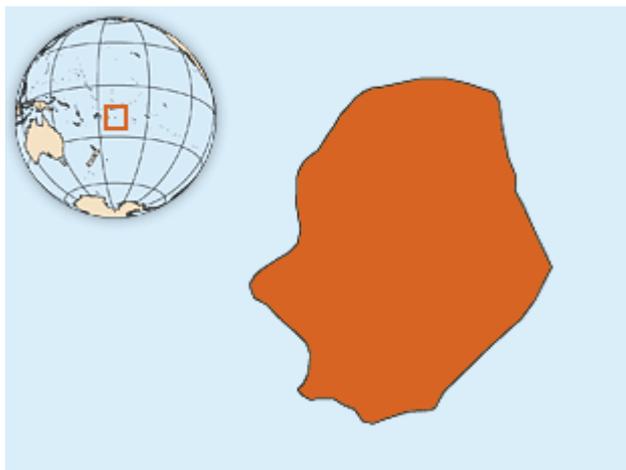


## Niue



<http://www.who.int/countries/en/>

WHO region	Western Pacific
World Bank income group	Low-income
<b>Child health</b>	
Infants exclusively breastfed for the first six months of life (%) (1)	
Diphtheria tetanus toxoid and pertussis (DTP3) immunization coverage among 1-year-olds (%) (2016)	99
<b>Demographic and socioeconomic statistics</b>	
Life expectancy at birth (years) (1)	
Population (in thousands) total (2015)	1.6
% Population under 15 (2015)	29.8
% Population over 60 (2015)	9.8
Poverty headcount ratio at \$1.25 a day (PPP) (% of population) (1)	
Literacy rate among adults aged >= 15 years (%) (1)	
Gender Inequality Index rank (1)	
Human Development Index rank (1)	
<b>Health systems</b>	
Total expenditure on health as a percentage of gross domestic product (2014)	7.45
Private expenditure on health as a percentage of total expenditure on health (2014)	1.64
General government expenditure on health as a percentage of total government expenditure (2014)	5.90
Physicians density (per 1000 population) (2008)	1.84
Nursing and midwifery personnel density (per 1000 population) (2008)	9.816
<b>Mortality and global health estimates</b>	
Neonatal mortality rate (per 1000 live births) (2016)	11.6 [4.7-29.1]
Under-five mortality rate (probability of dying by age 5 per 1000 live births) (2016)	22.2 [10.0-51.4]
Maternal mortality ratio (per 100 000 live births) (1)	
Births attended by skilled health personnel (%) (2011)	100.0
<b>Public health and environment</b>	
Population using safely managed sanitation services (%) (1)	
Population using safely managed drinking water services (%) (2015)	97 (Total)

Sources of data:  
Global Health Observatory May 2017  
<http://apps.who.int/gho/data/node.cco>

### HEALTH SITUATION

Niue's population of 1460 people (2011), is one of the smallest in the world, having seen sharp declines over the past five decades due to outward migration. As a result, Niue faces challenges of an ageing population and a declining health workforce, which increases the burden on the country's health-care system.

Niue health-care system is also under strain due to limited monitoring and reporting mechanisms to gauge the efficiency or effectiveness of health-care delivery, as well as a dearth of clinical practice guidelines.

Niue is experiencing increases in the incidence of noncommunicable diseases (NCDs), including diabetes, stroke and cancers, in conjunction with high rates of obesity (61%), hypertension (33.5%) and hyperglycaemia (38.4%).

### HEALTH POLICIES AND SYSTEMS

The Niue Fook Hospital is the hub for the majority of health services and public health programmes, providing both primary and secondary medical care. Tertiary care is provided via transfers to New Zealand and an emergency evacuation service, complemented with annual visits from New Zealand-based specialists. As a small country, village-level community health workers play a key role in the promotion of health and the prevention of diseases at the community level.

The *Niue Health Strategic Plan (2011–2021)* sets forth key objectives to improve health-care delivery within the country. The vision of the plan is to ensure "a healthy population, well supported by quality health services". The strategic plan calls for strengthening management and planning, clinical leadership, effective community outreach and the implementation of a performance monitoring system. The plan also includes a proposed sector coordination process to identify priorities, promote collaboration among health partners, identify common survey instruments and encourage rationalized reporting.

### COOPERATION FOR HEALTH

In implementing this strategy, WHO and the Ministry of Health will work with other government ministries, other sectors, academia, civil society, other United Nations agencies, bilateral development partners, regional and global health initiatives, philanthropic foundations and others in support of planned national health priorities.

WHO COUNTRY COOPERATION STRATEGIC AGENDA (2018–2022)	
Strategic Priorities	Main Focus Areas for WHO Cooperation
<p><b>STRATEGIC PRIORITY 1:</b></p> <p>To set the strategic public health agenda</p>	<p>1.1. Enact and enforce tobacco control laws aligned to the WHO Framework Convention on Tobacco Control.</p> <p>1.2. Enact and enforce the draft mental health care bill and subsequent implementation.</p>
<p><b>STRATEGIC PRIORITY 2:</b></p> <p>To provide technical support in designing and implementing health priorities</p>	<p>2.1. Develop and/or review NCD and mental health guidelines to promote improved cost-effective primary and secondary case management.</p> <p>2.2. Establish and strengthen monitoring, evaluation and surveillance of NCD risk factors and interventions, as well as other health indicators in the Niue Health Strategic Plan.</p> <p>2.3. Increase emphasis on disease prevention and the promotion of healthy lifestyles.</p> <p>2.4. Promote adoption of policies to improve access to and affordability of healthy food.</p> <p>2.5. Develop a communicable diseases strategy to maintain zero rates for communicable diseases (HIV, malaria and TB) and prevent the introduction of communicable diseases and pandemics.</p> <p>2.6. Support ongoing mapping, transmission assessment and sentinel surveys.</p> <p>2.7. Initiate biennial exercises to test pandemic preparedness.</p>
<p><b>STRATEGIC PRIORITY 3:</b></p> <p>To strengthen the capacity of the health workforce</p>	<p>3.1. Adopt policies that promote health workforce performance, quality and retention.</p> <p>3.2. Enhance capacity of village-level community health workers to undertake NCD screening and other community health promotion activities.</p> <p>3.3. Offer relevant continuing professional development to community health workers through Pacific Open Learning Health Net and other opportunities.</p>

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