

**Country Profile on
Disability**

KINGDOM OF TONGA

**March 2002
Japan International Cooperation Agency
Planning and Evaluation Department**

Country Profile on Disability Kingdom of Tonga

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Abbreviations

| | |
|--------|--|
| CBM | Christian Blind Mission |
| CBR | Community-based Rehabilitation |
| FDPA | Fiji Disabled People's Association |
| GDP | Gross Domestic Products |
| GNP | Gross National Products |
| JOCV | Japan Overseas Cooperation Volunteer |
| MHAC | Mental Health Advisory Committee |
| NGO | Non-governmental Organization |
| OJT | On-the-job Training |
| ODP | Open Door Policy |
| PSR | Psycho-Social Rehabilitation |
| RDP | Revolving Door Patients |
| UN | United Nations |
| UNESCO | United Nations Educational, Scientific and Cultural Organization |
| WHO | World Health Organization |

1. Basic Profile

1-1. Basic Indicators

Public Sector Expenditure¹

| | | |
|---|-------|-----------|
| Health (% of GDP) | 13.9% | 1999/2000 |
| Education (% of GNP) | 12.9% | 1999/2000 |
| Social welfare (% of total expenditure) | N/A | |
| Defense (% of GNP) | 2.8% | 1999/2000 |

Population²

| | | |
|-------------------------|---------------|------|
| Population (total) | 99.6 thousand | 1999 |
| % of women | 49.1% | 1999 |
| % of urban population | 37.4% | 1999 |
| Life Expectancy (total) | 70.8 | 1999 |
| Male ¹ | 68.8 | 1999 |
| Female ¹ | 72.9 | 1999 |

Medical Care

| | | |
|-------------------------------------|-------|------|
| Medical care personnel ¹ | | |
| Population/Doctor | 0.319 | 1998 |
| Population/Nurse & midwife | N/A | |

¹ Tonga Statistical Department. Demographic Analysis, 2001.

² World Bank. World Development Indicators 2001

Education

| | | | |
|---|--------|--|------|
| Education system ³ | | | |
| Primary education | 6 year | | |
| Compulsory education | 8 year | | |
| Adult literacy rate ⁴ | | | |
| Male | 98.4% | | 1996 |
| Female | 98.7 | | 1996 |
| Enrollment ratio ⁴ | | | |
| Primary education (Net enrollment ratio) | | | |
| Total | 100% | | 1996 |
| Male | 100% | | 1996 |
| Female | 100% | | 1996 |
| Primary education (Gross enrollment ratio) | | | |
| Total | N/A | | |
| Male | N/A | | |
| Female | N/A | | |
| Secondary education (Net enrollment ratio) | | | |
| Total | 98% | | 1996 |
| Male | N/A | | |
| Female | N/A | | |
| Higher education (Gross enrollment ratio) | | | |
| Total | N/A | | |
| Male | N/A | | |
| Female | N/A | | |

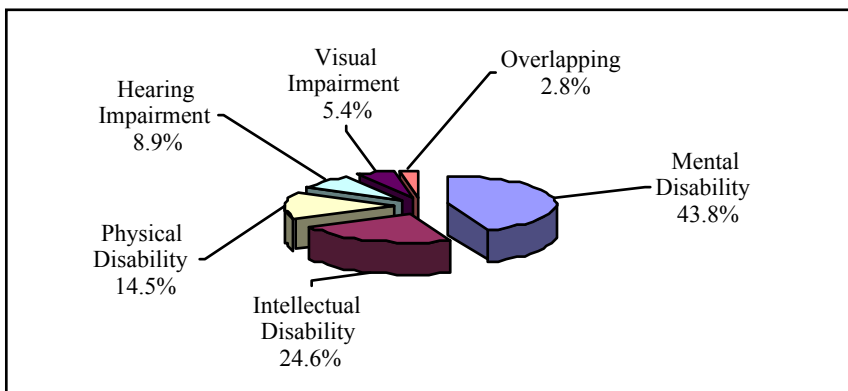
³ UNESCO. Statistical Yearbook 1999

⁴ World Bank Regional Economic Reports, Public Expenditure Review and Country Memorandum Data.

1-2. Indicators on Disability

Disability-specific Data

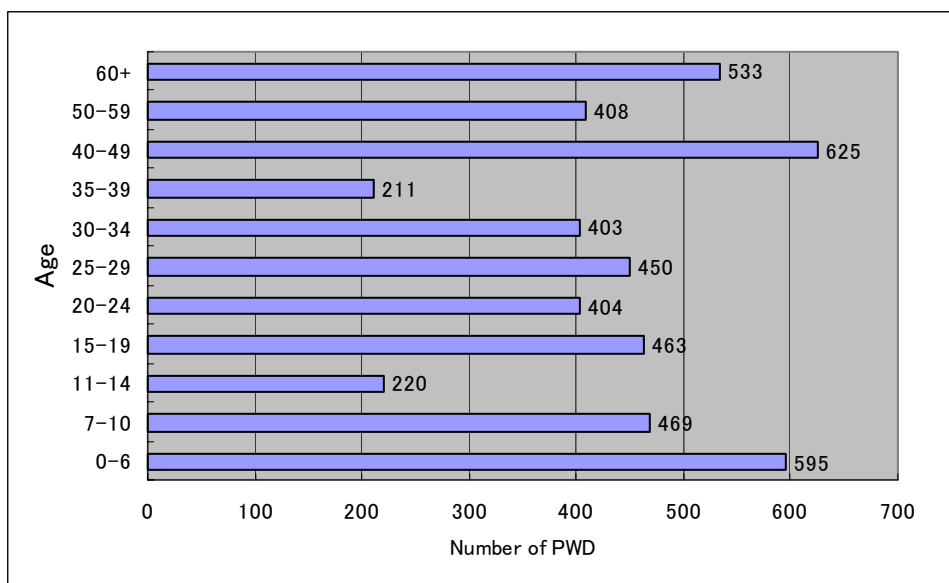
Figure 1: Types of Disability in 1996



Source: Fiji Disabled People’s Association (FDPA). *A Country Study on People with Disability, Tonga 2001*

Age-specific Data

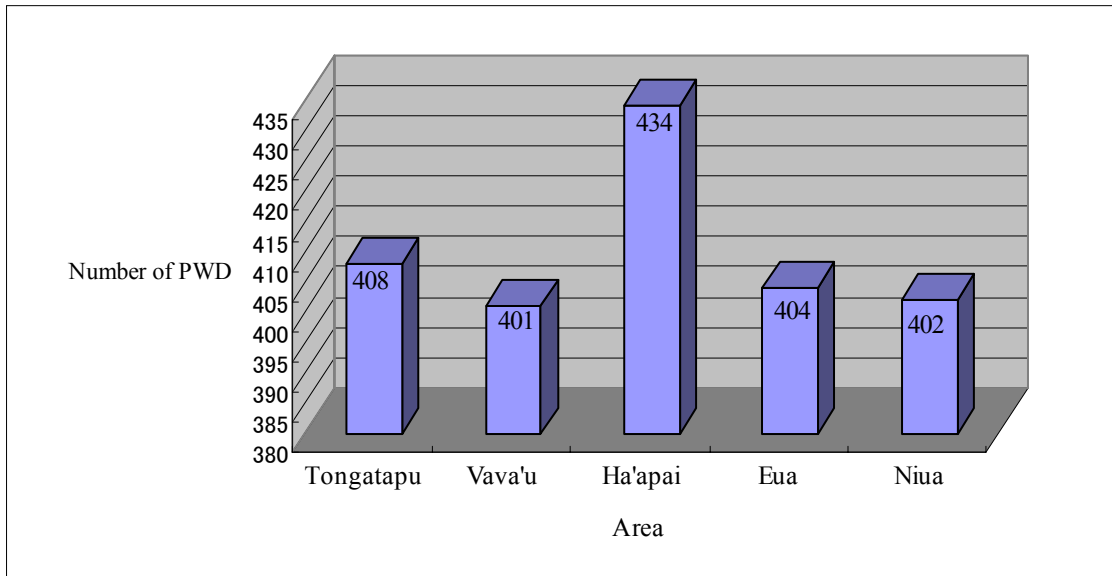
Figure 2: Number of Persons with Disabilities in Each Age Group in 1999



Source: FDPA. *A Country Study on People with Disability, Tonga, 2001.*

Area-specific Data

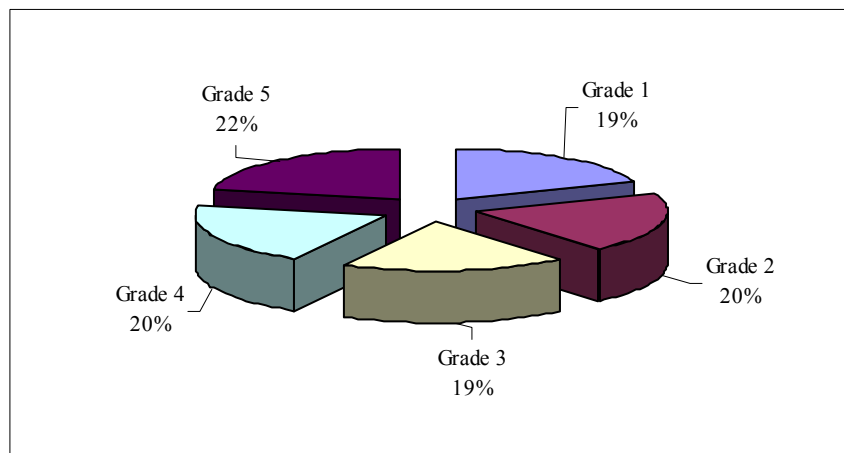
Figure 3: Number of Persons with Disabilities in Each Area in 1999



Source: FDPA. *A Country Study on People with Disability, Tonga, 2001*

Degree-specific Data

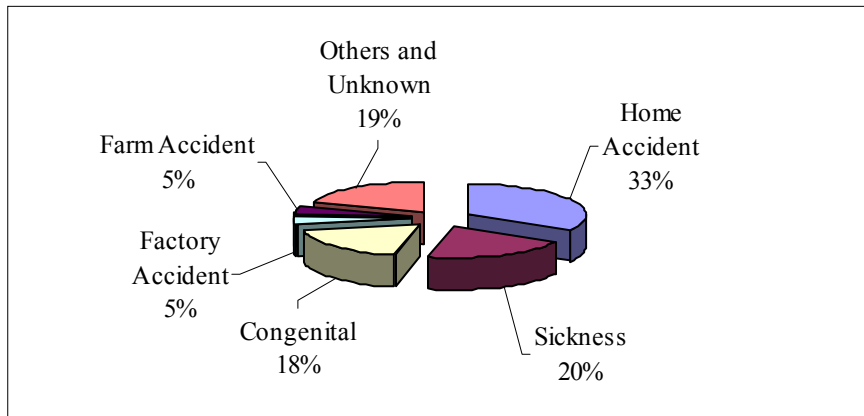
Figure 4: Disability Degree Ratio in 1999



Source: FDPA. *A Country Study on People with Disability, Tonga 2001*

Cause-specific Data

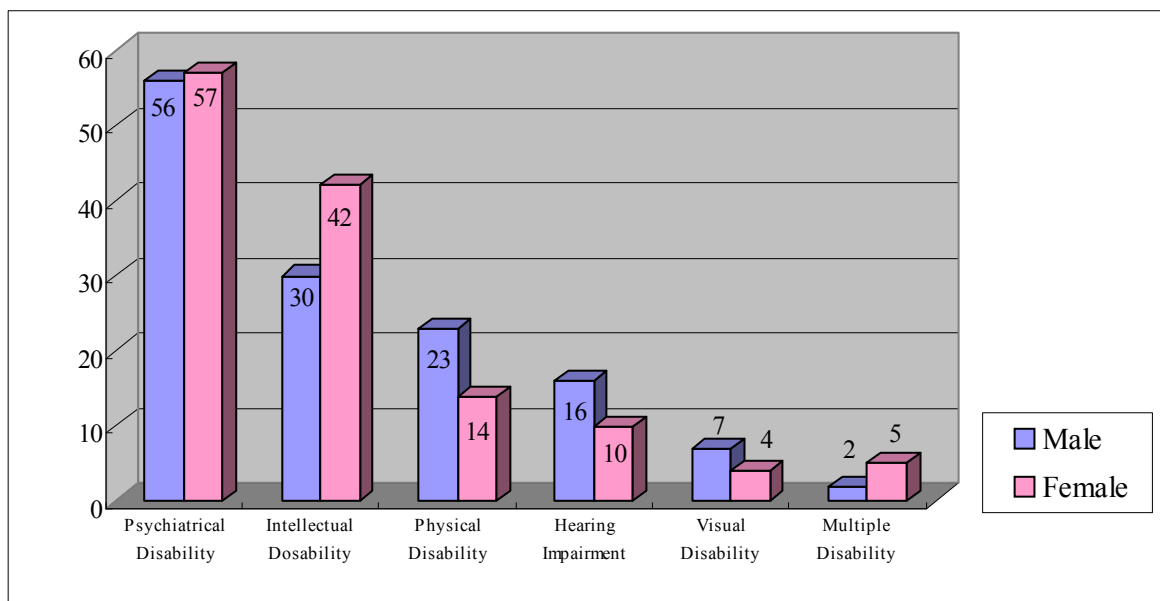
Figure 5: Cause of Disability in 1999



Source: FDPA. *A Country Study on People with Disability, Tonga, 2001*

Gender-specific Data

Figure 6: Number of Persons with Disabilities by Gender in 1996



Source: FDPA. *A Country Study on People with Disability, Tonga, 2001*.

2. Issues on Disability

2-1. Definition of Disability in Tonga

1. Terms

In Tonga, the term “disabled” has been used interchangeably with “handicapped”, “impaired”, “abnormal” and even “lunatic”. However, the word “lunatic” has been eliminated from current health legislation and has been replaced by “mental health”, which has a more positive connotation. The term “disabled” first appeared in the 1996 Census defined as those persons over the age of 15 and categorized as having no economic activity status. Therefore, disability is a relatively new concept in Tonga.

2. Towards A National Working Definition

The Tongan government has not officially taken a definite position in terms of defining disability; rather it has left this to up to non-government and charitable organizations that support persons with disabilities. It has however, been generally agreed by supporting organizations that the UN definition of "disability" be the working definition among themselves and be referred to in international discussions on disability.

3. Mental Health

Among all types and classification of disability, mental health patients warrant and demand immediate public action. As there has been concern that mental health patients have been punished and treated as outcasts of the society, the prison administration of the government imprisoned these patients to protect them. However, the Health Department is currently responsible for these patients.

The only law that has been enacted regarding disability covers mental health. The Mental Health Act 1992 contains the following definitions:

An “Alcoholic” or “Drug Addict” refers to a person suffering from a mental disorder or disability caused by dependence on alcohol or drugs to the extent that he/she is unable to control him/herself or is incapable of managing his/her affairs or endangers him/herself or others;

“Mental disorder” refers to mental illness, arrested or incomplete development of the mind that can render a person incapable of independent living;

“Mental illness” means a psychiatric disorder that substantially disturbs a person’s thinking, feelings, or behavior and impairs the person’s ability to function.

All other types of disability can be cared for at the home and are expected to be cared for by the family, the community, churches and other voluntary organizations.

2-2. Current Situation⁵

1. Disability and the Royal Household

The Royal Family has found that it must respond positively and champion the causes of the socially disadvantaged in Tongan society including disability issues. The Queen is President of the Tonga Red Cross, an umbrella organization which works on disability issues, and other members of the Royal Household have become officers of disability-related organizations. The Royal Household has donated land, buildings and annual assistance for the provision of services to persons with disabilities. Her Majesty joined a family survey on persons with disabilities conducted in 1981 in Tongatapu, the main island, assisting children with disabilities who were hidden at home by their families.

2. Tongan Government and Disability

The care and support of persons with disabilities is under the guidance and patronage of the Royal Household. However, there are no policies or strategies that directly address disability in Tonga. Additionally, the country lacks the following:

- a) A specific government ministry responsible for disability-related policy
- b) A mechanism for coordination between government ministries
- c) Collaboration between the government and disability-related support organizations
- d) Regular organizational structure, national policy or strategy for coordination among international non-government agencies that support persons with disabilities
- e) Collaboration between village and community church organizations that support persons with disabilities

The provision of disability-related services is left up to the many individual NGOs (Non-governmental Organizations). However these organizations, despite plenty of goodwill,

⁵ This section is based on the report of FDPA, *A Country Study on People with Disabilities*, 2001

lack funding, professionally trained and skilled staff, equipment and medicines.

3. Identification/Registration

There are no national procedures for early identification of disabilities or registration of persons with disabilities. Early social stigma attached to disability in the family still exists to some extent. However, church social work teams, family planning associations and public health and medical services have made some efforts in this area recently.

4. General Perception towards Disability

Tongans are a proud people with a fighting spirit. In this context, disability is regarded as “useless” and a burden to society. This societal attitude is, however, challenged by the strong family bonds that exist in the society, and is further reinforced by churches and their gospel values. Persons with disabilities in the family have become an avenue for virtues such as love, tolerance and understanding, which contributes to the further bonding of society.

5. Poverty

In Tonga, poverty is not always measured in monetary terms, but also as a loss of love and rejection by society. In this context, persons with disabilities in Tonga are considered rich.

6. Accessibility

The new open-air market in Nuku’alofa is the only public facility accessible to persons with disabilities. Groups are lobbying the government for a public transport and building accessibility law for persons with disabilities as the Tongan economy grows and new infrastructure is developed.

2-3. Documentation and Surveys on Disability

National Census

| | |
|--------------------------------|-------------------------------------|
| 【Title】 | Population Census Report |
| 【Last published】 | 1996 |
| 【Items regarding disabilities】 | Number of persons with disabilities |

Other Surveys

| | |
|------------------|---|
| 【Title】 | Persons with Disabilities Family Survey |
| 【Last published】 | 1981 |

【Items regarding disabilities】

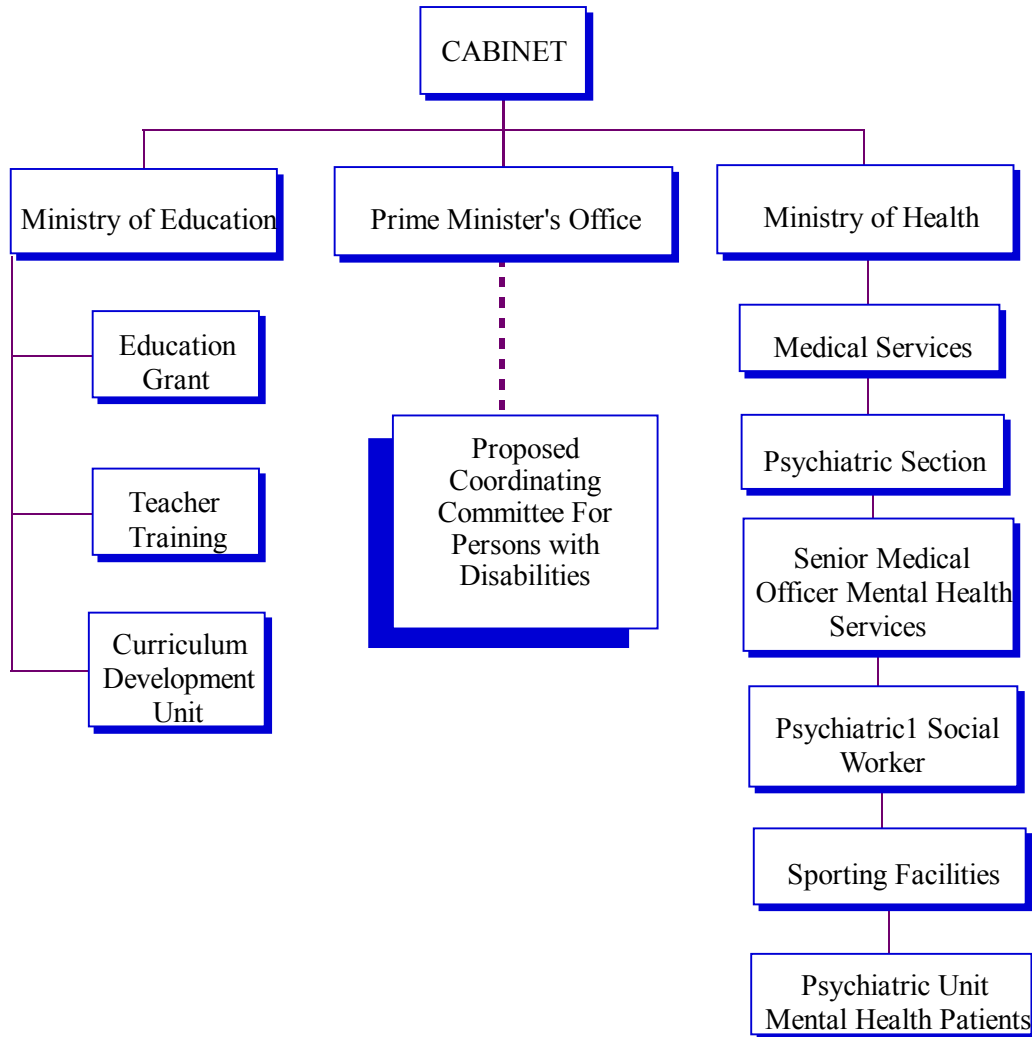
The Queen participated in the survey by assisting children with disabilities that were hidden by their families.

3. Administration and Policy on Disability

3-1. Administration on Disability

* See Annex 1 for list of governmental organizations

Central Government



【Disability-related Governmental Organizations】

| 【Name】 | 【Description】 |
|--|--|
| Ministry of Health (Psychiatric Unit) | <ol style="list-style-type: none"> 1. Treats and contains acute psychiatric cases and emergencies. 2. Treats and rehabilitates chronic psychiatric cases. 3. Provides psychiatric care to patients who have been institutionalized and is continuing the process of de-institutionalization. 4. Treats and contains forensic psychiatric cases according to provisions of the Mental Health Act 1992. 5. Follows up outpatient cases and continues Psycho-Social Rehabilitation (PSR), home visits, ‘medication on wheels’. 6. Implements an “Open Door Policy” (ODP) for drop-in cases with psychiatric problems and respite care. Patients admitted via ODP are known as Revolving Door Patients (RDP). <p>The unit also ensures active participation in matters related to mental health.</p> |

| |
|--|
| 【Availability of national coordination committee】 Not Available |
| 【Committee name】 |
| 【Plan and implemented activities】 |

Tonga has sent different non-governmental representatives to meetings and activities of the Asian and Pacific Decade of Disabled Persons. However, there are no specific government ministries responsible for disability-related policies and administrations, nor is there a national coordination committee as disability has little relation to the government and national planning. Benefits of decade activities due to personal and organizational isolation have not been shared to initiate action.

Local Government

*See Annex 1 for an organizational chart of the local government

【Disability-related Organizations in Local Government】

| 【Name】 | 【Description】 |
|---------------|--------------------------|
| | No information provided. |

3-2. Laws and Regulations on Disability

The Mental Health Act is the only disability-related legislation in Tonga.

| | |
|--------------------------|---|
| 【Title】 | Mental Health Act |
| 【Year legislated】 | 1992 |
| 【Purpose】 | <ol style="list-style-type: none"> 1. Defines and interprets “alcoholic”, “drug addict”, “mental disorder”, “mental handicapped” and “mental health”. 2. Defines Minister powers. 3. Appoints a Mental Health Advisory Committee (MHAC). 4. Defines MHAC membership. 5. Establishes mental health welfare officers. 6. Establishes the right to remove persons with any intellectual disabilities. 7. Protects mental health officers. 8. Establishes compulsory hospital admission rules. 9. Establishes an Observation Order. 10. Establishes a Detention Order. 11. Releases patients from detention. 12. Establishes rules for compulsory admission of persons convicted of criminal offences. 13. Establishes the power to make regulations. 14. Establishes a system of repeal and savings. |

3-3. Policies on Disability

National Development Plan

| | |
|---------------------------------------|--|
| 【Title】 | The National Strategic Development Plan |
| 【Period】 | 2001-2003 |
| 【Items regarding disabilities】 | <p>A plan was drafted in 2001 and is awaiting approval by the cabinet. The closest mention of disability in the draft appears under the “Social Goals” chapter, sub-headed as “Institutional Care for the Elderly and the Vulnerable” (Draft National Plan 2001-2002) that states that “primary social care and safety will be met for all, especially the elderly and vulnerable groups”. No other provision appears in this plan that is directly or specifically aimed at disability.</p> |

3-4. Measures on Disability

Prevention, Identification and Early Intervention

【Current situation】

Prevention of disability

| | |
|------------------------|--|
| 【Policy/program title】 | Family Planning Association |
| 【Year implemented】 | 1980 |
| 【Description】 | <ol style="list-style-type: none"> 1. Stop Smoking Program 2. Good Health Program 3. Psychology 4. Family Focus 5. Parented Information 6. Driver Re-education 7. Controlled Drinking Program 8. Comprehensive Drug and Alcohol Assessment 9. Recovery 10. Healthy Anger 11. Counseling |
| 【Policy/program title】 | Tonga Family Health Association Services |
| 【Year implemented】 | 1977 |
| 【Description】 | <ol style="list-style-type: none"> 1. Services: counseling, home visits 2. Education on HIV/AIDS, women's health, pre-natal care and nutrition 3. Local and international networking |
| 【Policy/program title】 | Primary Health Care |
| 【Year implemented】 | 1970 |
| 【Description】 | <p>According to a National Nutritional Survey conducted in 1986, the PHC has improved nutrition with 98% of newborns weighing an average 3,599 grams, improved infant feeding practices, raised the vaccination rate to 99%, and reduced cases of anemia.</p> |
| 【Policy/program title】 | Disaster Preparedness |
| 【Year implemented】 | 1970 |
| 【Description】 | |
| 【Policy/program title】 | Prevention of Disabilities (Non-Government Initiatives) |
| 【Year implemented】 | |

【Description】

Salvation Army Prevention of Disabilities Census (1978)

Family Planning Association Services (1980)

Identification and Early Intervention

Tonga has no facilities, equipment or skilled personnel to identify disabilities for immediate and early intervention strategies to be put in place.

Medical Services and Rehabilitation

【Current situation】

Most medical rehabilitation is conducted in the community using traditional means and methods. Herbalists and traditional healers are complemented by therapeutic conditioning of real life experiences in the community.

There are no public provisions for any type of rehabilitation and assistive devices in Tonga.

Education

【Current situation】

There are no definite and clear national policies for the provision of special education for persons with disabilities. However, the government has announced that a Fiji Special Education Curriculum is being tested in Tonga to determine the appropriateness of special education. There are also no policies or strategies for the training of special education teachers, care workers, home service carers, physiotherapists or other specialized welfare personnel.

Special education is coordinated by the Red Cross at the Alonga/Petesaita Adult Disabled People, Ofa Atu Amanaki Centre and at branches on rural islands. An adjacent pre-school was established in 1972, a primary school in 1976, and secondary school in 1980. There has also been a school for those with hearing impairments at the Tonga Red Cross since 1999. These educational activities are all conducted under non-governmental initiatives.

Social Service

【Current situation】

Disability-relates government services are concentrated on mental health services in as far as the provision of equipment, facilities and staff. Psychiatric facilities are annexed to the public hospital at Vaiola in the capital Nuku'alofa.

Details of psychiatric facilities annexed to the public hospital in Vaiola are as follows.

1. Staff

| TITLE | NO. OF POSTS |
|--------------------------------|--------------|
| Senior Medical Officers | 1 |
| Sisters In-Charge | 1 |
| Senior Staff Nurse | 1 |
| Staff Nurses | 7 |
| Mental Health Welfare Officers | 2 |
| Psychiatric Social Workers | 1 |

2. Objectives of the Psychiatric Section 1999/2000

- a) Strengthen human resource management.
- b) Provide regular and 24 hour transportation for patient care.
- c) Upgrade staff competencies through further studies abroad and in-service training.
- d) Upgrade security for better management of patients.
- e) Upgrade medical and office equipment for patient care.
- f) Amend or replace the Mental Health Act 1992.

3. Financial Allocations 1999/2000

TDS\$58,146⁶ (not including “development”, daily paid laborers, transport and overtime)

4. Total Formal Admissions

| | |
|--|-----|
| Number of New Admissions for 2000 | 30 |
| Number of Re-admissions for 2000 | 83 |
| Total Number of Formal Admissions for 2000 | 113 |

5. Achievements

- a) A vehicle and a driver were assigned to the psychiatric unit for community care and rehabilitation of psychiatric patients in the community.
- b) A staff nurse completed a three month training course in mental health, attending theoretical sessions and training in psychiatric rehabilitation in Wellington, New Zealand.

The World Mental Health Day was celebrated on the 10th October 2000 for the first time upon approval of the Ministry of Health, advice from the World Federation of Mental

⁶ 1 Tonga Pa'anga = 61.35 JPY as of end March 2002

Health and the government's Mental Health Advisory Committee (MHAC). The Princess was guest of honor and received a Certificate of Appreciation for her services to mental health from the Ministry of Health.

6. Obstacles in service delivery

- a) Lack of expertise and manpower in occupational therapy and clinical psychology
- b) Lack of specific procedures (regulations) for the implementation of provisions of the Mental Health Act 1992
- c) Incorporation of psychiatry into medical care creating misconception that psychiatry is a pure medical problem rather than a combination of medical and psychological factors. This has prevented authorities from providing and delivering psycho-social services that would lead to the betterment of the patients and their ability to function relatively independently in society.
- d) Partial upgrading of the security section has inhibited management of acute psychiatric (psychiatric emergencies) and forensic psychiatric cases.
- e) The multi-purpose psychiatric unit including acute cases, chronic cases, forensic cases, dangerous cases, substance-related cases, youth and adult cases.
- f) Absence of a unit clerk and typist
- g) Lack of means of transportation has prevented home visits and "medication on wheels" for 6 months (22/05/00-20/11/00)

WHO (World Health Organization) consultants have evaluated these services and made recommendations for more staff training, upgrading equipment, providing outreach vehicles to other islands, community education and awareness raising.

Social Rehabilitation is also provided for persons with disabilities by NGOs.

Vocational Training and Employment Promotion Services

【Current situation】

Vocational rehabilitation is conducted in the community using traditional means and methods.

Promotion systems and services for employment of persons with disabilities do not exist. The only channel for the employment of persons with disabilities is through group contracts or group farming at the Alonga Center for Adult Disabled People. Occupational therapy focused

on agriculture has been provided as a means of assimilation with families and for persons with disabilities to obtain an economically active status (depending on individual ability).

Community-based Rehabilitation (CBR)

【Current situation】

CBR has been in Tonga from the inception of Tongan society and is found compatible with technological change and modernity by the Tongan community. Persons with disabilities in communities are rehabilitated not only physically but also in spirit, love and belonging inspired from the soul of the community. All disability-related institutions, especially the churches, have outreach CBR schemes.

Communication Tools

【Current situation】

No information available

3-5. Experts and Workers in the Field of Disability

Specialized training is required for teachers, support personnel, and staff of the Health Department, but there are very few qualified disability-related support personnel. However, as there are no official government training policies, strategies, or government facilities to accommodate and classify qualifications earned overseas, NGOs are required to fill in the gaps. However, limited coordination among these organizations means that a lack of training and qualifications of support personnel is a cause of a quick turnover of senior staff.

| 【Job title】 | 【Description】 | 【Training and qualification system】 |
|--|---|---|
| Government Organization Workers | Trained overseas to provide disability-related services to, free choice and not according to any government training policy. | Psychiatric Doctors and Nurses in mental health are qualified by the government; doctors and nurses in other areas are trained overseas. |
| Disability-related International Support Organization Senior Manager | | Trained by other organizations and recruited through advertising (Red Cross and Salvation Army). Senior management experience is not necessary with disability-related organizations. |
| Non-Government Center Administration (Alonga and OTA) | | Certificate/Diploma from short postings with overseas disability-related organizations, or attendance of overseas seminars, or OJT (on the job training). |
| Pre-School Teacher | | Pre-School Teaching Certificate from mainstream schools, but no special training in disability. |
| Primary School Teacher | | Certificate in Disability Studies from the University of the South Pacific (USP), a two year course offered through USP extension. |
| Physiotherapist | Japanese Overseas Cooperation Volunteer (JOCV) attached to the Red Cross while doing research provides some OJT for locals. One physiotherapist qualified overseas works at the government hospital. No training facilities are available in Tonga. | Overseas Qualification (Japan and USA) |

| | | |
|------------------------|--|--|
| Occupational Therapist | None in Tonga. Farmers and handicraft craftsmen volunteer to provide training of their trade to persons with disabilities. | Overseas Qualification (Australia) |
| Social Worker | | Certificates No qualification by government, as there are no social worker training institutes. |
| Traditional Healer | Present in all communities. | No qualification by government but recognized by the community, hereditary training. |

4. Disability-related Organizations and Activities

4-1. Activities by Disability-related Organizations

* See Annex 1 for the list of organizations

There are no organizations of persons with disabilities in Tonga. All persons with disabilities are supported by charitable or church organizations.

Home and family care remain a strong value in the culture and society of Tonga. These values are further strengthened by the gospel values of all churches in Tonga, which explains the heavy involvement of charities, women and youth groups in community work, including care for disabled persons.

4-2. Cooperation Projects on Disability Organized by International and Other Donors

* See Annex 2 for the list of aid projects

Assistance by Multilateral/Bilateral Organizations and International NGOs

The Food and Agricultural Organization has implemented a chicken farm project that has provided agricultural and vocational rehabilitation for persons with disabilities. The British, Canadian, Australian and Japanese governments have provided training and facilities. The Australian government has annually supported special training sessions, and in terms of special education for teachers, international NGOs such as, CBM Germany have provided Braille equipment to people with visual impairment.

Assistance by Japan

Japan has sent physiotherapists under the JOCV scheme. JOCV offers not only direct physiotherapy to persons with disabilities, but also trains local people to look after them. The Japanese government also provided a dormitory for persons with disabilities who take in-center training, and a school bus for children with disabilities.

5. References

This report is edited based on the main source which was drafted by a local consultant.

Main source:

FDPA. (Fiji Disabled People's Association) *A Country Study on People with Disabilities, Tonga* 2001

Other references:

CIA. The World Factbook Tonga

Retrieved from <http://www.cia.gov/cia/publications/factbook/geos/tn.html>