



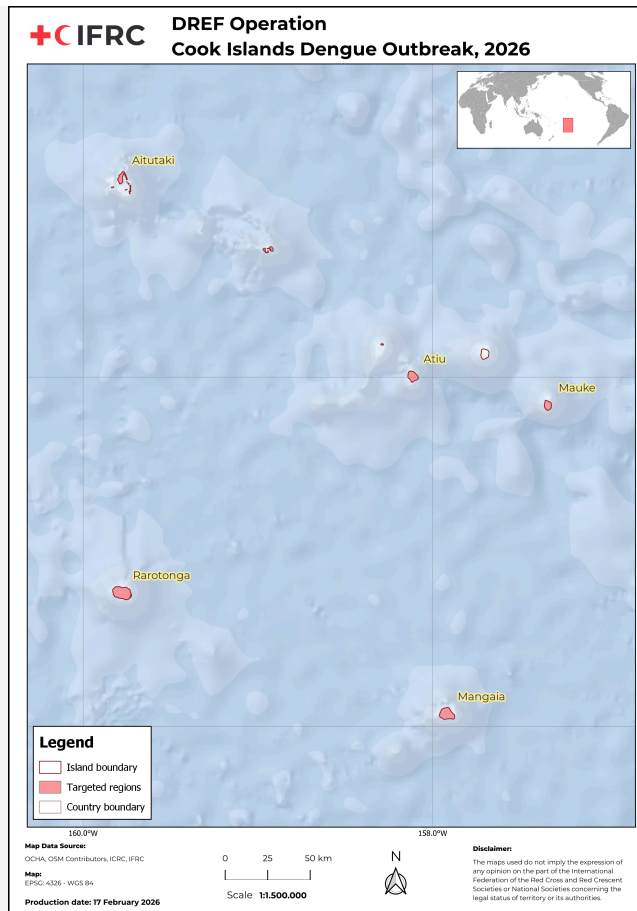
Cook Island Red Cross Staff visiting those affected by Dengue (Photo: CIRCS)

Appeal: <b>MDRCK003</b>	Hazard: <b>Epidemic</b>	Country: <b>Cook Islands</b>	Type of DREF: <b>Response</b>
Crisis Category: <b>Yellow</b>	Event Onset: <b>Slow</b>	DREF Allocation: <b>CHF 161,039</b>	
Glide Number: <b>EP-2025-000232-COK</b>	People Affected: <b>15,000 people</b>	People Targeted: <b>10,000 people</b>	
Operation Start Date: <b>02-02-2026</b>	Operation Timeframe: <b>5 months</b>	Operation End Date: <b>31-07-2026</b>	DREF Published: <b>23-02-2026</b>
Targeted Regions: <b>Cook Islands</b>			

# Description of the Event

## Date when the trigger was met

02-02-2026



Map of targeted areas (Source: IFRC IM)

## What happened, where and when?

A dengue fever outbreak was officially declared on 22 May 2025 in the Cook Islands. Since the declaration, transmission has remained active and widespread across the main island of Rarotonga and several outer islands, including Aitutaki, Atiu, Mauke, and Mangaia. Cases have been reported in both urban centres and remote communities. As of Epidemiological Week 6 (6 February 2026), a total of 893 confirmed cases have been recorded. The outbreak has shown a sharp and sustained increase in recent weeks, with an estimated incidence rate of 1.78 per cent of the population. As of 6 February, 45 hospital admissions have been reported, along with one fatality in early February 2026. A high proportion of cases are among children, further heightening public health concerns.

The outbreak has placed significant pressure on the national health system. Health facilities are operating under constraints in infrastructure, staffing, and medical supplies, limiting their capacity to provide timely diagnosis and treatment. This strain is particularly acute during peak transmission periods, increasing the risk of complications and delayed care. Communities in the outer islands face heightened vulnerability due to geographic isolation, limited access to health services and specialized care, reduced health workforce capacity, and logistical challenges in transporting patients and medical supplies. These factors have intensified the need for strengthened community-based prevention, early detection, and supportive measures to reduce transmission and alleviate pressure on health facilities.

A Government-led national taskforce, coordinated by the Ministry of Health, was activated to manage the outbreak response. Since the official declaration in May 2025, public awareness campaigns have been conducted through media platforms and community outreach initiatives to promote dengue prevention and early care-seeking behaviours. However, the rapid escalation of cases over a short period has exceeded existing response capacity. As case numbers surged in early 2026, the Ministry of Health formally requested support from the Cook Islands Red Cross Society. The date of receipt of this request, 2 February 2026, has been used as the trigger date for the DREF response.



Upon receiving the request, the Cook Islands Red Cross Society (CIRCS) immediately mobilized its established volunteer network to support the national response. The National Society began distributing contextualized dengue prevention kits comprising mosquito nets, repellents, and mosquito coils, together with Information, Education and Communication materials providing guidance on dengue prevention measures, recognition of symptoms, when and where to seek medical care, and available support services. Through its strong community presence, the National Society has ensured timely, equitable, and accountable assistance, prioritizing households most at risk, particularly families with children and those in the outer islands.

While these interventions have contributed significantly to the national response, the rapid escalation of cases, the high proportion of children affected, and the growing demands from health facilities, including the need to expand community prevention activities and intensify mosquito breeding site elimination campaigns, now exceed the current operational and financial capacity of the National Society. Additional support is urgently required to sustain ongoing outreach activities, scale up prevention efforts in high-risk and remote communities, strengthen vector control measures, support overstretched health facilities, and prevent further spread of the disease. Without this support, the ability to meet urgent medical needs and effectively contain the outbreak will be severely constrained.



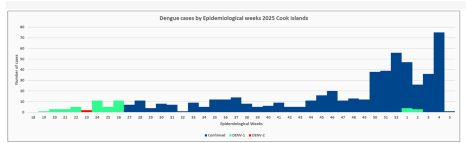
CIRCS staff and volunteers carrying out distribution (Photo: CIRCS)



Staff and volunteers organizing Dengue Packs for distribution (Photo: CIRCS)



CIRCS staff and volunteers carrying out distribution (Photo: CIRCS)



EpiPeak Chart (Source: MoH)

## Scope and Scale

The scope and scale of the dengue response in the Cook Islands is national in coverage and urgent in intensity, targeting both the main island of Rarotonga and all outer islands, including Aitutaki, Atiu, Mauke, and Mangaia. Since the outbreak was declared in May 2025, transmission has spread across both urban and remote communities, requiring a coordinated, multi-island response. The total number of people affected is estimated to be approximately 15,000, representing the total residential population of the Cook Islands. It is estimated that approximately 4,646 are children under the age of 17 years.



The CIRCS is scaling up community-based interventions, including prevention messaging, dengue kit distribution, and vector control support. Particular emphasis is placed on high-risk households, children, and geographically isolated communities where access to health services is limited and logistical constraints heighten vulnerability.

The response is unfolding within a broader climate context that is accelerating dengue transmission across small Pacific Island states. Climate change is promoting the spread of dengue by increasing temperatures, shortening mosquito breeding cycles, and enhancing viral replication within vectors. Increased rainfall and humidity are creating more standing water and breeding sites, while flooding and rising sea levels further contribute to mosquito proliferation. Growing urbanization and internal migration are also elevating exposure risks, and milder winters are extending transmission seasons. Climate and environmental factors are playing a decisive role in the current outbreak dynamics. Meta-analyses across tropical settings demonstrate that each 1°C rise in temperature corresponds to an estimated 13 per cent increase in dengue risk. In Pacific Island climates characterized by warm, wet seasons and water accumulation around homes, these conditions significantly amplify vector-borne transmission, reinforcing the need for sustained community engagement and environmental management as core components of the response.

Epidemiological trends indicate that the outbreak is currently in a rapid growth phase. With 335 cases recorded in January 2026 and 110 cases already reported in the first epidemiological week of February, transmission is accelerating. If the late-January transmission rate continues, February to March is projected to represent the peak period, with an estimated 450–650 new cases, followed by a gradual decline in late March, assuming intensified vector control measures and rising population immunity begin to limit spread. In a small population such as the Cook Islands, outbreaks typically intensify quickly. These projections remain scenario-based and depend heavily on the effectiveness of mosquito control efforts, environmental conditions, and the scale of public health interventions implemented.

The importance of early and scaled intervention is underscored by previous experience. In May 2009, the Cook Islands experienced a major dengue outbreak, with up to 994 cases reported on Rarotonga alone. The current response builds on lessons learned from that event, particularly the need for rapid mobilization of community networks, strengthened vector control, and sustained public awareness campaigns. The activation of the DREF mechanism reflects both the accelerating epidemiological trend and the recognition that, without immediate scale-up of prevention, outreach, and support to overstretched health services, the outbreak could exceed national response capacity.

The Cook Islands and the wider Pacific have experienced recurrent dengue outbreaks, often linked to seasonal rainfall and climate variability. Past outbreaks resulted in widespread transmission, school and workplace absenteeism, and increased demand on health services. These patterns are reflected in the current outbreak, with ongoing transmission months after declaration, underscoring the need for immediate, community-based prevention, risk communication, and vector control, as proposed under this DREF operation.

Source Name	Source Link
1. SPC Epidemics Alert	<a href="https://spc.int/phd/epidemics/">https://spc.int/phd/epidemics/</a>
2. Dengue Sitrep: Ministry of Health	<a href="https://www.health.gov.ck/dengue-update-46/">https://www.health.gov.ck/dengue-update-46/</a>

## Previous Operations

Has a similar event affected the same area(s) in the last 3 years?	No
Did it affect the same population group?	-
Did the National Society respond?	-
Did the National Society request funding form DREF for that event(s)	-
If yes, please specify which operation	-

**If you have answered yes to all questions above, justify why the use of DREF for a recurrent event, or how this event should not be considered recurrent:**

-



### Lessons learned:

Lessons learned from previous dengue outbreaks in the Cook Islands have directly informed preparedness and response measures in the current operation. Past experience demonstrated that insufficient environmental sanitation and household-level mosquito control significantly contributed to rapid transmission. In response, sustained national efforts have been implemented to strengthen community cleanliness and vector control. These include regular village and community clean-up campaigns held at least twice a year, particularly ahead of heavy rainy seasons, to reduce mosquito breeding sites around homes and public spaces. In addition, increased promotional and risk communication activities have been prioritized to improve public awareness of dengue prevention behaviours and encourage consistent household action.

Another key lesson identified was the limited surge capacity of the health system during previous outbreaks, when health facilities experienced increased strain due to high patient numbers. To address this, the Government has taken steps to strengthen health system preparedness, including improved outbreak planning, earlier engagement of community-based prevention measures to reduce caseloads, and closer coordination with partners such as the Red Cross to support prevention and community outreach. These actions aim to reduce pressure on health services by limiting transmission at the community level and ensuring earlier presentation and care-seeking.

Collectively, these lessons have reinforced the importance of early, coordinated, and community-led prevention actions, which form a central component of the current DREF-supported operation.

Did you complete the Child Safeguarding Risk Analysis in previous operations, what was risk level?

No

## Current National Society Actions

### Start date of National Society actions

02-02-2026

<b>Health</b>	The CIRCS is an active member of the Government-led taskforce coordinated by the Ministry of Health, supporting the national dengue response through public awareness and community engagement. CIRCS is currently distributing dengue response kits, which include mosquito nets (from the limited available stock), mosquito coils, and IEC materials featuring culturally appropriate messaging. These kits are targeted specifically at households with confirmed dengue cases. The distribution is being implemented through CIRCS's established volunteer network and strong community presence, enabling timely, locally informed, and effective outreach to affected families. This work ensures that communities receive practical support and essential information to prevent further transmission of dengue.
<b>Community Engagement And Accountability</b>	The CIRCS is actively supporting the national dengue response through strong community engagement and accountability mechanisms. In close coordination with the Ministry of Health, CIRCS receives verified information-subject to Ministry approval, regarding individuals and families affected by dengue fever. Following this authorization, CIRCS reaches out directly to affected individuals by phone to provide initial information, assess immediate needs, and arrange household visits where appropriate. Subsequent visits are conducted by trained volunteers to offer health education, distribute relevant support items as required, and reinforce prevention messaging. This coordinated approach ensures that assistance is targeted, confidential, and aligned with national health protocols, while strengthening community trust and ensuring that affected households receive timely and appropriate support.
<b>National Society EOC</b>	The CIRCS has currently activated its Emergency Operations Centre (EOC) to coordinate and sustain critical response activities addressing the ongoing dengue outbreak. Under the EOC's oversight, CIRCS is conducting targeted community engagement through phone outreach, household visits, and public awareness messaging to affected families. Volunteers are mobilized to distribute dengue kits, including mosquito nets and culturally appropriate IEC materials, and to reinforce prevention measures at the household and community level. The EOC ensures that all activities are coordinated



with the Ministry of Health, enabling timely, efficient, and accountable support while strengthening CIRCS's capacity to manage the outbreak response comprehensively.

## IFRC Network Actions Related To The Current Event

<b>Secretariat</b>	The IFRC does not have a permanent in-country presence in the Cook Islands; however, the response is supported through the IFRC Country Cluster Delegation (CCD) Pacific. For this operation, CIRCS will receive support across key Secretariat service areas, including financial management, logistics coordination, National Society Development (NSD), and technical advice to strengthen planning, implementation, and accountability of the response, while ensuring alignment with IFRC standards and procedures.
<b>Participating National Societies</b>	The New Zealand Red Cross (NZRC) is the primary Partner National Society supporting this operation, providing remote assistance to CIRCS in the areas of NSD, financial support and oversight, and technical advice to strengthen operational planning, implementation, and reporting for the response.

## ICRC Actions Related To The Current Event

The ICRC does not have a permanent presence in the Cook Islands; however, for this emergency response, limited remote support is provided in the form of technical assistance for communications and IEC tools to support public awareness and information dissemination.

## Other Actors Actions Related To The Current Event

<b>Government has requested international assistance</b>	Yes
<b>National authorities</b>	<p>The Ministry of Health (MoH) in the Cook Islands continues to lead and coordinate the national dengue response through a whole-of-government approach, working closely with relevant ministries and local island authorities. Current response efforts focus on strengthened surveillance and case management, environmental vector control measures, and nationwide risk communication campaigns. Public messaging across radio, television, and social media platforms emphasizes dengue prevention measures, including eliminating mosquito breeding sites, using mosquito repellents and nets, wearing protective clothing, recognizing early symptoms, and seeking prompt medical attention when warning signs appear.</p> <p>The MoH is also maintaining active monitoring of dengue transmission trends across Rarotonga and the outer islands, with regular public updates to ensure transparency and community awareness. Health facilities remain on alert to manage suspected and confirmed cases, while inter-agency coordination continues to support an effective and unified outbreak response.</p>
<b>UN or other actors</b>	WHO is supporting the Cook Islands MoH to reduce dengue transmission through strengthened surveillance, early case detection, and outbreak forecasting. Key actions include technical guidance on vector control and clinical management, logistics support



for response activities, and risk communication to raise public awareness and promote preventive behaviors.

### Are there major coordination mechanism in place?

The CIRCS will ensure strong coordination through established national mechanisms led by the Ministry of Health. The Ministry has established and activated a National Dengue Taskforce to coordinate and oversee an effective outbreak response across Rarotonga and the outer islands. As an auxiliary to public authorities, CIRCS plays an active and integral role within this taskforce structure.

CIRCS regularly shares situation reports and response mapping with the MoH and, going forward, will strengthen this with partners, including the WHO, to maintain transparency, avoid duplication, and ensure alignment with national priorities. The National Society actively participates in coordination meetings and joint planning discussions, contributing to consolidated needs assessments and agreed targeting approaches.

Through this mechanism, CIRCS supports community-level assessments, dengue prevention awareness campaigns, and the distribution of mosquito nets, repellents, and IEC materials in areas identified as gaps by the taskforce. This structured and ongoing coordination ensures that Red Cross interventions are fully integrated into the national response, strengthening overall coverage, efficiency, and impact from the earliest stages of the outbreak.

## Needs (Gaps) Identified



### Health

During dengue outbreaks in the Cook Islands, there is an increased need for preventive interventions to reduce transmission. Limited community awareness about dengue prevention and personal protection measures contributes to ongoing exposure, while high-risk groups, including children and the elderly, remain particularly vulnerable. Additionally, preventive tools such as mosquito nets and mosquito repellents are currently insufficient, leaving households exposed to mosquito bites both indoors and outdoors.

According to figures provided by the MoH, dengue transmission is present across multiple islands, with several high-risk communities identified in Rarotonga and outer islands, including Aitutaki, Atiu, Mauke, and Mangaia. Effective mosquito prevention measures are urgently needed. Scaling up access to mosquito nets and repellents is critical to protect vulnerable populations, particularly children, from mosquito bites during peak activity hours.

Initial assessment key findings:

- Limited volunteer capacity, with insufficient training in Epidemic Control for Volunteers (ECV). Active volunteers require training to strengthen safe community engagement.
- Mosquito nets and repellents are critically lacking at a time when protection against dengue is urgently needed. With only 150 mosquito nets currently in stock, CIRCS faces a severe shortage that is far below what is required to meet outbreak response needs. Distributing the available nets would fully deplete all pre-positioned supplies, leaving the National Society unable to respond to concurrent or future emergencies. This shortage leaves households—particularly high-risk groups—exposed to mosquito bites. Mosquito nets are especially important for protecting vulnerable populations such as pregnant women, the elderly, and infants during daytime sleep periods, as dengue-transmitting mosquitoes are primarily day-biting. Without urgent replenishment of mosquito nets and repellents, communities will remain highly vulnerable.
- Low community awareness of dengue prevention and early care-seeking contributes to ongoing transmission.



### Water, Sanitation And Hygiene

As the dengue outbreak continues in the Cook Islands, controlling mosquito breeding in affected communities has become a critical component of the response. Many urban and outer-island neighborhoods face increased transmission risk due to accumulated waste, clogged drains, and areas of stagnant water that serve as ideal mosquito breeding sites. Addressing these environmental risks is essential to reducing the spread of dengue and protecting high-risk populations, including children and the elderly. Organized community clean-up campaigns are a key intervention to minimize these hazards, mobilize volunteers, and raise awareness of preventive practices.

Initial assessment key findings:

- Environmental factors, including stagnant water, uncollected waste, and clogged drains, are sustaining mosquito breeding and transmission risks.
- Hygiene promotion and community awareness of dengue prevention are limited, reducing the effectiveness of preventive measures.



- Clean-up campaigns and other community-based WASH interventions are necessary to eliminate breeding sites and minimize outbreak risks.
- CIRCS currently lacks the capacity to fully scale these interventions without additional support and volunteer mobilization.



## Protection, Gender And Inclusion

In emergency settings such as the ongoing dengue outbreak, vulnerable groups—including children, the elderly, pregnant and lactating women, and persons with disabilities—face heightened protection risks. These needs are often overlooked without inclusive planning, creating a critical gap in ensuring safe and equitable response efforts. Limited sex-, age-, and disability-disaggregated data further constrains the ability to design interventions that adequately address the diverse needs of affected populations.

The CIRCS applies PGI principles, as well as child safeguarding standards, across all response activities. However, to maximize effectiveness, these principles must be consistently integrated at all stages of the operation to ensure the safety, dignity, access, and participation of the most vulnerable.

Key findings and considerations:

- Prioritize the safety and well-being of children, the elderly, pregnant women, and other vulnerable groups across all interventions.
- Collect and use sex-, age-, and disability-disaggregated data to guide tailored programming.
- Apply PGI in Emergencies Minimum Standards and the DAPS framework to ensure equitable and safe assistance.
- A Child Safeguarding Risk Analysis (CSRA) needs to be conducted by the National Society.



## Community Engagement And Accountability

There is a clear need for enhanced public education and awareness on dengue transmission, prevention, and early symptom recognition, particularly in remote and hard-to-reach communities across the Cook Islands. While mass media, such as radio and television, remain important communication channels, their potential to drive behaviour change has not been fully maximised, and community-specific outreach remains limited. Without structured feedback mechanisms, misinformation can spread, and community concerns may go unaddressed, limiting both trust and participation in preventive measures.

Furthermore, there are currently no confidential and accessible channels for community members to provide feedback or raise concerns, restricting the responsiveness and accountability of the health response. Strengthening community engagement is therefore essential—not only to inform communities about dengue prevention, but also to ensure that they are aware of and actively involved in CIRCS activities.

Initial assessment key findings:

- There is a need for stronger public education and dissemination of information through local media.
- Structured community engagement is required to ensure that communities are informed of CIRCS activities.
- CIRCS needs to establish a confidential feedback mechanism (e.g., a dedicated phone line) to enable safe and effective two-way communication with affected populations.

## Any identified gaps/limitations in the assessment

A list of laboratory-confirmed dengue cases has been provided to the CIRCS to conduct its standard community-level needs assessment, identifying the scope of the outbreak and the immediate needs of affected populations. CIRCS deployed assessment teams of staff and volunteers to reach affected communities across Rarotonga and the outer islands, gathering critical information to inform response planning.

Beyond gaps in public awareness and preventive measures, CIRCS faces internal capacity constraints that may limit the efficiency of its dengue response. The Society's Disaster Risk Management (DRM) Officer is only a few months into the role and requires support in coordinating operations. To address this, an Operations Manager will be engaged to establish operational systems and lay the groundwork for CIRCS's response.

Given that CIRCS last implemented a DREF operation in 2010 and a DREF for dengue in 2009, IFRC monitoring visits will also be conducted to ensure the smooth roll-out of activities and adherence to standards. Sustaining volunteer engagement requires allowances for 20 volunteers over the operation period, along with logistical support, including vehicles, fuel, and inter-island transport to reach affected communities.

Initial assessment key findings:



- The DRM Officer is new to the role and requires operational support.
- Volunteer engagement requires allowances to maintain involvement throughout the response period.
- Logistics support (vehicles, fuel, ferry costs) is essential to reach affected and remote communities.

# Operational Strategy

## Overall objective of the operation

The overall aim of this operation is to assist approximately 10,000 people affected by the dengue outbreak in the Cook Islands by implementing targeted prevention, awareness, and lifesaving support activities over a five-month period.

Key actions will focus on reducing transmission in hotspot communities and targeting vulnerable groups through the distribution of dengue kits containing mosquito nets, mosquito repellents, and mosquito coils, as well as implementing community clean-up campaigns to minimize mosquito breeding sites and environmental risks. Public awareness will be strengthened through the dissemination of culturally appropriate information materials, reaching households, schools, and community spaces to promote dengue prevention, early symptom recognition, and protective behaviors.

This response represents a locally driven, community-focused intervention designed to reduce dengue transmission, enhance public knowledge, and strengthen community resilience, particularly among high-risk populations such as children and the elderly. By combining preventive tools, environmental management, and awareness-raising, CIRCS aims to support communities in limiting the impact of the outbreak and promoting sustainable health practices.

## Operation strategy rationale

The overall emphasis of this response is on prevention-focused, community-centered interventions designed to reduce dengue transmission in a timely and cost-effective manner. The strategy prioritizes practical household-level protection measures, strengthened public awareness, and enhanced volunteer capacity to interrupt transmission rates.

These interventions are resource-efficient yet impactful, relying heavily on sustained community engagement and the active involvement of CIRCS's volunteer network across the main island of Rarotonga and all outer islands, including Aitutaki, Atiu, Mauke, and Mangaia. Ensuring that volunteers are properly equipped, trained, and supported remains central to the success of this prevention-driven approach.

In response to increasing dengue cases nationwide, CIRCS has developed this operational plan as a focused national strategy grounded in its auxiliary role to government and its established community presence. The operation aims to reduce infection risk, strengthen household-level protection, and support broader public health efforts through coordinated prevention activities.

### Health Sector

To reduce exposure to mosquito bites and limit ongoing transmission, CIRCS will prioritize the procurement and distribution of mosquito nets, mosquito coils, and mosquito repellents.

Currently, CIRCS holds 150 mosquito nets in stock, which are already being utilized for immediate response efforts. These limited supplies are insufficient to meet growing needs and will require replenishment to maintain operational readiness. Additional procurement will therefore support both immediate distribution and the restoration of minimum preparedness stock levels.

Mosquito nets, repellents, and mosquito coils will be distributed together as a dengue prevention kit, accompanied by culturally appropriate Information, Education, and Communication (IEC) materials. On Rarotonga, the dengue kits will be distributed primarily without mosquito nets, whereas in the outer islands, the mosquito net will be included in the kit. The kits will target high-risk households, including families with children, elderly members, and communities experiencing active transmission. This integrated approach ensures that households receive both physical protection tools and clear guidance on their proper use. By combining indoor protection (nets) and outdoor protection (repellents), CIRCS aims to provide comprehensive preventive coverage addressing mosquito exposure during peak biting hours.

To strengthen the effectiveness and consistency of the response, CIRCS will conduct a five-day dengue response training for staff and volunteers. The training will cover dengue transmission, signs and symptoms, prevention strategies, risk communication and awareness creation, safe household engagement, and operational implementation planning. It will also include practical guidance on dengue kit distribution, community mobilization, coordination mechanisms, and activity monitoring. Strengthening volunteer capacity through structured training is essential to ensure accurate messaging, safe engagement with communities, and coordinated implementation across all islands.

This combined approach—protective household tools and strengthened operational capacity—will enhance CIRCS's ability to reduce transmission, protect vulnerable populations, and deliver a coordinated and effective dengue response nationwide.



## Risk Communication and Public Awareness

Strengthening public knowledge on dengue prevention, early symptom recognition, and protective behaviors is essential to reducing transmission. CIRCS will implement a structured communication strategy using multiple channels to maximize outreach.

IEC materials included in dengue kits will deliver clear, culturally appropriate, and accessible messaging tailored to diverse communities. These materials will promote key prevention measures, including safe water storage practices, elimination of mosquito breeding sites, proper use of mosquito nets and repellents, and early recognition of dengue symptoms to encourage timely care-seeking.

In parallel, CIRCS will implement coordinated radio and television campaigns to reinforce these key prevention messages, strengthen early health-seeking behavior, and promote active community participation in vector control efforts.

Mass media engagement is particularly important for reaching outer island populations and ensuring consistent nationwide messaging. These communication efforts will support behavior change, counter misinformation, and reinforce public health guidance.

## Community Engagement and Environmental Prevention

This locally driven approach supports immediate outbreak control while contributing to longer-term resilience against future vector-borne disease outbreaks.

A Post-Distribution Monitoring (PDM) exercise will be conducted to evaluate the effectiveness, relevance, and utilization of the assistance provided, as well as to measure beneficiary satisfaction and identify any gaps requiring improvement. In addition, a feedback and complaints mechanism will be established to ensure affected communities can safely and easily share concerns, suggestions, or report issues, thereby strengthening accountability, transparency, and the overall quality of the response.

## WASH: Vector Control

To reduce mosquito breeding grounds and prevent further spread of dengue, targeted clean-up campaigns will be organized in high-risk communities across Rarotonga and the outer islands. These campaigns aim to eliminate stagnant water sources where mosquitoes breed, particularly in areas with poor waste disposal or where rainwater collects in debris, tires, and other containers. Mobilization of communities and CIRCS volunteers for these clean-up activities will be conducted in close collaboration with the Ministry of Health, ensuring coordinated and effective vector control efforts.

## Protection, Gender, and Inclusion (PGI)

To ensure a safe and inclusive response, CIRCS staff and volunteers will receive a refresher orientation on PGI and Child Safeguarding. This orientation will reinforce key principles that uphold dignity, safety, and equitable access to assistance for all individuals, particularly vulnerable groups such as children, women, the elderly, and persons with disabilities.

Strengthening the capacity of staff and volunteers in PGI and Child Safeguarding is essential to minimizing risks of harm, upholding humanitarian standards, and ensuring that all activities are conducted in a safe, inclusive, and accountable manner.

# Targeting Strategy

## Who will be targeted through this operation?

This operation will target communities most affected by the current dengue outbreak, with a focus on vulnerable populations across the main island of Rarotonga and all outer islands, including Aitutaki, Atiu, Mauke, and Mangaia.

This includes:

- Low-income and rural households with limited access to health services and information.
- Children, persons with disabilities, pregnant and lactating women, the elderly, and other socially vulnerable groups.
- Red Cross staff and volunteers, who serve as frontline responders, as well as teachers and community leaders supporting awareness and prevention activities.
- Households with infected members, particularly where breadwinners need to care for children diagnosed with dengue, to ensure protection and support during recovery.

This targeted approach ensures that high-risk and socially vulnerable groups are prioritized for prevention, education, and vector control interventions, maximizing the impact of the response.



## Explain the selection criteria for the targeted population

Selection criteria for the targeted population: The targeted population includes households with laboratory-confirmed positive dengue cases, as reported daily by the Ministry of Health. Case data is used to identify affected families promptly, ensuring timely and direct support to those currently experiencing dengue infection.

Rationale and logic for targeting these groups: Households with active dengue cases are prioritized because they present the highest risk of further transmission within the home and surrounding areas. By providing prevention and support packs immediately after case confirmation, the intervention helps reduce mosquito breeding, protect household members, and limit onward spread in the community.

Addressing vulnerable groups: Within affected households, particular attention is given to pregnant women, children, older persons, and individuals with underlying health conditions, who are more vulnerable to severe dengue outcomes. Providing packs directly to families supports those with limited resources and strengthens household-level prevention where it is most urgently needed.

Implementation approach: Positive dengue cases are collected daily from the Health Department, which then notifies the Red Cross. The Red Cross responds by delivering prevention and support packs to affected families, helping them manage the illness safely and minimize transmission in their homes and surrounding areas.

## Total Targeted Population

Women	3,106	Rural	27.5%
Girls (under 18)	1,586	Urban	72.5%
Men	3,797	People with disabilities (estimated)	6%
Boys (under 18)	1,511		
Total targeted population	10,000		

## Risk and Security Considerations (including "management")

Does your National Society have anti-fraud and corruption policy?	Yes
Does your National Society have prevention of sexual exploitation and abuse policy?	Yes
Does your National Society have child protection/child safeguarding policy?	Yes
Does your National Society have whistleblower protection policy?	Yes
Does your National Society have anti-sexual harassment policy?	Yes

Please analyse and indicate potential risks for this operation, its root causes and mitigation actions.

Risk	Mitigation action
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<p>Logistical risk with procurement of Mosquito coils and mosquito repellents. There is a risk of delay with the procurement of mosquito coils and mosquito repellent (Mono'i oil Repellent) as it falls under medicine procurement and will require technical validation certificate</p>	<p>The IFRC Country Cluster Delegation (CCD) Suva and IFRC Asia Pacific Regional Office (APRO) will provide technical and operational support throughout the procurement process, including assistance with the required technical validation procedures.</p> <p>In the event that the technical validation of the Mono'i oil repellent is significantly delayed, an alternative option would be to increase procurement of the other approved repellent (Bushman) to avoid disruption to planned activities.</p>
<p>Potential disaster happening during the period of implementation, which can affect the national society's capacity to respond to multiple emergencies.</p>	<ul style="list-style-type: none"> <li>- Coordination and technical support from CCD office.</li> <li>- Activation of regional surge capacities to support CIRCS.</li> <li>- Coordination and partnership with other humanitarian actors.</li> </ul>
<p>Logistical risk may arise with international / national procurement, which can arise from delays in transportation, customs issues or natural disasters or vendor supply</p>	<p>The National Society will receive support from the IFRC Logistics team to ensure efficient and transparent procurement. This includes guidance on supplier selection, contract management, and quality assurance, as well as support with transport and timely delivery of goods. The IFRC will also ensure that ERP is raised early and swiftly to prevent any delays.</p>

**Please indicate any security and safety concerns for this operation:**

The primary security and safety concern for this operation is the welfare and safety of staff and volunteers during the delivery and distribution of goods. Risks include exposure to dengue, heat stress, fatigue, and minor injuries while conducting field activities in community settings. To address these risks, CIRCS will implement clear safety protocols, including volunteer briefings, adherence to Ministry of Health guidance, use of appropriate PPE, safe handling and distribution procedures, and regular monitoring of staff and volunteer wellbeing to ensure a safe working environment throughout the operation.

The National Society security framework applies to its staff and volunteers. Should IFRC staff be deployed, the IFRC security framework will apply. Comprehensive measures will be implemented to ensure the safety and security of all RCRC personnel engaged in the operation. These measures include continuous situation monitoring, timely security updates, tracking of staff movements (via phone or WhatsApp), security assessments in operational areas, and pre-deployment security briefings.

In addition, contingency planning measures are in place, and completion of relevant IFRC e-learning courses (including Basic Knowledge and Prevention Measures for Responders, Personal Security, Security Management, and Volunteer Security) is required. The IFRC CCD security focal point maintains close coordination with humanitarian partners, National Society branches, and local authorities in operational areas.

<p>Has the child safeguarding risk analysis assessment been completed?</p>	<p>No</p>
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# Planned Intervention



**Budget:** CHF 90,718  
**Targeted Persons:** 6,750

## Indicators

Title	Target
# of people reached by epidemic preparedness and response activities	6,750



% of people using mosquito nets on a regular basis	80
# of volunteers trained in vector control	20
# of people reached with epidemic-related health promotion activities	5,000

## Priority Actions

- Train 20 volunteers on ECV
- Develop IEC materials on health promotion
- Distribution of dengue prevention kits containing mosquito repellent, mosquito coils and IEC materials to 1,350HH. Kits distributed in outer islands (400HH) contain mosquito nets.
- Conduct Awareness Raising activities on dengue prevention
- Replenishment of 150 mosquito nets
- Conduct post-distribution monitoring



## Water, Sanitation And Hygiene

**Budget:** CHF 9,287

**Targeted Persons:** 5,000

## Indicators

Title	Target
# of people receiving protection from environmental sanitation activities (i.e. solid waste management, drainage, vector control)	5,000

## Priority Actions

- Implementation of community clean-up activities and awareness sessions
- Conduct post-distribution monitoring



## Protection, Gender And Inclusion

**Budget:** -

**Targeted Persons:** 27

## Indicators

Title	Target
# of staff and volunteers trained on protection risk and safeguarding	27
# of CSRA conducted by the National Society	1

## Priority Actions

- Conduct CSRA
- Orientation for staff and volunteers on protection risks and child safeguarding

- Sex, age and disability disaggregated data to be collected to guide interventions
- PGI in emergencies minimum standards will be used to ensure DAPS approach is mainstreamed in all interventions



## Community Engagement And Accountability

**Budget:** CHF 7,589

**Targeted Persons:** 10,000

### Indicators

Title	Target
# of people reached by media campaigns	10,000
% of people surveyed who feel the National Society's support/services meets their most important needs/provides useful support	50
The National Society has a functioning feedback mechanism in place for the whole organisation (Yes =1. No=0)	1

### Priority Actions

- Conduct media campaigns
- Conduct household visits and awareness sessions
- Establish a dedicated phone line for confidential feedback



## Secretariat Services

**Budget:** CHF 33,677

**Targeted Persons:** 0

### Indicators

Title	Target
# of IFRC surge personnel deployed	1
# of monitoring visits conducted	2

### Priority Actions

- Conduct monitoring visits
- Deployment of Operations Manager surge support
- Provide continuous technical and coordination support



## National Society Strengthening

**Budget:** CHF 19,764

**Targeted Persons:** 0



## Indicators

Title	Target
# of staff and volunteers involved with the operation	27
# of lessons learned workshop conducted	1

## Priority Actions

- Provision of volunteer allowances
- Organize a lesson learned workshop

# About Support Services

## How many staff and volunteers will be involved in this operation. Briefly describe their role.

The operation will be implemented by a small, focused team of National Society staff and volunteers under clear leadership and defined roles.

Human resources for the operation

The operation will engage a total of 27 personnel, comprising 7 National Society staff members and 20 volunteers (15 volunteers in the outer island and 5 volunteer in Rarotonga).

Roles and responsibilities

National Society staff will be responsible for coordination and logistics, including sourcing and collecting items, organizing materials, and overseeing the preparation of dengue prevention and support packs. Volunteers will support the operation by assembling and packaging the kits, ensuring they are prepared efficiently and according to agreed standards.

Leadership and coordination

Overall leadership and coordination of the operation will be overseen by the National Society Secretary General, with designated staff coordinating daily activities, volunteer engagement, and pack preparation.

## Does your volunteer team reflect the gender, age, and cultural diversity of the people you're helping? What gaps exist in your volunteer team's gender, age, or cultural diversity, and how are you addressing them to ensure inclusive and appropriate support?

The CIRCS ensures that its volunteer team reflects the gender, age, and cultural diversity of the communities it serves. Volunteers include men and women of different age groups and are drawn from both urban and outer island communities, enabling culturally sensitive and context-appropriate engagement. This diversity helps CIRCS tailor messaging, outreach, and support to meet the specific needs of different groups, including children, the elderly, and socially vulnerable populations.

## Will surge personnel be deployed? If yes, please provide the role profile needed.

Yes

An Operations Manager surge will be deployed to support the CIRCS in coordinating and implementing the dengue response. The Operations Manager will have experience in humanitarian emergency operations, including logistics, planning, monitoring, and team management, and be skilled in translating strategic priorities into practical operational plans.



The role of the Operations Manager will include:

- Establishing and managing day-to-day operational systems for response activities.
- Coordinating volunteers and staff to ensure timely delivery of mosquito nets, repellents, IEC materials, and clean-up campaigns.
- Supporting the DRM Officer in operational planning, resource allocation, and reporting.
- Ensuring compliance with organizational policies, standards, and safeguarding requirements.

The Secretary General of CIRCS will maintain overall oversight and final decision-making authority for the operation, ensuring alignment with national priorities and accountability throughout the response.

## If there is procurement, will it be done by National Society or IFRC?

Procurement process will be done jointly by SRCS and IFRC CCD Suva office. Procurement will be done locally where possible with technical support from the IFRC. If there is a need for international procurement it will be done by IFRC CCD Office following standardized and approved procedures. Procured items will be distributed to the most affected communities, while some will be used for the replenishment of supplies

## How will this operation be monitored?

The operation will be closely monitored to ensure timely implementation, accountability, and effectiveness, with overall oversight provided by the Secretary General of the CIRCS. Programmatic progress will be tracked through distribution records, beneficiary lists, and daily dengue case data shared by the MoH, allowing the National Society to assess whether affected households are receiving support as planned.

Financial monitoring will be conducted using the National Society's finance system, with regular reporting and acquittals completed within two months of expenditure. Internal reporting tools and activity logs will support programmatic oversight, while IFRC monitoring visits will provide additional guidance and support throughout the response.

At the conclusion of the operation, a lesson learned workshop will be held to review outcomes, share experiences, and inform future emergency preparedness and response efforts.

## Please briefly explain the National Societies communication strategy for this operation

The National Society will implement a multi-channel communication strategy to ensure timely, transparent, and consistent information sharing with teams, partners, and affected communities.

### Communication strategy overview

The National Society will use a coordinated communication approach to support dengue prevention messaging, operational updates, and community awareness throughout the operation.

Internal communication: Internal communication will be managed through emails, Incident Management System (IMS) meetings, and coordination briefings, ensuring staff and volunteers receive timely updates on case referrals, distributions, and operational progress.

External communication and public information: External communication will be delivered through social media updates (Facebook), radio and television broadcasts, and information shared via local stakeholders, including the Ministry of Health (MoH) and Emergency Management Cook Islands (EMCI).

Community engagement and transparency: Transparent and effective communication with affected communities will be ensured through the distribution of information flyers and handouts alongside dengue prevention packs, as well as verbal messaging provided during distributions. Community-level communication will be reinforced through trusted local partners and health authorities.

Media strategy: A light media approach will be used, including Facebook posts and radio/TV messaging, to raise awareness, promote prevention behaviours, and inform the public about the National Society's response activities.

IFRC communication support: The IFRC will support the operation by providing IEC materials, which will be used in community outreach and public awareness activities. No direct IFRC media engagement is planned for this operation.



# Budget Overview



## DREF OPERATION

### MDRCK003 - Cook Islands Red Cross Society Dengue Outbreak

#### Operating Budget

<b>Planned Operations</b>	<b>107,596</b>
Shelter and Basic Household Items	0
Livelihoods	0
Multi-purpose Cash	0
Health	90,719
Water, Sanitation & Hygiene	9,287
Protection, Gender and Inclusion	0
Education	0
Migration	0
Risk Reduction, Climate Adaptation and Recovery	0
Community Engagement and Accountability	7,589
Environmental Sustainability	0
<b>Enabling Approaches</b>	<b>53,443</b>
Coordination and Partnerships	0
Secretariat Services	33,678
National Society Strengthening	19,765
<b>TOTAL BUDGET</b>	<b>161,039</b>

*all amounts in Swiss Francs (CHF)*



# Contact Information

For further information, specifically related to this operation please contact:

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[Click here for the reference](#)

