is a growing number of overweight (macrosomic) babies that weigh more than 4000 grams at birth. Macrosomia is associated with gestational diabetes mellitus, and the growing number of very over-weight babies may be related to the rising prevalence of diabetes in women.

Cook Island children generally are healthy and well cared for. Very few die under the age of five. The main causes of death are respiratory disease and accidents. The main causes of hospitalisation for children are respiratory diseases, infectious diseases and injuries: For children under five years, respiratory disease is the greatest health risk. For children aged 5 to 14, accidents and injuries are the main health risk.

Table 4. Causes of Child Deaths, aged 1-4 years, 1996-2002 (deaths per 1000 live births)

<table>
<thead>
<tr>
<th></th>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Respiratory disease</td>
<td>3.92</td>
<td>0</td>
<td>0</td>
<td>2.77</td>
<td>3.23</td>
<td>3.27</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>Infectious disease</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Traffic accidents</td>
<td>1.96</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Other injuries</td>
<td>1.96</td>
<td>0</td>
<td>2.57</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>3.4</td>
<td>3</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2.77</td>
<td>3.23</td>
<td>6.53</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>Total deaths</td>
<td>7.84</td>
<td>0</td>
<td>2.57</td>
<td>5.54</td>
<td>6.47</td>
<td>9.80</td>
<td>3.4</td>
<td>5.03</td>
</tr>
</tbody>
</table>

There are few child deaths in Cook Islands. From 1996 to 2002 there were 2580 live births and 13 deaths of children aged 1 to 4 years.

Source: Ministry of Health

Accidents and injuries are a main reason for the deaths and hospitalisation of young children. The main causes are vehicle accidents, poisoning and falls. Surprisingly few children drown in this island country.
2.2.2 Immunisation

There is an effective immunisation programme against six major childhood diseases, with a high level of coverage throughout the country, now at 98 per cent. Immunisation is carried out in the schools and in the health centres, as part of the maternal and child health programme. For school age children, the immunisation programme is carried out through the schools.

Table 5. Immunisation of children and pregnant women

<table>
<thead>
<tr>
<th>Year</th>
<th>BCG</th>
<th>DPT 3</th>
<th>Polio 3</th>
<th>Measles</th>
<th>HBV 3</th>
<th>Tetanus 2 with booster</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991</td>
<td>96</td>
<td>86</td>
<td>87</td>
<td>93</td>
<td>71</td>
<td>59</td>
</tr>
<tr>
<td>1992</td>
<td>94</td>
<td>87</td>
<td>87</td>
<td>87</td>
<td>98</td>
<td>87</td>
</tr>
<tr>
<td>1993</td>
<td>94</td>
<td>100</td>
<td>100</td>
<td>82</td>
<td>98</td>
<td>79</td>
</tr>
<tr>
<td>1994</td>
<td>98</td>
<td>85</td>
<td>85</td>
<td>72</td>
<td>79</td>
<td>66</td>
</tr>
<tr>
<td>1995</td>
<td>92</td>
<td>89</td>
<td>89</td>
<td>87</td>
<td>82</td>
<td>71</td>
</tr>
<tr>
<td>1996</td>
<td>90</td>
<td>75</td>
<td>75</td>
<td>72</td>
<td>65</td>
<td>64</td>
</tr>
<tr>
<td>1997</td>
<td>85</td>
<td>93</td>
<td>93</td>
<td>88</td>
<td>99</td>
<td>93</td>
</tr>
<tr>
<td>1998</td>
<td>98</td>
<td>93</td>
<td>93</td>
<td>97</td>
<td>88</td>
<td>98</td>
</tr>
<tr>
<td>1999</td>
<td>97</td>
<td>92</td>
<td>92</td>
<td>84</td>
<td>90</td>
<td>94</td>
</tr>
<tr>
<td>2000</td>
<td>100</td>
<td>92</td>
<td>92</td>
<td>84</td>
<td>98</td>
<td>96</td>
</tr>
<tr>
<td>2001</td>
<td>98</td>
<td>90</td>
<td>90</td>
<td>83</td>
<td>93</td>
<td>94</td>
</tr>
<tr>
<td>2002</td>
<td>98</td>
<td>97</td>
<td>97</td>
<td>95</td>
<td>93</td>
<td>94</td>
</tr>
</tbody>
</table>

Source: Ministry of Health, Annual Statistical Bulletins

Injuries to children increase with age, most caused by motor vehicles and most involving boys

Source: Ministry of Health, annual statistical bulletins
2.3 Infant and child nutrition

2.3.1 Breast-feeding

Most mothers breast-feed their babies but a common practice is the too early introduction of other food and drinks. Since 1992, WHO, UNICEF and the Ministry of Health have promoted exclusive breast-feeding for infants for the first four to six months of their lives. In 1998, a survey was conducted to evaluate the effectiveness education programmes that promoted this policy. The survey found that 91 per cent of mothers breast-fed their infants under four months of age but few did so exclusively. Only 36 per cent of infants less than one month old and 14 per cent infants aged one to four months were fully breast-fed. The reasons most mothers gave for this were nipple problems and insufficient breast milk to satisfy the baby. The first drinks usually given to babies are *nu* (coconut water), water, and juice and the first foods are commercial baby foods, cereals, rice and fruits.

There is concern that the early consumption of other foods may contribute to overweight and obesity in later childhood and adulthood. Grandmothers have a strong influence on the feeding of infants, and foster the tradition of feeding them with *nu* and pawpaw juice – sometimes because the grandmother takes over the baby’s care. This local food is thought to be beneficial for babies but in fact it is not, as it reduces the amount of breast-milk that babies consume. Many mothers also do not understand that colostrum alone is enough for newborn babies, and that it is the best food for them.

The survey found that the proportion of babies under the age of one year who were breast-fed had increased, from 69 per cent in 1989 to 80 per cent in 1998. The breast-feeding campaign appears to have succeeded in this respect, but not in persuading mothers to exclusively breast feed for the first six months (Tairea et al., 1998).

2.3.2 Child obesity

There is a significant number of over-weight and obese children. This is associated with physical inactivity and poor diets, particularly ‘junk’ food. A survey of Rarotonga schools in 2003 found 17 per cent of the students were over-weight. Although health is part of the school curricula, the school environment often contradicts classroom teachings and encourages unhealthy eating habits. Many school tuckshops sell high fat, energy dense foods, like canned soda, hot dogs and doughnuts. A recent survey found that schools that mostly sold this kind of food in their tuckshops had the highest percentage of overweight children (Tairea et al., 1998).

![Figure 13. Percent of overweight in Rarotonga Schools 1991-2003](image)

<table>
<thead>
<tr>
<th>% overweight</th>
<th>1991</th>
<th>1992</th>
<th>2003</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>8.43%</td>
<td>17.50%</td>
<td>16.90%</td>
</tr>
</tbody>
</table>

A 2003 survey in Rarotonga schools found 17 per cent of students over-weight

*Source: Tairea et al., 1998*
In the past, students would bring local root-crops, fish and fruit for their school lunch. Today, when there is more cash about and more mothers work, busy parents are more likely to give their children money to buy snacks at the tuck-shop. Teachers say that, “Parents have changed their ways with their children,” referring to their greater willingness to give what the child asks for, and “There’s only so much you can do as a teacher to educate children about food if parents just give money.” They see that the situation is deteriorating, not improving, with children consuming ‘junk’ food and soft drinks daily. To combat this, some schools have a weekly ‘local food day,’ when children must bring traditional foods. A joint programme is planned between the ministries of Health and Education to control the types of food sold on school premises.

2.3.3 Dental caries

The Cook Islands has a dental programme for children that operates through the schools. Some schools have their own clinics, others are regularly visited by dental nurses. Some primary schools also have daily teeth-brushing sessions. The dental programme was, however, much reduced by the economic reforms in 1996 and has only recently been re-established. Some outer islands went without oral health services for several years. A national flouride programme was discontinued in the late 1990s because of public fears about side-effects.

Despite these facilities – or perhaps because there are regular check-ups - school nurses report serious dental problems in school children. They warn that this may be a generation without teeth in 30 years, probably because of the high consumption of sugary snacks, soft drinks and other ‘junk’ food. The WHO goal is 3 or fewer decayed, missing or filled (DMF) teeth for 12 year olds. An oral health survey conducted on seven outer islands in 2001 found that 5 year olds had an average DMF of 9 and 12 year olds a DMF of 3.2, just higher than the WHO standard. (The adults surveyed had average DMF of 18.9 for 18-34 year olds, 16.2 for 35-44 year olds and 21.4 for 55 year olds and over.)
2.4 Child development

2.4.1 Access to formal education

The Education Act 1986-7 makes it compulsory for all children in the Cook Islands to attend school from the ages of 5 to 15, and makes it an offence for a parent or guardian not to ensure the child regularly attends school. Although there are truancy officers to enforce the Act, some children do not attend school. Schools report that truancy is a problem with older students. Many disabled children do not attend school. School girls under the age of 15 who become pregnant – and sometimes also the young father of the child - are required to leave school until she gives birth and no other provisions are made for their education.

There is a long history of free education, beginning from the late nineteenth century. By the mid-1930s, over 90 per cent of 6 to 14 year-old children attended school. Today, almost all adults have attended school, and at least 90 per cent have completed their primary education. Schools operate on all twelve permanently populated islands, some schools being very small because they serve small, isolated communities. The Government operates most schools in Cook Islands, with church organisations operating six of the 37 schools, and secular community groups another two. The Ministry of Education provides all schools, government and private, with curriculum advice and teacher training.

2.4.2 Early childhood education

A well developed programme for early childhood education operates through the primary schools for children aged from 3.5 to 5 years. There is a national curriculum and child assessment system. Children are taught in their mother tongue, Maori. The preschools emphasise development and learning through play, pre-numeracy and literacy skills, and aspects of Cook Island culture, especially music and dancing. In 2000, 92 per cent of children aged 3.5 to 4 years attended a preschool (Education Assignments Group, 2001:68). Most preschools are associated with primary schools. Some outer islands face a shortage of trained preschool teachers. The Government’s goal is to have 100 per cent enrolment in early childhood education, and to further improve its quality.
2.4.3 Primary school

Children start school when they turn five. During the first three years, most classes are taught in Maori, with English progressively introduced. Students are automatically promoted at the end of each year, except in cases of special learning difficulty. The survival rate has been drawn down in recent years by the large number of students emigrating. The schools endeavour to be child friendly and gender neutral.

<table>
<thead>
<tr>
<th></th>
<th>Girls</th>
<th>Boys</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average repetition rates by grade 1-5</td>
<td>n.a.</td>
<td>n.a.</td>
<td>2.8</td>
</tr>
<tr>
<td>Survival rate to grade 5</td>
<td>59.2</td>
<td>62.8</td>
<td>60.8</td>
</tr>
<tr>
<td>Coefficient of efficiency to Class 5</td>
<td>19.8</td>
<td>17.5</td>
<td>18.5</td>
</tr>
</tbody>
</table>

Source: Ministry of Education, 1999

There are restraints on corporal punishment in schools. It is restricted to principals, but mostly they too prefer other forms of correction and counselling. There is a lot of public interest about this issue. Some people believe that young children these days are disrespectful and unrestrained. Some attribute this to lax discipline, and bemoan the lack of physical punishment. Others realise that if young children today are different it is because they live in a quite different cultural environment, largely through the channels of television and video, and that there are more effective and acceptable ways to mould their behaviour.
The Government aims to raise the quality of education. There is a national programme of standardised tests to measure school achievement. All six year olds are tested three times a year, and again in Grade 6. Since the late 1990s, there has been concern over falling achievements in English and Maori, and, in Southern Groups primary schools, mathematics. As rolls have decreased, some outer island schools have closed and many classes have become composite, and this also puts some strains on teachers.

The Takitumu Home Education Project in Rarotonga is a pilot programme that aims to improve children’s school achievements by involving parents and the community in the education process. This programme was set up in the community by parents concerned about falling student outcomes. Volunteer parents and other interested people visit homes to talk about education with families and encourage them to become more active in the children’s education progress (Education Assignments Group, 2001). Because it has been so successful with parents and the schools, the programme has now spread to other islands, including Aitutaki and Atiu.

2.4.4 Secondary education

Because school attendance is compulsory until the age of 15, almost all students progress to secondary school. Figure 14 attempts to match enrolment data with census data to show how many children at each age are out of school. Although this is only an approximate match (school enrolment figures exceed census counts at almost all ages), Figure 14 may show that there are quite a few early drop-outs.

Despite the Education Act, there appear to be quite a few early drop-outs from Cook Island schools. This graph combines census and school enrolment figures, the only available data on this subject, but the match is not exact. Enrolment figures possibly come from early 2001, the census was conducted in December of that year, and the easy flow of people to and from New Zealand makes the Cook Island population particularly hard to count.

Sources: Census 2001 and Ministry of Education, 2001
Figure 15 shows that enrolments are fairly evenly balanced by gender, although girls predominate in the senior years. This too is approximate, because some students attend school overseas and are not counted here.

There are fairly even enrolments of boys and girls, although girls predominate in senior grades.

Source: Ministry of Education, 2001

There are more concerns about quality at secondary school level, as well as about the match between school programmes and the livelihood prospects for children. There are also concerns about truancy, poor motivation and drop-outs. These problems are reflected in the low pass rates for New Zealand School Certificate, an examination that is mostly sat by students on Rarotonga.
Table 7. Low pass rates in New Zealand School Certificate

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of students sitting NZSC</td>
<td>149</td>
<td>149</td>
<td>156</td>
<td>167</td>
<td>152</td>
</tr>
<tr>
<td>Total number of papers sat</td>
<td>693</td>
<td>627</td>
<td>670</td>
<td>678</td>
<td>648</td>
</tr>
<tr>
<td>Total papers passed</td>
<td>235</td>
<td>226</td>
<td>259</td>
<td>108</td>
<td>226</td>
</tr>
<tr>
<td>Overall pass rate</td>
<td>34%</td>
<td>36%</td>
<td>39%</td>
<td>25%</td>
<td>35%</td>
</tr>
<tr>
<td>Pass rate for English</td>
<td>22%</td>
<td>26%</td>
<td>33%</td>
<td>16%</td>
<td>33%</td>
</tr>
<tr>
<td>Pass rate for Mathematics</td>
<td>24%</td>
<td>22%</td>
<td>25%</td>
<td>16%</td>
<td>29%</td>
</tr>
</tbody>
</table>

Source: Education Assignments Group, 2001

2.4.5 School facilities for disabled children

A survey in 2001 identified 119 school age children and another 522 people with disabilities (McCullough, 2002). This represented 4.2 per cent of the resident population, which is around the expected number in any population. Only half (60) of the disabled children attended school, even though attendance is supposedly compulsory. In 2000, the Ministry of Education adopted the Policy for Special Education, and aims to integrate disabled children into the normal classroom wherever possible. Transportation to school, however, is difficult, especially for severely disabled children, and this is one reason many stay home.

Few teachers are trained to assess or teach children with special needs. A Special Education Adviser, appointed in 2000, is now providing this training, but this one person is barely enough. There are few special facilities for disabled children, and only on Rarotonga. The Disabled Persons Centre, an NGO, runs a special education classroom at Avarua Primary School and the Ministry of Education pays the salaries of the two teachers. Although the Centre provides transport, it caters mainly for people in the Avarua area. Parents are often expected to stay with their disabled child at school but find this difficult, as they have jobs or other children to mind (McCullough, 2002).
2.5 Child protection

There are comprehensive facilities for child protection in the Cook Islands. The first responsibility for the welfare of a child rests with the custodial parents or parent. Several agencies oversee the well-being of children. The Ministry of Health monitors the health of pre-school children through the Mother-Child welfare clinics and medically checks all children when they first enrol in school. Throughout primary and secondary school, dental and public health nurses regularly check children’s health. The teachers also check whether children are fed and clothed adequately, as well as monitor their educational progress. The Welfare Service provides a child benefit allowance of twenty dollars per fortnight to the custodians of all children, as well as a one-off payment of $150 to assist parents immediately after the birth of a child, to ensure that its needs are well met. There is a well resourced Probation Service for children in trouble with the law, including a computerised recording system that provides for systematic follow-up visits and case monitoring. The Social Welfare Division deals with cases relating to child abuse, access, custody, maintenance and neglect, child desertion, child placement with caregivers, and domestic problems.

The Government is now thinking about delegating responsibilities for child protection to a single agency, to better coordinate these services. A remaining concern is that while Cook Island laws provide comprehensive protection for children, some of these legal provisions are not used or have significant gaps in them. For example, there is insufficient Government infrastructure to help children who are delinquent or assaulted (NCW, 2000:8) and penalties for sexual abuse of children are often not enforced. While there are no signs of child trafficking, systematic sexual exploitation or child labour, neither is there any legal framework to monitor and control these situations.

The special needs of children are recognised in the legal system and the interests of the child are paramount, especially in cases regarding custody and adoption. The Juvenile Crime Prevention Committee was established in 1997 to deal with juvenile offences and complaints. It has no powers to impose penalties, but only provides counselling, such as conferences with family members to help resolve matters without going into court. Depending on the severity of the offence, the case may be withdrawn, or the offender reprimanded, placed under supervision or sent to the Children’s Court. The Children’s Court hears cases involving children aged from around 10 to 16 years.

Table 8. Ministry of Justice Operational Structure

![Diagram of Ministry of Justice Operational Structure]
The biggest problem with the legal treatment of children has not been with the Cook Island system but with the New Zealand system. For several years, until quite recently, welfare services in New Zealand were ‘returning’ children of Cook Island descent who had been in trouble with the law to the Cook Islands – even when the child’s parents were in New Zealand, the child had never lived in the Cook Islands, and was being sent to relatives they had never met before. Sometimes the Cook Island authorities were alerted to the child’s arrival. Other times, family members were simply phoned and asked to come to the airport to collect the child. Although some children settled in well, this practice was unfair to many children and their involuntary Cook Island guardians. Some communities were concerned about the bad influence that some ‘returnees’ had on local children. The Welfare Service has established protocols regarding these ‘returned’ children, and some communities refuse to host them.

2.6 Children in especially difficult circumstances

2.6.1 Children in disputed custody

This is a particular case where the law cannot properly protect children, for the Cook Islands has no agreements with other countries. Custody orders in Cook Islands are not enforceable in New Zealand or Australia. There are many inter-country custody cases.

2.6.2 Children who are neglected or abused

There is concern in the Cook Islands about the large number of children who suffer some degree of neglect, often left alone at home while their parents deal with other interests. For serious cases of neglect or abuse, the Crimes Act 1969 provides some protection to children, but the penalties are small and rarely imposed. The Protection of Children Ordinance 1954 also discriminates between a boy child and a girl child regarding the limit of age to which a legal action for neglect can be launched. It has been recommended that this provision be repealed, but this legal amendment has been held up by insufficient resources and the priority given to economic reform-related legislation (CRC, 2003).

2.6.3 Children who become pregnant

The Cook Islands has a particularly high number of teenage pregnancies. This is defined as a pregnancy to a woman under the age of 20 years. Teenage pregnancies pose medical and social risks to the mother and infant, but less so among older teenagers and those in stable relationships. In Cook Islands, many older teenagers are in stable relationships. The problem pregnancies are those to younger teenagers, especially girls under the age of 15.

This problem is well known in some respects, but veiled in silence in other respects. For example, the bi-annual Conference of the National Council of Women in 2000 heard that, ‘the biggest problem for Aitutaki was very young girls having sexual relationships, some already in de facto relationships, or affected and traumatised by incest. This issue needs urgent attention’ (NCW, 2000:13).
Unfortunately, the issue is not getting this urgent attention. The policy of the Ministry of Health is that all births to young teenagers should be delivered in Rarotonga, but there is no mechanism to ensure that this happens. Hospital records show that some young girls give birth on other islands, but even these records undercount these births. Clinic nurses on Rarotonga acknowledge that they have no information about the total number of births to young teenagers, apart from those that come to their clinic. In 2003-4, the Rarotonga Antenatal Clinic dealt with eight pregnancies to girls aged 16 or less: one 14 year old; four 15 year olds, and three 16 year olds. Five girls were from Rarotonga and three from outer islands. During that time, there were five pregnancies to girls aged 15 or less on another island, none of whom were seen at the Rarotonga Clinic. Ministry of Health national data on births reported two births to mothers aged 15 or less in 2002, but at least one of them was not seen at the Rarotonga Clinic. It is clear, therefore, that not all young teenage pregnancies are referred to Rarotonga and that these births are under-recorded. The Census unfortunately cannot give more information about this as it uses the international convention of 15-19 years being the youngest age-group of mothers.

This lack of information helps to maintain a blanket of silence around this important issue. People often talk of these pregnancies as being the outcome of sexual experimentation by young teenagers, but they often involve older men and situations of abuse, rape and incest. Usually no complaint is made to the Police because the girl’s parents do not want shame on their family, even though in small communities most people know what has happened. This lack of action usually extends beyond the Police to the Welfare Department, school authorities and medical staff. As well as the baby, the girl often bears the trauma of rape or incest and shame. Despite the legal protections that exist, the man involved is rarely brought to justice. Despite the law that all children must be at school until the age of 15, these young mothers often drop out. Some schools suspend both the girl and boy, if both are students, until after the child is born, but there is no national policy firmly applied on this matter.

2.6.4 Children who are exploited

In general, there is very little exploitation of children in the Cook Islands. As the tourist industry grows, however, there is some concern that children are being exploited, in perhaps naïve ways, to entertain tourists. Cook Island dancing can be sexually provocative, certainly the type of dancing that most tourist shows promote. On Rarotonga, there are restrictions on the ages of dancers but on Aitutaki, children as young as three or four, and many secondary school-age girls and boys, regularly dance for the tourists or watch the show. The performances are usually at night, in restaurants and night-clubs, even though this countervenes the Sales of Liquor Act, whereby children are not allowed to be in a public bar. While these performances are being promoted as ‘culture’, some people strongly disagree. As one community leader explained, ‘I assure you that’s not our culture, to put children in a bar to entertain adults who are drinking. In our culture, dancing is done in the community or at school.’

1 A check of monthly reports from one hospital found that in the previous 24 months, no data was recorded about age of mother for 9 of those months. Even when recorded, age of mother data was unreliable and under-age births were most likely to go unrecorded. Evidence of these underage births was however available elsewhere in the monthly reports, and were known about by informed island residents.
There is no organised prostitution in the Cook Islands. There are known to be some casual sexual liaisons in exchange for gifts, but no research has been done on this. There have been a very few cases of tourists having sex with children, and one tourist has been imprisoned for sexually molesting children.

2.7 The participation of children

Children in the Cook Islands are respected as full members of their society and are openly treated with affection. Their basic rights, such as those to a name and nationality, are safeguarded in the national constitution, and also in Cook Island culture. There is a well-managed birth registration system. A child’s right to know his or her biological parents is usually respected, even though adoption is common, especially among close family. In the schools, children are encouraged to express themselves and efforts are being made to move away from sexual stereotyping of children’s interests, sports and other activities.

2.8 Conclusion

In most respects, Cook Island children fare very well. There is a very low death rate for infants and children, a comprehensive and well-resourced education system that includes early childhood education, and a welfare system that ensures that all children are well fed and clothed. The increased monetarisation of Cook Island society, however, has brought with it an abundance of junk food and many unsupervised hours for children in front of television and video. Children are at the cutting edge of culture change and, in this very mobile community, many are losing the depth of understanding of Cook Island culture that was once gained from living amongst their extended family. While laws exist to protect the few children who suffer real abuse, these laws are often not enforced and the community prefers to be silent on these problems.
PART 3

THE SITUATION OF YOUTH
### 3.1 Introduction

Youth are defined in Cook Islands as people aged 15 to 34. This age-group comprises just over one quarter (28 per cent) of the Cook Island population. As in most countries, this period of life is somewhat ambiguous for young people, as they are variously treated as children or adults, depending on the situation or the requirements of particular laws.

#### Table 9. Ages of responsibility in the Cook Islands

<table>
<thead>
<tr>
<th>Minimum age</th>
<th>Age</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>For criminal responsibility</td>
<td>10-14</td>
<td></td>
</tr>
<tr>
<td>For trial in court</td>
<td>12</td>
<td>With special judicial procedures for children to the age of 18 yrs.</td>
</tr>
<tr>
<td>For employment</td>
<td>16</td>
<td>Harsh or hazardous work: 18 yrs.</td>
</tr>
<tr>
<td>For sexual consent</td>
<td>12-16</td>
<td>Below the earlier age, consent is no defence against unlawful carnal knowledge; between the two ages, consent may be a defence, e.g. if there is cause to doubt the girl's age.</td>
</tr>
<tr>
<td>For marriage (a) With parent consent</td>
<td>18 (m) 15 (f)</td>
<td></td>
</tr>
<tr>
<td>(b) Without parent consent</td>
<td>21 (m) 18 (f)</td>
<td></td>
</tr>
<tr>
<td>To operate a motor vehicle</td>
<td>18</td>
<td></td>
</tr>
<tr>
<td>To vote</td>
<td>18</td>
<td></td>
</tr>
</tbody>
</table>

Sources: National CRC Implementation reports; Pulea, 1986:123.

#### Figure 16. Youth as a percentage of the total population, 1981-2001

The youth population, aged 15-34 years, has stayed at around 30 per cent of the population since 1981.

Source: Censuses, various dates
The National Youth Policy 2003-5 identifies the following problems associated with young people: high levels of truancy, delinquency, lack of interest; lack of direction and motivation and an increasing number of social related problems [that] are experienced in schools and at the community level. An increasing number of young people are leaving school with little formal education or qualification. Some have lost or are losing their cultural identity, lacked basic technical skills and have few opportunities to gain skills in trade, technical know-how, and professionalism and continue to maintain and develop traditional areas of economic activity (Department of Youth, 2003).

The National Youth Policy recognises the need to ‘provide a broad holistic approach that incorporates planned curriculum and structured programmes in life skills. For example, leadership training, self esteem, interpersonal relationships, motivation, communication skills, health and sex education, special needs education, physical education and sports co-ordinated activities with national codes, performing and visual arts including traditional culture, vocational training, spiritual development, music and practical skills training in all areas of economic activity such as trades, agriculture, marine, horticulture and forestry development. The policy identified the following sectors as particularly requiring Government consideration when developing policies and strategies: education and training, youth leadership, labour force participation, teenage pregnancy, research, youth gangs, alcohol and drug abuse, sports and recreation, and youth and crime.

3.2 Emigration

Most people who leave the Cook Islands are young people, less than 35 years old. Of the people who left between 1996 and 2001, 50 per cent were aged between 15 and 34, and another 30 per cent were children under the age of 14. There were equal numbers of male and female migrants (SPC, 2004). Most went to New Zealand.

Most of the 15-19 year olds seek education or employment overseas. People 20 years and older often include parents moving with their children, and this whole family type of migration has reportedly increased since 1996. This movement of people reflects their perception of opportunities in the Cook Islands. Although young people are especially mobile, some do not stay away long. Although education facilities have grown in the Cook Islands, going overseas for a few years is a necessary step for many young people in order to access a wider range, and often higher standards, of vocational training or tertiary education.
On their return to the Cook Islands, however, many outer island youth get no closer to home than Rarotonga, where skilled paid jobs are concentrated. Returning home can also be expensive. Some people manage to return nevertheless, drawn by family ties and island pride. As well, Cook Island family ties keep people in contact with their families back home, however far away they may be.

3.3 Education and training

It is difficult to say how many teenagers attend school. The 1998 Rarotonga Household Income and Expenditure Survey found that most 15-19 year-olds on Rarotonga were full-time students. Figure 6, in the previous chapter, however suggests that the legal requirement for children to remain at school until the age of 15 is not strictly enforced and that many teenagers over 15 have left school. Many others, however, attend school overseas. There is a strong attraction for Cook Island students to education institutions in New Zealand. In 1998, the Cook Islands spent approximately $1100 per student at all levels of the school system, compared with an average of $3700 in New Zealand (Catherwood et al., 2002).
Post-secondary education is available through several government institutions: the Cook Islands Teachers College, the Rarotonga Hospital Nurses Training School, the Hospitality and Tourism Training Centre, the Trades Training Centre, the University of the South Pacific Extension Centre, and the Public Service Commission. Non-formal education is provided by various NGO agencies, but there is no data available on the types of programmes that are run or the number of participants. Enrolments have increased at the University of the South Pacific (USP) Centre, from 150 in 202 to 737 in 2003. The USP Centre also provides summer school courses for outer island students, especially in mathematics and English.

Students at recognised training institutions take NZQA approved courses with the assistance of the New Zealand Open Polytechnic. NZQA sets standards for qualifications in secondary schools and post secondary school institutions and provides all qualifications with a purpose and relationship to each other.

<table>
<thead>
<tr>
<th>In Rarotonga</th>
<th>Overseas</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of the South Pacific, USP Centre, Rarotonga</td>
<td>University of the South Pacific, Fiji, Samoa and Vanuatu campuses</td>
</tr>
<tr>
<td>Te Mato Tupuranga Small Business Centre (SBC)</td>
<td>Fiji School of Medicine, Suva, Fiji</td>
</tr>
<tr>
<td>Tourism Training and Hospitality Centres</td>
<td>Brigham Young University, Hawaii</td>
</tr>
<tr>
<td>Nursing School</td>
<td>University of Hawaii</td>
</tr>
<tr>
<td>Cook Islands Teacher Training College</td>
<td>Others, mostly in New Zealand and Australia</td>
</tr>
<tr>
<td>Human Resources Development Training Unit</td>
<td></td>
</tr>
<tr>
<td>Private companies</td>
<td></td>
</tr>
</tbody>
</table>

Source: CEDAW Report, in draft

The Cook Islands Training Needs Survey, 2002, found there was a need to improve basic skills of literacy, numeracy and other important generic skills. The survey identified the following specific needs for youth:

- Bridging courses for young people who have dropped out of school and have limited skills;
- Skill development so that young people can get access to employment;
- Development of skills in English, since most correspondence or distance education courses are in English, and English is the language generally needed for workplace communication and upgrading skills and qualifications;
- Technical and vocational education, especially in trades such as carpentry, building trades, electrical, refrigeration and air conditioning, plumbing and gas fitting, mechanical engineering, motor mechanics, and the textile industry, including machinists;
• Training in Cook Islands cultural crafts, including weaving, carving wood and pearl shells, making of baskets, traditional cultural artefacts and *ei* (flower garlands);

• Training in cultural performance and performing arts, including dance, song, drumming, music-making;

• Extension of post-school education and distance education to young people on the outer islands;

• Coordination of all formal tertiary educational provision in the Cook Islands through the NZ National Qualifications Framework

Although the Government is encouraging as many students as possible to study within the country, scholarships for people to study abroad are available through the Government from both national resources and donor support. There is a growing number of mature-age students doing graduate studies. Scholarships for graduate studies are mostly in New Zealand or at the USP campuses in Fiji, Samoa or Vanuatu. Of 23 scholarships offered by New Zealand tertiary institutions in 2003, however, only nine were allocated because there were not enough applicants with sufficiently good examination results. Students who qualify but miss out on a full scholarship can get a partial one through the Department of National Human Resource Development. The Government has a policy to provide training, and scholarships to an equal number of males and females.

3.3.1 Facilities for disabled young people

The Creative Centre on Rarotonga was established on a part-time basis in 2000 to address the lack of services for adults over the age of 16. The Centre provides adults with learning disabilities an opportunity to develop creative skills, life skills, to socialise and to stimulate their learning. The Centre is funded partly by the Ministry of Health and NZAID.

3.4 Jobs and other livelihoods

There is a growing effort to tailor the types of education and vocational training available in the Cook Islands to the types of livelihoods that are available there. Emphasis has traditionally been given to academic skills, but there is an appreciation that most employment opportunities for young people will be in tourism, agriculture, the pearl industry and other marine-based enterprises. There is further potential for development in other areas such as music, art, the performing arts and sports.

The Cook Islands has produced many leading sports people and the potential is being recognised to expand both leisure and livelihood opportunities in sports. Private sponsors, local clubs and the Cook Islands Sports and National Olympic Committee (CISNOC) are assisting in the development of soccer, league, rugby, basketball, netball, softball, touch rugby, sevens rugby, athletics, tennis, golf, volleyball, martial arts, and canoeing. There is also growing participation in boardsailing, kayaking, *vaka* sailing, handball and BMX bike riding.

Labour force participation is generally lower for young women than for young men. This gap is widest in the Northern Group islands where women are mostly engaged in home duties. Of people who have paid jobs, young men are concentrated in the social and personnel services sector while young women are found in service sectors such as retail trade, accommodation and hospitality related industries.
There is no unemployment benefit paid in the Cook Islands. People not in paid employment are assumed to be working in subsistence. In practice, many unemployed Cook Islanders migrate to New Zealand where they find either work or welfare support.

The Cook Islands Workers Association (CIWA) together with the Ministry of Internal Affairs has developed information brochures on the fundamental employment and human rights of young people in line with International Core Labour Standards and the Cook Islands labour laws. CIWA also serves as the focal point for young people in the mediation and arbitration of workplace dispute or grievances.

3.5 Social development

In regard to social development, the National Youth Policy is most concerned to reduce the involvement of young people in crime and anti-social behavior. Reported crimes are concentrated in this age-group. There is particular concern with alcohol abuse and associated violence and social disorder, drug and tobacco use; and sexual activity, especially resulting in teenage pregnancies or STD infection. The Policy recognises that issues affecting young people should be dealt with not only by the criminal justice system but also through the community. Underage drinking, for example, should be addressed from both law enforcement and health perspectives, and preventative measures should focus on education.

Another concern addressed by the Policy is the limited facilities to provide for effective youth leadership training. The Policy recognised the need to develop and promote effective leadership training programmes and activities for all youth leaders in Rarotonga and the outer islands that focus on skills such as management, communication, project planning, report writing, budgeting and income generating projects, as well as developing self-esteem and improving counseling, policy planning and decision-making skills. In community consultations that led to the development of the policy, there was a clear message from young people that they wanted a way to express their concerns and issues to the government. The Policy recommends the revival of the Cook Islands National Youth Council (CINYC) to facilitate and co-ordinate activities on behalf of young people throughout the country. As well, youth want more opportunities to participate in high-level national discussions, as through, for example, the Youth Parliamentary Forum which exposes young people to opportunities, strategies and the political decision-making processes at the highest level of Government.

3.6 Spirituality and culture

Spirituality and culture have traditionally been the focus of youth development programmes in the Cook Islands, and are considered still particularly relevant. The church and family play big roles in the development of young people.

Many young people are members of church youth groups, although organizers find there is more interest shown in activities other than Bible study, such as sports and leadership programmes. There is concern that young people are becoming isolated from the churches and the locally supportive environment they have traditionally provided, through general disillusionment, family fragmentation,
commercial influences including alcohol and tobacco use, and sports and other social commitments. ‘The solidarity and continuity of the spiritual development of young people is sadly declining to what is perceived to be the result of western influence, lack of positive leadership, a changing environment and a growing awareness and exposure to other influences that impact on the lives of young people,’ (Department of Youth, 2003).

The Policy noted that language and culture play a significant part in the development of young people, yet were not sufficiently promoted in the education system. There is concern that the Cook Islands Maori language is not being properly maintained. There is also concern that performance levels and achievements of young people nation-wide are dropping, largely because of a declining sense of cultural identity. Young people eagerly participate in cultural events where there is pride and mana in representing one’s own island, and an opportunity to express themselves and show off their talents. Even so, culture was becoming narrowly redefined as music and dance, and little attention was being given to broader aspects of Cook Island heritage, lifestyle, and history. The Policy recommended that more workshops be conducted for young people on cultural development, cultural exhibitions be organized, publications made on Cook Island history and culture, and an overall expansion of programmes for youth on carving, tattooing, weaving, dance, language and cultural research.

3.7 Youth health

The health status of young people in the Cook Island has progressively improved over the past twenty-five years as a result of improvement to infrastructure, sanitation, nutrition and universal participation in village child clinics. The main causes of youth deaths now are accidents, infectious diseases, physical injuries, acquired disabilities and substance abuse.

Figure 18. Rarotonga Hospital accident admissions, by age and sex, 1998-2002

Youth account for a large proportion of hospital admissions from accidents.

Source: Ministry of Health
Figure 19. Youths admitted to Rarotonga Hospital for injuries, by age, sex and cause, 1998-2002

Injuries are by far the main cause of youth death and illness in the Cook Islands, particularly for young men and largely because of motor cycle accidents.

Source: Ministry of Health

3.7.1 Accidents and alcohol

Many accidents are associated with alcohol use, and a high proportion of young people drink alcohol, especially on Rarotonga. A study conducted in 1999 by the Public Health Department of knowledge, attitudes and behaviour related to alcohol consumption among Cook Island secondary school students found that even though students knew about the physical and psychological effects of alcohol, this did not influence their attitudes and drinking behaviour. The study found, surprisingly, that young women drink more than males, and males drink beer while females drink spirits. A high percentage of the students surveyed (91 per cent of males and 85 per cent of females) started drinking before the age of 16, girls usually starting earlier than boys. Underage drinkers are usually supplied by older friends who can legally buy it and drink at parties and friends’ places. Around half of the students surveyed reported they had been drunk in the past six months, and many regularly drank heavily.

Another survey found that a very high proportion (75 per cent) of young people regularly smoke, including 71 per cent of young women in Rarotonga. Of those who smoke, 31 per cent said started between ages of 13 and 14, but around one quarter (26 per cent) began before the age of 11. Marijuana is also smoked by young people. Although there is very little other information about illegal drug use, health and youth workers believe there is very little if any use of drugs other than marijuana.

3.7.2 Unprotected sex

Teenage pregnancy continues to be a major concern, although statistics have shown a gradual decline in numbers since 1998. The Cook Islands still has the highest teenage (ie 15-19 year-olds) fertility rate in the Pacific island region, of 47/1000 (SPC, 2004). The small decline may be due to health awareness and sex education programmes, but many young people are still evidently involved in unprotected sex. As well as the risk of unplanned pregnancy, this brings the risk of sexually transmitted infections (STI), including HIV and AIDS. Fortunately, as yet there have been no reported cases of HIV/AIDS in the Cook Islands, and the reported incidence of STI is low.
3.7.3 Mental health

The mental health of young people is another concern. The youth suicide rate is moderately high. Are Pa Taunga, the Cook Islands Mental Health and Well-Being Centre, was established in 1998 and provides services free of charge. Ministry of Health makes a contribution to salaries and operating costs. The Ministry of Health, Police, Probation Services, Social Welfare and Prison Services refer people needing assistance with mental problems to the Centre. There are no similar facilities for people in outer islands.

3.7.4 Addressing health concerns

Given the significance of non-communicable diseases in Cook Islands, especially those associated with unhealthy lifestyles and poor nutrition, the ministries of Health and Youth are working together with Red Cross and other service agencies to promote healthy lifestyles among young people. These activities aim to encourage young people to take better care of themselves with regards to healthy eating habits, personal hygiene, protective measure against unsafe sex and HIV/AIDS, substance, alcohol and drug abuse. All Sporting codes involving young people are being encouraged to ensure that safety measures are put in place to protect players from injuries and that they attain a standard level of fitness prior to participating in sporting activities.

3.8 Conclusion

Young people in the Cook Islands live in a particularly mobile society. Many leave their island for Rarotonga, or travel overseas for education or work. Education and training opportunities are expanding in the Cook Islands, but local institutions poorly compete with those overseas in the quality and variety of qualifications they offer. Despite the shortage of labour in the Cook Islands, many young people have limited employment opportunities because they lack necessary skills. Young people have high rates of substance abuse, particularly alcohol. This contributes to the other main risks to their health and well-being, in particular risks from accidents and unprotected sex.
PART 4

THE SITUATION OF WOMEN
4.1 Introduction

4.1.1 The general advancement of women

In Cook Islands tradition, women had a high status and enjoyed equality with men in important respects. Until quite recently, men had better access to modern forms of wealth and status, such as higher education and paid work, but over the past decade the gender gap has narrowed in these respects also. The reasons for this progress include changing attitudes and expectations, economic change, and government and NGO programmes that have improved conditions for women. Another factor, discussed below, is lowered fertility, which also reflects the changing economy and wider choices for women, particularly in the rapidly changing economic and social conditions since 1996.

Since the mid-1990s, the Cook Islands National Council of Women and the government’s Gender and Development Programme have worked together on a common agenda for the advancement of women, which was defined by the 1995 National Policy for Women. The main items on this agenda have been economic empowerment, social development, mechanisms to promote the advancement of women, leadership and decision-making, and natural resource management. Since then, a lot of interest and effort has gone towards describing progress on CEDAW, which was the subject of the 2002 National Conference for Women. Over time, new issues have arisen. It is widely accepted that the National Policy now needs review, so that these new issues receive necessary attention. They include the impacts of economic change on women, youth and children, new cultural sensitivities regarding these changes, attaining decision-making capacity, and wider educational opportunities for women.

An important issue still is the equitable distribution of opportunities for women throughout the country. As well as the National Policy, a Sub-Regional Action Plan 1998-2000 was drawn up at the biennial National Conference for Women in 1998, to ensure that women in all parts of the Cook Islands benefited and progressed. Under this plan, separate programmes were drawn up for Rarotonga, the Southern and Northern Cooks. A review conducted in 2002 found that the Rarotonga programme had made most progress (Table 13).

- On Rarotonga, there was still a need for equipment for small businesses; to train executives of women’s organisations to better work together and in policy making, development and analysis; and for public awareness programmes on social development issues.
- In the Northern Group, more work was needed on market development; training in pearl farming; training in first aid; training in legal literacy; reducing community acceptance of gender violence and child neglect; gender sensitisation; voter education; and encouragement of women’s participation in public meetings.
- In the Southern Group, more effort was needed to reduce violence and alcohol abuse, and boost women’s participation in community and island affairs (Gillespie, 2003).
Table 12. Progress made on the Cook Islands Sub-Regional Action Plan 1998-2000

<table>
<thead>
<tr>
<th>Economic empowerment</th>
<th>Rarotonga</th>
<th>Northern Cooks</th>
<th>Southern Cooks</th>
</tr>
</thead>
<tbody>
<tr>
<td>· Training conducted on business management, dance lessons.</td>
<td>· Some development of markets on Rarotonga and Aitutaki;</td>
<td>· Training conducted in horticulture and livestock management, marine harvest, and craft skills.</td>
<td></td>
</tr>
<tr>
<td>· Some training conducted on arts and crafts, handicraft quality control and pricing; and horticulture grafting, propagation and planting.</td>
<td>· Some training conducted on fish handling and processing; quality and pricing for handicrafts.</td>
<td>· Some training conducted in home-stay tourism;</td>
<td></td>
</tr>
<tr>
<td>· Marketing improved for local goods, fresh produce and clothing, especially through the Punanga Nui Market.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Social development</th>
<th>Rarotonga</th>
<th>Northern Cooks</th>
<th>Southern Cooks</th>
</tr>
</thead>
<tbody>
<tr>
<td>· Training conducted on legal literacy/human rights, gender and good governance, and first aid.</td>
<td>· Some improvement of school facilities;</td>
<td>· Community health education conducted;</td>
<td></td>
</tr>
<tr>
<td>· Some training conducted on remedial education; life skills; counselling; antenatal health; domestic and sexual violence; Maori language, expressive writing and oral history; health and nutrition; fitness, diet and weight control.</td>
<td>· Some training conducted on parenting and teacher in-service training.</td>
<td>· Some training conducted on sex education, child abuse and truancy,</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>· Water tanks and pumps installed;</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>· Some island roads sealed.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>· Workshops conducted on alcohol and violence.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mechanisms to promote the advancement of women</th>
<th>Rarotonga</th>
<th>Northern Cooks</th>
<th>Southern Cooks</th>
</tr>
</thead>
<tbody>
<tr>
<td>· Some training provided on project development and management; skills for finding employment.</td>
<td>· Some training conducted on project management and administration.</td>
<td>· Training conducted on confidence and self-esteem;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>· Disaster management plans developed for each Island Council.</td>
<td>· Women’s Centres built, completed or equipped.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Leadership and decision making</th>
<th>Rarotonga</th>
<th>Northern Cooks</th>
<th>Southern Cooks</th>
</tr>
</thead>
<tbody>
<tr>
<td>· Some training provided on building leadership capacity; good governance; public speaking and public relations.</td>
<td>· Some training conducted on leadership and decision making.</td>
<td>· Education conducted on voting procedures and legal literacy.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Natural resources</th>
<th>Rarotonga</th>
<th>Northern Cooks</th>
<th>Southern Cooks</th>
</tr>
</thead>
<tbody>
<tr>
<td>· Some training provided on water conservation and tank building; waste recycling and compost making; environment conservation; reduction of pollution and control of dogs.</td>
<td>· Some action taken to ban disposable nappies; reconstruct sea toilets; improve water catchments; and increase tree planting.</td>
<td>· Training conducted on conservation.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>· Rau (protected areas) established.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>· Tree nurseries established and women provided with equipment;</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>· Management of wandering animals improved.</td>
<td></td>
</tr>
</tbody>
</table>

Source: Gillespie, 2003
4.1.2 Decline in fertility

The fertility rate in the Cook Islands decreased quite sharply over the past ten years. There has been:

- A decrease in the average number of births that women have in their lifetimes,
- A rise in the average age at which women bear children.

Since the early 1990s, the number of births has dropped from around 500 to less than 300 a year. The biggest reduction has been in births to women aged less than 25 (although births to girls under 16 are poorly counted). The main child-bearing age is now 25 to 34 years, but even this age-group has fewer births than before. Very few women give birth after the age of 40.

**Figure 20. Total fertility rate (TFR), Cook Islands, 1992-2002**

The total fertility rate (TFR) measures the average number of children that women have over their lifetime. Since 1991, the TFR for Cook Islands fell almost one third, from around 3.8 to 2.7

*Source: SPC, 2004*

**Figure 21. Mean age of child-bearing (MAC), Cook Islands, 1992-2002**

Mean Age of Child-bearing (MAC) measures the average age at which women bear their children. Since 1991, the MAC rose from around 27 to 27.8 years. While Cook Island women now generally start child-bearing at a later age, they also now have fewer births in their late 30s and 40s. This indicates that their fertility is mostly controlled by contraceptives and sterilisation.

*Source: SPC, 2004*
This drop in fertility has happened because:

- The high migration out of the country over the past decade has mostly been young people. Many Cook Island women aged less than 25 who give birth now do so overseas.
- Economic change in Cook Islands has affected things like the cost of living, the availability of jobs, and the types of opportunities available to women, all of which influence the decisions people make about bearing children.
- There are good family planning services throughout the country, freely available to people of all ages.

4.2 Women’s health

4.2.1 Main causes of illness and death

There is a fairly good standard of health in Cook Islands, and little difference by gender in the causes of illness or death. Life expectancy at birth is 74.3 years for women and 68.0 years for men (SPC, 2004), on par with many developed countries around the world.

For both women and men over the age of 25, the main causes of death are heart disease and hypertension; cancer, pneumonia and diabetes. Infectious diseases are a minor cause of death or sickness, although there are occasional out-breaks, such as measles and dengue in 1997.

Women account for 57 per cent of hospital admissions. The main causes of women’s hospitalisation are childbirth and complications of pregnancy, heart disease, and injuries.
Table 13. Ten main causes of ill-health for adults over 25 years, by sex, 2001-2002

<table>
<thead>
<tr>
<th>FEMALE</th>
<th>% hospital admissions for adult women</th>
<th>Rate per 10,000 pop.</th>
<th>MALE</th>
<th>% hospital admissions for adult men</th>
<th>Rate per 10,000 pop.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childbirth and complications of pregnancy</td>
<td>40.9</td>
<td>776</td>
<td>Injuries, poisoning &amp; external conditions</td>
<td>47.3</td>
<td>878</td>
</tr>
<tr>
<td>Circulatory system disease</td>
<td>18.1</td>
<td>567</td>
<td>Circulatory system disease</td>
<td>20.2</td>
<td>713</td>
</tr>
<tr>
<td>Injuries, poisoning &amp; external conditions</td>
<td>30.1</td>
<td>465</td>
<td>Respiratory disease</td>
<td>18.5</td>
<td>285</td>
</tr>
<tr>
<td>Genitourinary disease</td>
<td>14.9</td>
<td>341</td>
<td>Digestive system disease</td>
<td>11.7</td>
<td>275</td>
</tr>
<tr>
<td>Respiratory disease</td>
<td>20.3</td>
<td>306</td>
<td>Endocrine, nutritional diseases &amp; immunity disorders</td>
<td>7.9</td>
<td>273</td>
</tr>
<tr>
<td>Infectious &amp; parasitic</td>
<td>16.9</td>
<td>269</td>
<td>Musculoskeletal system disease</td>
<td>6.9</td>
<td>196</td>
</tr>
<tr>
<td>Digestive system disease</td>
<td>11.5</td>
<td>263</td>
<td>Genitourinary disease</td>
<td>4.4</td>
<td>130</td>
</tr>
<tr>
<td>Endocrine, nutritional diseases &amp; immunity disorders</td>
<td>7.2</td>
<td>223</td>
<td>Skin etc disease</td>
<td>5.0</td>
<td>110</td>
</tr>
<tr>
<td>Symptoms, signs &amp; ill-defined conditions</td>
<td>6.6</td>
<td>132</td>
<td>Mental disorders</td>
<td>6.6</td>
<td>98</td>
</tr>
<tr>
<td>Neoplasms</td>
<td>2.6</td>
<td>85</td>
<td>Symptoms, signs &amp; ill-defined conditions</td>
<td>5.0</td>
<td>81</td>
</tr>
</tbody>
</table>

Source: Ministry of Health, Annual Statistical Bulletins, 2001-2002

4.2.2 Pregnancy and childbirth

There is a well-developed Maternal and Child health programme. Public health nurses staff the Health Clinics and are involved in monitoring infant, child and maternal health and immunisation. The total fertility rate has fallen to 2.75, meaning that, on average, Cook Island women now have fewer than three live births in their lifetime. Pregnancy and child-birth have become a fairly low health risk. The maternal mortality rate is very low although in this small population, where even one death can greatly affect the rate, it appears to fluctuate strongly. Around three-quarters of all pregnancy-related hospital admissions are for normal deliveries. Almost all women receive full prenatal care. Most higher-level health services are on Rarotonga, and there inevitably is less access to specialised services in the small communities of the outer islands.

The contraceptive prevalence rate is moderately high, at around 46 to 53 per cent of adult women. Contraceptives are freely available through the government health service to anyone who wants them. Abortion is illegal in Cook Islands and, given social values and the good access to contraceptives, possibly quite rare. Where an abortion is necessary to protect the woman’s life or the pregnancy was caused by incest or abuse, the hospitals provide counselling and referral to New Zealand, at the woman’s
cost. The Ministry of Health estimates about five terminations are conducted each year but, as people are so mobile, there is no way of knowing how many women go to New Zealand for abortions on their own account (CEDAW, 2003).

4.2.3 ‘Lifestyle’ diseases

Circulatory system and other non-communicable diseases are becoming more prevalent, particularly heart disease, hypertension and diabetes. This is probably related to changing diets and obesity, and affects men and women fairly equally. There are, however, more old women than old men in the population and, as degenerative diseases increase with age, more women with these diseases than men.

4.2.4 Injuries and poisoning

Vehicle accidents are the most common cause of injury for women and men, but poisoning is also a significant cause. Few women or men are hospitalised for assault but these figures are often misleading, for an assault may be recorded as another type of injury, perhaps a fall. Drowning is not common in Cook Islands.

<table>
<thead>
<tr>
<th>Causes of injuries in adult women and men</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65+</th>
</tr>
</thead>
<tbody>
<tr>
<td>M</td>
<td>F</td>
<td>M</td>
<td>F</td>
<td>M</td>
</tr>
<tr>
<td>Vehicle accidents</td>
<td>45</td>
<td>26</td>
<td>28</td>
<td>14</td>
</tr>
<tr>
<td>Poisoning</td>
<td>39</td>
<td>20</td>
<td>30</td>
<td>18</td>
</tr>
<tr>
<td>Drowning</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Falls</td>
<td>11</td>
<td>6</td>
<td>10</td>
<td>3</td>
</tr>
<tr>
<td>Assault</td>
<td>5</td>
<td>1</td>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td>Others</td>
<td>16</td>
<td>9</td>
<td>13</td>
<td>6</td>
</tr>
</tbody>
</table>

Source: Ministry of Health, Annual Statistical Bulletins, 1996-2003

4.2.5 Obesity and diet

Linked to the rise in diabetes and heart disease are changing food habits and lower levels of activity. There is still a good level of home-produced traditional foods, but also increasing consumption of low quality food, little access to land for food gardening for people who are not land-owners, decreasing interest in home gardening, and visible signs of stress on land and marine resources (National Policy on Women, 1995). A large number of adults, particularly women, are obese.

Alcohol and tobacco are quite heavily used in Cook Islands, more by men but also by women. Cook Island residents consume approximately 6 litres of alcohol per capita per year, compared with approximately one litre per year in Samoa and Tonga (Ministry of Health, 1999)
A 1998 survey in Rarotonga found that households spent an average of 1.44 per cent of all expenditure on tobacco and another 1.72 per cent on alcohol. This may not sound like much, but together it was just less than the total household spending on clothing and footwear (3.56 per cent); almost double that spent on church contributions and leisure activities; almost three times that spent on healthy food such as fruit; almost five times that spent on education; and almost six times the average household spending on health care. Of course, spending on tobacco and alcohol is not evenly distributed. Some households spend much less and some much more.

The high and rising consumption of alcohol is linked to its ready availability, especially on Rarotonga. Alcohol is widely advertised and the Sale of Liquor Act is not effectively policed in regard to underage drinking or sales to intoxicated people. ‘Binge’ drinking is common, especially on the weekends. Alcohol and tobacco use contribute to motor vehicle deaths and cardiovascular diseases. They also contribute to social problems which affect all sectors of community, including crimes such as burglary, robbery, manslaughter, and rape, and associated family problems. Alcohol use is closely linked to domestic and sexual violence.

### 4.2.6 Domestic and sexual violence

The issue of domestic and sexual violence is still very sensitive and few women will speak openly about it. After Punanga Tauturu Inc (PTI), the Cook Islands Women’s Counselling Centre, spoke out about this violence and the apathy of government officials in dealing with it, government agencies have taken the issue more seriously. The New Zealand Police has been training the Cook Island Police on how to better deal with family violence, and a ‘no-drop’ policy has been established, although not yet uniformly applied. PTI provides counselling services, information about using the legal system, police procedures and medical examinations, and support and assistance when going through Police, medical and court systems. People are coming to understand violence is not a private matter and are slowly coming to talk about it more openly. PTI has also requested the government to review legislation relating to sexual crimes, to reconsider penalties, and to widen the legal definition of rape.

There is still no refuge for women who need protection from violence in their family, although PTI has made ad hoc arrangements. Despite the ‘no-drop’ policy, women still withdraw cases, especially in small communities where “police and men are friends.” Many cases are not brought to Court, and the community often turns a blind eye. The Police are working to improve their capacity to monitor and collate data on this problem.

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2 The ‘no-drop’ policy means that once a domestic violence complaint is lodged with the Police, it cannot be withdrawn and will proceed to Court. This is to prevent women from being further intimidated and forced to withdraw their complaint.
4.3 Education

Education is a fundamental aspect of economic empowerment. School attainment largely defines opportunities for paid work – along with legal provisions for gender equity – and access to vocational, business and other training has a great influence on the types of livelihood opportunities that are available to women.

Due to the well-established policy in the Cook Islands of compulsory school attendance, men and women have very similar levels of formal education. Reported adult literacy levels are very high, at around 96 per cent of both men and women, but these figures are derived from censuses, the number of years people have spent at primary school grades 1 to 3, not from real surveys of effective literacy.

The gender balance in formal education is very close. The main differences exist at the extreme edges of the scale. Although these groups represent very small percentages of the adult population, there are around twice as many women with no education, and around twice as many men university graduates.

Source: 2001 Census

The Cook Islands Training Needs Survey, 2002, found a need to increase opportunities for adult education, particularly to improve basic skills of literacy, numeracy and other important generic skills. The survey identified the following specific needs for women:

- Promotion of well-being through self esteem, caring for oneself with respect to health, hygiene, first aid, etc;
- Counselling skills, including conflict resolution, negotiation, facilitation; family violence prevention;
- Basic and advanced literacy skills in English and Cook Islands Maori;
- Self-employment and livelihood skills, such as craft, plant cultivation, traditional cultural skills, jewellery making; small business management; computer skills; food industry and catering; performance;
* Awareness raising, including gender analysis skills; media skills; and exchange of information;
* Emergency & disaster preparedness (eg. training in life support, in association with Red Cross);
* Training and management skills, including for women working with NGOs

### 4.4 Livelihoods

Information about gender differences in economic activity comes from censuses and special surveys. Census information has always downplayed women’s work by defining a large part of their domestic activities as ‘uneconomic.’ Men doing similar activities are more often described as being engaged in village agriculture (ie ‘economically active’) or ‘unemployed’ (another category of ‘economically active’). Men also have greater access to paid work. A Time Use Survey conducted in 1998 as part of Rarotonga Household Income and Expenditure Survey however found no significant gender difference in the time spent on any particular activity. Women spend slightly more time on caring for children and other household members. Domestic work is still the domain of women (food preparation, housework, shopping, repairs to house). Men spend slightly more time on paid activities.

![Figure 24. Employment, by age and sex, 2001](image)

According to the census, men are more economically active than women at all ages, largely because of access to paid jobs. But a good part of women’s unpaid work is not counted.

Source: 2001 Census

Since the mid 1990s, particularly the economic reforms in 1996, a lot of opportunities have opened up for women. Even though the public service is now much smaller, there are more women working at senior levels within it. ‘One of the least expected outcomes of the government Reform in 1996 has been the breaking of the ‘glass ceiling’ that inhibited the rise of women into senior levels of government’ (Kingston, 1999). Women’s share of paid employment has increased, especially in the service sector. The number of women running small businesses has also grown. The Small Business Enterprise
Centre, which was established in 1998 to promote small businesses, assisted in the start-up of 89 businesses from 1998 to 2002, of which 58 (65 per cent) were owned by women. More attention is being given to recognising the economic contributions of women. The Cook Islands Business and Professional Women’s Organisation helped to establish the Cook Islands Woman of the Year awards, to acknowledge women’s work and other activities. Even so, as Figure 7 shows, there is still a significant gender difference in paid employment.

The pattern of paid employment has changed since 1996. Fewer people work for the public service. More people work in private businesses and in religious organisations. Fewer people describe themselves as ‘self-employed.’ The gender gap has narrowed slightly.

Source: Censuses, 1996 and 2001
Another aspect of the gender gap is income. As Figure 8 shows, more women are in the lowest income bracket than men. There is a minimum wage for all workers in Cook Islands of $4.00 per hour, and this evens things out a little. But men generally earn more because more of them work at senior levels.

One difficulty for working mothers, especially on Rarotonga, is the very few child care facilities available. Most rely on family members but there is not always someone available. Many working women on Rarotonga import workers from Fiji to be nannies because of the labour shortage on the island. Child care facilities are not licensed and therefore there are no data on the availability of child care. Meanwhile, access to paid maternity leave is being widened. The Maternity Protection Act which will soon be in place, in accordance with ILO Convention, will guarantee paid maternity leave, make provision for paternity leave, and make special provision for first-time mothers without a spouse, by providing for their mother to take paid leave.

Areas of business activity that attract many women are handicraft production, agricultural and marine products, and tourism. Concerns often expressed at the National Women’s Conferences include the weak marketing systems for handicrafts sold in Rarotonga, the difficulty of ensuring a fair price to the producers, and problems of maintaining quality. Another concern has been the difficulty in accessing credit, especially for very small loans. Besides the commercial banks, a number of credit schemes operate, with variable success.
4.5 Family responsibilities

Even with their increased involvement in paid work, most women remain responsible for household affairs. With rapid economic and social change in the Cook Islands, the number of women-headed households is slowly growing. This partly reflects the high mobility of people, of whom many go to work in New Zealand. It also reflects the ageing population and the growing number of older women in the population.

| Table 15. Female-headed households, 1996 and 2001, as a percentage of all households |
|---------------------------------|-----------------|-----------------|
|                                 | 1996            | 2001            |
| Total Cook Islands              | 22.7            | 24.0            |
| Rarotonga                        | 24.4            | 25.5            |
| Northern Group                  | 12.7            | 18.7            |
| Southern Group                  | 23.1            | 22.2            |

Source: Censuses, 1996 and 2001

Welfare payments form a larger part of household incomes, on average, than remittances sent by relatives overseas. On average, welfare payments made up 5 per cent of all household income on Rarotonga in 1998, and are an even more significant source of cash on the outer islands where fewer people are in paid jobs. These payments are scheduled to phase out by 2010 as the Superannuation Scheme takes over. Half of all women over the age of 15 receive welfare payments of some kind. More women than men receive child benefits, old age pensions and destitute or infirm allowances. Slightly more men than women receive superannuation, which reflects their greater involvement in paid employment.

| Table 16. Percent of adults receiving welfare payments, by sex, 2000 |
|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|
|                   | None              | Child benefit     | Old age pension   | Destitute or infirm | Superannuation    | War pension       | Total             |
| Female            | 51.5              | 36.6              | 14.7              | 2.3                | 3.5               | 0.1               | 121.6             |
| Male              | 66.5              | 3.0               | 11.7              | 1.6                | 3.9               | 0.1               | 100.0             |
| Total             | 54.8              | 16.2              | 11.9              | 1.7                | 3.4               | 0.1               | 100.0             |

Source: 2001 Census
4.6 Institutional mechanisms to promote the interests of women

There is a well developed network of government and NGO organisations in the Cook Islands that are working to improve conditions for women.

The Cook Islands National Council of Women was founded in 1984 as the first serious attempt to unite women’s NGOs, although it never succeeded in this coordination because it lacked the capacity to do so (Kingston, 1995). Not all women’s organisations are affiliated to the CINCW. The Council draws together the Island and Vaka Women’s Associations and sponsors the bi-annual National Women’s Conference.

The Division of Women’s Affairs was established in 1993. It is now named the Gender and Development Division and housed within the Ministry of Internal Affairs and Social Services. Its vision is 'the total development of women," and the focus of its activities has moved from those that involve only women to a broader agenda involving the whole community irrespective of sex or age. It is working closely with CINCW and other organisations to implement the National Policy for Women.

As well as active island and church associations for women, several NGOs are particularly involved in promoting the interests of women, including:

- Punanga Tauturu Inc – the Cook Islands Women’s Counselling Centre – is working to eliminate violence against women and all forms of discrimination against them. Together with the Regional
- Rights Resources Team (RRRT) PTI is conducting legal literacy training throughout the country.
- The Cook Islands Red Cross Society promotes the human rights of women, children, the elderly and other disadvantaged groups.
- The Cook Islands Business and Professional Women’s Organisation is promoting women’s interests in several respects, including lobbying to start a legal aid fund for civil cases.

Efforts are being made by these bodies to further strengthen the national machinery to support women’s development, to integrate a gender perspective into legislation and public policies, and to ensure that progress is made on the CEDAW agenda.

4.7 Women’s involvement in national and island politics

Although women have equal voting rights as men, despite the traditional acceptance of women as leaders, and despite their active involvement in community and church affairs, women are still under-represented at the highest levels of national decision-making.

As traditional leaders, women now hold five of the six chiefly titles on Rarotonga. The House of Ariki, the forum for hereditary chiefs, considers all matters relating to the welfare of Cook Island people that are submitted to Parliament and advise parliament on land use and traditional customs. In 2003, women held 10 titles, men held eight, and six are vacant. Since its establishment in 1966, four women and two men have held the position of President of the House of Ariki (CEDAW Draft Report, 2003)
As modern leaders, women have been less prominent and more inclined to defer to men. This situation is changing quickly. It is now not considered unusual for women to put themselves forward for election, and this signifies an enormous increase in self-esteem, confidence and capability by women (CEDAW Draft, 2003). Even so, the gender gap has not closed. Often the situation of women in positions of power becomes complicated by the expectation that catering for their other roles as women will take precedence over their real work. Women are more likely to be able to make decisions in the ‘social’ arena than in the ‘economic’ or ‘political’ decision-making areas’ (Gillespie, 2003). In 2003, women held only nine out of a total of 41 positions on government boards and committees (Table 17). The number of women candidates in the general elections is slowly but surely rising. In 1999, 13 women stood for parliament and two were elected (Table 18).

Table 17. Women Directors on Government Boards and Committees

<table>
<thead>
<tr>
<th>Year</th>
<th>Women Heads of Govt Departments and Agencies</th>
<th>Women in Local Government</th>
<th>Women Parliamentarians</th>
</tr>
</thead>
<tbody>
<tr>
<td>1994</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1995</td>
<td>1 (out of 22 ministries)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1998</td>
<td>4 women elected to Vaka Councils, Rarotonga (out of 33 members)</td>
<td>1 (out of 25 members)</td>
<td></td>
</tr>
<tr>
<td>1999</td>
<td>5 (out of 14 ministries)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2002</td>
<td>5 (out of 39 departments and agencies)</td>
<td>4 women elected to Vaka Councils, Rarotonga (out of 33 members)</td>
<td>3 women Island Secretaries</td>
</tr>
</tbody>
</table>

Sources: Kingston, 1999; CEDAW, 2003
Table 18. **Women Candidates in General Elections**

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of women nominated</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>1965 (By-election)</td>
<td>1</td>
<td>1 woman elected</td>
</tr>
<tr>
<td>1983</td>
<td>4</td>
<td>1 woman elected</td>
</tr>
<tr>
<td>1989</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>1994</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>1996 (By-election)</td>
<td>1</td>
<td>1 woman elected</td>
</tr>
<tr>
<td>1999</td>
<td>13</td>
<td>2 women elected</td>
</tr>
</tbody>
</table>


### 4.8 Conclusion

Great progress has been made in the Cook Islands in reducing gender inequalities in terms of access to education, economic opportunities, and a role in decision-making for the community and country. This has been aided by the traditionally high status of women and the strong support provided by government and NGO agencies that promote women’s interests. Economic and social changes are not all beneficial to women, however. Often, their responsibilities have grown as their roles have expanded, and the extended family has dispersed widely through migration to Rarotonga and beyond. The problem of sexual and domestic violence is only now being addressed.
PART 5

THE AGENDA FOR CHANGE
The Cook Islands is signatory to two most important international conventions that protect and advance the status of children and women, namely the Convention on the Rights of the Child (CRC) and the Convention to Eliminate All Forms of Discrimination Against Women (CEDAW). The first national status reports on these conventions are in draft, if overdue. The government and the community have signalled their commitment to the requirements of these conventions in many ways.

Many policies have been developed in the Cook Islands to address particular issues – such as disability – or to provide special support to particular groups, such as youth. But while there is an abundance of studies and planning documents, only few of these policies have been implemented. Among the most successful has been the National Policy for Women. Although this policy is now out-dated and needs to be redesigned, since 1995 it has served to catalyse and coordinate the efforts of government and NGO agencies to improve conditions for women. Other policies, however, have been delayed in their implementation or shelved because government lacks funds to implement them.

Policies, of course, direct only some of the changes that occur. Many of the recent developments in the Cook Islands were unplanned, being the repercussions of programmes narrowly prescribed to adjust the economy. There have been many ramifications on the society of the particularly fast economic and social changes since 1996.

Other changes appear to defy any intentions. The rise in diet-related problems and diseases, for example, can only be exacerbated by the widespread taste for poor quality food. Yet despite school health programmes, school ‘tuck-shops’ freely supply children with junk food and little else. Despite official concern to reduce the transmission of STI and promote healthy lifestyles, many young people evidently engage in unprotected sex and substance abuse. Despite Cook Islanders’ pride in their identity and culture, many young people are growing up with limited facility in their language or appreciation of traditional values.

Over recent decades, many dire predictions have been made about the future of these island communities that are so affected by out-migration, and yet Cook Island families have found ways to maintain themselves across islands and international boundaries. The current high level of out-migration, however, is affecting some outer island communities badly. Even in Rarotonga, the high level of out-migration is a large factor driving the rapid social change. The only thing that seems certain is that the fast pace of social and economic change in the Cook Islands will not soon abate and that this will continue to have both positive and negative consequences on people’s lives there.
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