

Tonga

Research conducted in 01/11/2025

Dementia care in Tonga remains limited and highly centralized, with most diagnosis and management occurring at Vaiola Hospital, where CT is available but MRI, PET, biomarkers, and specialist neuropsychology are lacking. In the absence of formal memory services, NGOs and local charities fill critical gaps through free weekly clinics, caregiver workshops, and nationwide awareness efforts. Long-term care capacity is similarly constrained since the only structured support comes from small home-care programs run by local charity, Ma'a Fafine mo e Famili. Although broader policy frameworks recognize older people as a priority group, the country still lacks a national dementia plan and clear legal protections. Combined with cultural perceptions of cognitive decline as normal ageing, rural isolation, and shrinking family support networks, these gaps lead to late diagnosis and heavy reliance on informal caregivers. As system-strengthening initiatives and digital health reforms advance, Tonga's dementia response continues to depend on community action, NGO leadership, and a small pool of clinical capacity concentrated in the capital.

Highlights

Health system **Universal coverage with mixed funding and mixed provisions.**

ADI member association(s): **Huelo Alzheimer's Tonga**

National dementia plan: **No national strategy.**

Dementia plan funding: **No plan**

Dementia prevalence rate: **453**

Dementia incidence rate: **79**

Population: **103577**

Median age: **21**

Health expenditure (% of GDP): **8**

Diagnosis

In Tonga, dementia diagnosis usually begins in primary-care clinics, with referrals to Vaiola Hospital or regional hospitals if further assessment is needed. Diagnosis mainly relies on clinical evaluation and brief cognitive tests, as advanced diagnostics are limited. Imaging capacity is restricted to one CT scanner in the country, while MRI, PET scans, genetic testing, and biomarker testing are not available domestically and would require referral overseas. Public healthcare services are free at government facilities, but families may still face costs related to travel between islands or overseas testing. Access to diagnosis can also vary by location, with slower access on outer islands due to travel barriers and limited specialist availability.

Diagnosis pathway

In Tonga, dementia assessment usually begins in primary-care clinics run by the Ministry of Health, where nurses or general practitioners evaluate memory or behavioural concerns. If needed, patients are referred to Vaiola Hospital in Nuku'alofa, the country's main tertiary hospital, or to regional hospitals in Vava'u or Ha'apai for further evaluation. Diagnosis typically relies on clinical history, brief cognitive tests, and limited imaging such as CT when available. Community outreach by Huelo Alzheimer's Tonga, the national Alzheimer's association, also helps guide families toward medical evaluation and raises awareness about dementia. Outside major towns, access to diagnosis can be more limited due to travel barriers and the small number of specialists.

People in Tonga typically begin the dementia diagnostic process at primary-care clinics operated by the Ministry of Health, where nurses and general practitioners evaluate early memory or behavioral concerns and determine whether specialist referral is needed. When cognitive symptoms persist or worsen, patients are referred to specialists at Vaiola Hospital in Nuku'alofa, the country's main tertiary facility, or to larger island hospitals on Vava'u or Ha'apai for further assessment. Standard evaluation relies on clinical history, brief bedside cognitive tests, and—where available—basic imaging, especially CT at Vaiola. This pathway reflects Tonga's small-island health system structure, in which most specialist capacity is centralized in the capital.

However, a growing civil-society "front door" supplements the formal system. Huelo Alzheimer's Tonga, the country's ADI member association, organizes free community memory clinics, outreach days, and awareness sessions, guiding families toward formal medical evaluation and helping overcome stigma and delayed help-seeking.⁴⁵

Outside Tongatapu and the main towns of Vava'u and Ha'apai, the pathway to diagnosis is more fragmented. Families often rely on primary-care nurses, church networks, and traditional/community support for extended periods before ever reaching a specialist. This reflects broader patterns observed across small Pacific Island Countries (PICs), where travel barriers, low specialist density, and cultural beliefs contribute to late presentation.

References

- <https://global.central-uni.co.jp/case/vaiola/>
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https://www.commonwealthofnations.org/sectors-tonga/business/health_and_medical/

- https://www.facebook.com/AlzTonga/photos/how-do-you-know-if-you-have-dementia-huelo-alzheimers-tonga-is-here-to-help-you-/169707068750759/?_rdr
- <https://www.facebook.com/AlzTonga/>

Wait times

Status: No data.

Tonga does not publish official data on dementia diagnostic waiting times. Access is generally faster on Tongatapu, where Vaiola Hospital is located, but slower on outer islands due to travel distances, limited specialists, and restricted imaging capacity (one public CT scanner and no MRI). International partnerships are working to improve diagnostic services.

Tonga does not maintain a national dataset on dementia-specific waiting times. However, system constraints provide a clear indication of accessibility challenges as Vaiola Hospital has only one public CT scanner, no MRI, and very few neurological specialists. As a result, access is generally faster on Tongatapu, where Vaiola is located, and substantially slower on outer islands due to inter-island transport, weather limitations, and staffing variability. Recent health-system strengthening partnerships—including World Bank and UNOPS service-improvement programs, World Bank Pacific Health projects, as well as radiology support from RAD-AID and training partnerships with St Vincent's Hospital Melbourne aim to reduce bottlenecks.

References

- <https://phd.spc.int/sites/default/files/p-related-files/2022-08/DC57.2%20Pacific%20Radiology%20Society.pdf>
- <https://china.aiddata.org/projects/39202/>
- <https://www.unops.org/news-and-stories/news/strengthening-health-services-in-tonga>

Diagnosis cost

Status: Mostly or fully covered

Public healthcare services in Tonga are free at government facilities, including consultations, basic imaging, and inpatient care. However, families may still face out-of-pocket costs related to travel between islands, accommodation near hospitals, private consultations for faster access, or overseas diagnostic tests.

The Tongan Ministry of Health provides free public health care and essential medicines at government facilities. This includes consultations, basic imaging and inpatient care. Despite free services, dementia patients may face out-of-pocket costs for inter-island travel, accommodation near hospitals, private clinics for faster access, and overseas imaging. Tonga's national health accounts historically show low OOP expenditure due to substantial donor financing, but geographic barriers still impose financial burdens. The role of development partners, UNOPS, WHO, World Bank, Australia, and New Zealand, remains crucial in maintaining Tonga's diagnostic and treatment capacities.

References

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- <https://www.worldbank.org/en/news/press-release/2024/11/08/world-bank-grant-to-tonga-address-non-communicable-diseases-and-strengthen-health-services>
- <https://www.unops.org/news-and-stories/news/strengthening-health-services-in-tonga>
- <https://documents1.worldbank.org/curated/en/099020525073040697/pdf/P180965-a979e8ef-6040-4744-8d73-2194841b0011.pdf>

Cognitive tests

Status: Available

Tonga does not publish dementia-specific clinical guidelines. In practice, clinicians commonly use brief cognitive screening tools such as the Mini-Mental State Examination (MMSE) and the Montreal Cognitive Assessment (MoCA) during clinic visits. Formal neuropsychological testing and dedicated memory clinics are not available in the country. NGOs such as Huelo Alzheimer's Tonga may also use simple screening questions during community outreach to help identify people who may need medical evaluation.

References

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Imaging tests

Status: Commonly used

Tonga has one CT scanner at Vaiola Hospital in Nuku'alofa, introduced in 2012. MRI and PET scans are not available in the country, and patients who need these tests must be referred overseas, usually to Fiji, New Zealand, or Australia.

References

- <https://china.aiddata.org/projects/39202/>
- <https://phd.spc.int/sites/default/files/p-related-files/2022-08/DC57.2%20Pacific%20Radiology%20Society.pdf>

Genetic tests

Genetic testing for Alzheimer's disease (such as APOE, PSEN1/2, or APP testing) is not available in Tonga. Families seeking these tests must arrange private testing overseas, most commonly in Australia, New Zealand, or the United States.

References

- <https://pmc.ncbi.nlm.nih.gov/articles/PMC11471058/>

Biomarker tests

Status: Rarely used

Alzheimer's disease biomarker testing, including CSF markers (A β 42, tau, p-tau) and blood-based biomarkers, is not available in Tonga.

References

- <https://pmc.ncbi.nlm.nih.gov/articles/PMC11471058/>

Treatment & care

Public healthcare in Tonga is free at government facilities, including consultations, inpatient care, and dementia medications when available. However, families often face additional costs, especially on outer islands, such as travel to Vaiola Hospital, accommodation, and buying medicines privately when public supplies run out. Private consultations are relatively affordable but still require out-of-pocket payment, and referrals overseas for advanced tests can create further financial burdens.

Specialized facilities and services

Tonga does not have dedicated dementia clinics or specialised geriatric units. Most dementia-related care is provided through Vaiola Hospital in Nuku'alofa, the country's main referral hospital, with basic follow-up care available at hospitals in Vava'u and Ha'apai. Community support is partly provided by Huelo Alzheimer's Tonga, which organizes caregiver education, memory screening events, and referral support. Long-term and palliative care services are limited, with few residential care options and most care provided by families at home, while regional partnerships and international organisations support training and health system development.

Tonga does not have a formal network of memory clinics or dedicated dementia units. Instead, virtually all specialist dementia-related services are concentrated in Vaiola Hospital in Nuku'alofa, the country's main referral center, where clinicians manage cognitive assessment, symptomatic treatment, and follow-up. Larger hospitals on Vava'u and Ha'apai also provide basic follow-up care but lack specialized geriatric or neurology services. While formal dementia services are limited, Huelo Alzheimer's Tonga plays a critical role by offering caregiver education, community memory clinics, screening events, and referral support, helping families navigate a fragmented pathway.

Palliative care remains in early development and is primarily hospital-based as most of the clinical care is handled by Vaiola Hospital and a few private clinics. As reports indicate, Tonga has no dementia-appropriate psychiatric facility, no respite services, and only a single five-bed rest home run by a charity. In the absence of dedicated long-term care (LTC) legislation, older adults are vulnerable to abuse and neglect, and the lack of accredited training or a national quality-assurance system means that care standards cannot be consistently monitored or enforced. To improve its capacities, Tonga participates in several regional hospice training partnerships, especially through bilateral programs with New Zealand and initiatives supported by Pacific Health Fund of St. Vincent Hospital in Melbourne, Australia. At the same time, international NGOs, such as New Zealand-based Pasifika Medical Association (PMA) also provide support in strengthening Tonga's health system.

Approved medication

Generic Name	Trade Name	Used for
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Donepezil	Aricept, Aricept ODT, Adlarity, Eranz, Memac, Alzepil, Davia, Donecept, Donep, Donepex, Donesyn, Dopezil, Yasnal, Memorit, Pezale, Redumas, Zolpezil, Namzaric*	Donepezil is indicated for the symptomatic treatment of mild to moderately severe Alzheimer's dementia. Official UK medicine details (MHRA SPC) link
Rivastigmine	Exelon, Exelon Patch, Prometax, Rivastach, Nimvastid	Symptomatic treatment of mild to moderately severe Alzheimer's dementia. Symptomatic treatment of mild to moderately severe dementia in patients with idiopathic Parkinson's disease. Official UK medicine details (MHRA SPC) link
Galantamine	Razadyne, Razadyne ER, Reminyl, Reminyl XL, Nivalin, Lycoremine, Galsya	Galantamine is indicated for the symptomatic treatment of mild to moderately severe dementia of the Alzheimer type. Official UK medicine details (MHRA SPC) link
Memantine	Namenda, Namenda XR, Ebixa, Memyary, Axura, Akatinol, Maruxa, Nemdatine, Namzaric*	Treatment of adult patients with moderate to severe Alzheimer's disease. Official UK medicine details (MHRA SPC) link

*Namzaric = combination of Donepezil and Memantine

** MHRA: Medicines and Healthcare products Regulatory Agency - UK medicines regulator;

SPC: Summary of Product Characteristics - detailed product information

Treatment cost

Public healthcare in Tonga is free at government facilities, including consultations, inpatient care, and dementia medications when available. However, families often face additional costs, especially on outer islands, such as travel to Vaiola Hospital, accommodation, and buying medicines privately when public supplies run out. Private consultations are relatively affordable but still require out-of-pocket payment, and referrals overseas for advanced tests can create further financial burdens.

The Tongan Ministry of Health provides free public health services at government facilities, including symptomatic dementia medications when in stock, outpatient consultations, and inpatient care. However, families often face indirect and non-medical costs, especially on outer islands. These include inter-island travel, boat or flight expenses, accommodation near Vaiola Hospital, and costs for accompanying relatives. When medicines are out of stock or families prefer faster access, purchasing symptomatic drugs through private pharmacies can shift expenses to households. A consultation at a private facility can cost between approximately 4.22 and 12.50 USD, with higher fees for advanced care. Moreover, referrals overseas for MRI or advanced diagnostics may also generate additional financial burden and require external funding pathways.

References

- <https://www.pacificprime.com/country/australasia/tonga-health-insurance-pacific-prime/>

<https://wkc.who.int/resources/publications/i/item/9789290617198>

- <https://tongapocketguide.com/how-much-do-ferries-cost-in-tonga/>
- https://www.revenue.gov.to/sites/default/files/inline-files/Private%20Personal%20Use%20Fact%20Sheet%20Final_2.pdf
- <https://www.pacificprime.com/country/australasia/tonga-health-insurance-pacific-prime/>

Caregiver support

Tonga does not provide specific financial support for dementia caregivers. Some families may receive a universal pension (70+) or disability benefits, but most support comes from charities, churches, and community groups. Organisations such as Ma'a Fafine mo e Famili run the country's main home-care program, while small government initiatives provide limited home-based support for vulnerable older adults.

Tonga lacks direct state cash benefit specifically for dementia caregivers. The social protection system instead offers a universal pension for people aged 70+ and a disability benefit, which some families can access depending on functional impairment rules. In practice, most dementia-specific support is delivered by charities and NGOs that run support groups, caregiver skills workshops, awareness campaigns, helpline-style social media guidance, and community-based check-ins. These programs aim to improve home-based care capacities in a setting where formal long-term care services do not exist. Additional general caregiving support may occur informally through extended families, churches, and community groups, which is a common tradition in the Pacific Island societies. For example, a local charity, Ma'a Fafine mo e Famili, operates the country's only national home-care program, reaching roughly 200 clients, while the Church of Nazarene's Mango Tree Centre offers modest weekly rehabilitation.

To improve caregiver support the government started spending one 1.6 million USD per year on the Social Welfare Scheme for the Elderly in the 2010s. So far, it has implemented two distinct home-based care initiatives aimed at supporting vulnerable older people and persons with disabilities. The first, the Tonga Social Service Pilot, introduced under the Tonga Strategic Development Framework (TSDf) in 2017 provided structured home-care services to 150 high-needs clients in Tongatapu and Ha'apai. Delivered by Ma'a Fafine mo e Famili, the pilot included personal care, basic health assistance, household support, and regular check-ins to address isolation and safety concerns, demonstrating the feasibility of community-based care in a dispersed island setting. Additionally, the government established a National Aged Care Program, designed to offer ongoing home-based support to up to 200 individuals identified as having the highest care needs among an estimated 800–1,000 older adults and persons with disabilities nationwide. This program, also implemented by Ma'a Fafine mo e Famili, similarly operates in Tongatapu and Ha'apai and provides assistance with daily living, mobility, and caregiver guidance. Although independent of one another, these two initiatives together represent Tonga's only structured long-term care services, highlighting both progress in reaching the most vulnerable and the substantial unmet need that remains across remote islands.

References

- <https://p4sp.org/social-protection-in-the-region/tonga/> https://devpolicy.org/pdf/website/Tonga_Devpol_Seminar_23Oct24.pdf
- <https://www.facebook.com/AlzTonga/about/>
- <https://pdfs.semanticscholar.org/69b1/221d73ee15fc89baa3d12973ccd170bf2529.pdf>
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- <https://pdfs.semanticscholar.org/69b1/221d73ee15fc89baa3d12973ccd170bf2529.pdf>

Policy

Tonga does not have a national dementia strategy, and dementia is addressed only indirectly through broader policies such as the National Strategy for Prevention and Control of Non-Communicable Diseases (2021-2025) and the Tonga Strategic Development Framework (2015-2025), which focus on healthy ageing and support for vulnerable populations. No dementia-specific strategy is currently planned. Legal frameworks for dementia care are also limited, as there is no dedicated legislation on decision-making capacity, guardianship for adults with cognitive impairment, or elder protection. Cultural perceptions of cognitive decline as a normal part of ageing, combined with geographic isolation and limited specialist services, can further delay diagnosis and reinforce the reliance on family-based caregiving.

National dementia plan

Tonga does not have a national dementia strategy. Dementia-related actions appear indirectly in broader policies such as the National Strategy for Prevention and Control of Non-Communicable Diseases (2021-2025) and the Tonga Strategic Development Framework (2015-2025), which address healthy ageing and support for vulnerable older people.

Tonga does not have a stand-alone national dementia plan, and dementia remains largely invisible in national health policy. Instead, dementia-relevant actions appear indirectly within broader frameworks, most notably the National Strategy for Prevention and Control of Non-Communicable Diseases (NCDs) 2021–2025, which emphasizes chronic-disease management, healthy ageing, and primary-care strengthening, but does not define dementia pathways or targets. Broader ageing policy scaffolding exists through the Tonga Strategic Development Framework (TSDF) 2015–2025, whose Organisational Outcome 2.7 commits the government to “better care and support for vulnerable people, ensuring the elderly, the young, disabled, and others with particular needs continue to be supported and protected despite shrinking extended families”. This framework, along with the Universal Health Policy providing free health and dental care for all older people, establishes a general rights-based environment but lacks dementia-specific policy instruments, clinical protocols, or a coordinated national plan.

References

- https://www.iccp-portal.org/sites/default/files/plans/Persevering_Together_Through_the_Crisis_to_a_Healthier_Tonga.pdf
- <https://www.adb.org/sites/default/files/linked-documents/cobp-ton-2017-2019-ld-03.pdf>
- <https://pdfs.semanticscholar.org/69b1/221d73ee15fc89baa3d12973ccd170bf2529.pdf>

Upcoming plans

Tonga currently has no planned dementia-specific strategy. Dementia is not explicitly addressed in national policy updates, although it may indirectly fall within broader efforts to support healthy ageing and manage non-communicable diseases.

While no dementia-focused strategy has been announced, several system-development processes may indirectly benefit dementia services. Current government priorities include health-system strengthening, digital health rollout (National Health Information System), and NCD service expansion supported by partners such as UNOPS and the World Bank. These investments are expected to improve referrals, data management, and continuity of care. The redevelopment of the Prince Wellington Ngu Hospital in Vava'u, Tonga, is a key component of the government's Health Enhancement and Resilience in Tonga (HEART) project funded by World Bank and UNOPS. Its overarching goals are to combat NCDs and improve access to resilient health services, especially for remote populations in Tonga's northern islands. The project will help dementia patients by improving overall healthcare infrastructure, strengthening primary care, and enhancing the health system's ability to manage NCDs, which includes risk factors related to cognitive decline. However, none of these emerging policy areas currently address dementia explicitly, but they form a potential foundation for future integration.

References

- <https://www.tonga-nhis.org/2021/>
- <https://reliefweb.int/report/tonga/strengthening-health-services-tonga>
- <https://www.worldbank.org/en/news/press-release/2024/11/08/world-bank-grant-to-tonga-address-non-communicable-diseases-and-strengthen-health-services>

Policy gaps

Legal barriers

Tonga does not have dementia-specific legislation addressing decision-making capacity, guardianship for adults with cognitive impairment, or elder protection. Existing laws mainly cover pensions or general family matters and do not establish clear frameworks or standards for dementia care or long-term care services. As a result, most care responsibilities fall to families and informal support networks.

Tonga has no dementia-specific legislation governing capacity, substitute decision-making, driving fitness, guardianship, or elder protection. Existing legal instruments, such as the Guardianship Act, which primarily addresses general custody and family matters, do not provide a framework for assessing cognitive capacity in adults with dementia. Moreover, the National Retirement Benefits Scheme Act remains the only legislation explicitly targeting older adults, but it only covers pensions without addressing care rights or protections. Crucially, Tonga lacks an elder-abuse law, a formal reporting system, or enforceable standards for long-term care providers. Stakeholder interviews documented increasing cases of unreported neglect and abuse, particularly in multigenerational homes affected by poverty, with older people expressing frustration that "there are laws for everything except laws to protect us." Without a legal framework for quality assurance, accreditation, or professional standards in LTC and cognitive care, families and providers must navigate care responsibilities informally, often without rights-based safeguards.

References

- https://ago.gov.to/cms/images/LEGISLATION/PRINCIPAL/2004/2004-0008/GuardianshipAct_2.pdf
- https://ago.gov.to/cms/images/LEGISLATION/PRINCIPAL/2010/2010-0041/NationalRetirementBenefitsSchemeAct2010_1.pdf
- <https://pdfs.semanticscholar.org/69b1/221d73ee15fc89baa3d12973ccd170bf2529.pdf>

Cultural barriers

Cognitive decline is sometimes perceived as a normal part of ageing, which can delay help-seeking. Older adults may feel their concerns are minimized within families, while caregiving responsibilities are largely expected to remain within the family. Geographic isolation and limited specialist services also contribute to late diagnosis and delayed access to care.

Cultural norms also inhibit early diagnosis and structured support. As in many small-island societies, cognitive decline is often viewed as normal ageing, and stigma around mental and neurological conditions discourages families from seeking timely help. Qualitative research findings show that older Tongans frequently feel their concerns are minimized within families, and community expectations place the bulk of caregiving on relatives regardless of capacity or burden. These beliefs, combined with geographic isolation and limited specialist availability, contribute to very late presentation, often when symptoms have become severe. Stakeholders across consultations advocated for public awareness campaigns, risk-reduction messaging, and pathway development, emphasizing the need for culturally grounded education to shift perceptions of dementia from a private family matter to a health condition requiring assessment and support.

Research

Tonga does not have Alzheimer's disease clinical trials, dementia registries, or dementia-specific research programs. There are also no known innovative diagnostic or treatment initiatives related to dementia. The main relevant institutions are Tonga National University and Vaiola Hospital, which serve as the country's primary academic and medical centres.

Selected academic institutions

[Tonga National University](#) [Vaiola Hospital](#)

Clinical trials and registries

No AD or dementia-related interventional clinical trials are registered as recruiting or active in Tonga on major international trial registries. A search of ClinicalTrials.gov shows no location entries for Tonga and there is no national research ethics infrastructure dedicated to dementia trials. When appropriate, clinicians may advise families about opportunities for overseas participation, typically in New Zealand or Australia, but these referrals are rare due to cost, travel, and eligibility constraints. Tonga therefore remains outside global AD trial networks, following the example of other underdeveloped PICs.

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References

- [ClinicalTrials.gov](#)

Selected innovative methods

Tonga currently does not have dementia-specific research or technological innovations.

Given the absence of dementia-specific technologies or local neurology research, Tonga's primary innovations occur at the health-system level rather than at the disease level. The most significant developments include the rollout of a National Health Information System (NHIS) and broader e-government health projects, which aim to integrate patient data, strengthen referral tracking, and improve continuity of care across Tonga's multi-island geography.

References

<https://www.tonga-nhis.org/what-is-the-nhis/>

- <https://phd.spc.int/sites/default/files/p-related-files/2023-03/2023%20PHIN%20Agenda%2013%20ID%203.3%20Tonga%20experience%20in%20implementing%20national%20digital%20health%20interventions.pdf>

Support

Dementia support in Tonga is mainly driven by community initiatives rather than formal national programs. Activities are led primarily by Huelo Alzheimer's Tonga, which organizes awareness campaigns, caregiver workshops, and free memory clinics. Regional Pacific initiatives have also promoted the culturally adapted term "mangalo" for dementia to improve culturally appropriate understanding. Tonga does not have dedicated dementia media outlets, and coverage typically appears only occasionally in general news platforms such as Matangi Tonga Online.

Organizations are listed for informational purposes based on publicly available sources. Inclusion does not necessarily indicate affiliation with or endorsement by Alzheimer's Disease International (ADI).

Selected national associations, patient family associations, NGOs:

[Huelo Alzheimer's Tonga](#) [Ma'a Fafine mo e Famili](#)

Selected initiatives

Key awareness initiatives include community education and screening activities led by Huelo Alzheimer's Tonga, such as free memory clinics and caregiver workshops during World Alzheimer's Month. Regional Pacific initiatives have also promoted the culturally adapted term "mangalo" for dementia to improve awareness and culturally appropriate understanding within Tongan and wider Pacific communities.

Mangalo

In March 2023, Tongan health leaders in New Zealand have coined the term "mangalo" to describe dementia in a culturally appropriate way for Pacific communities. This new term helps to overcome the lack of a Pacific word for dementia and addresses the cultural insensitivity of Western assessments. The project, supported by regional organizations like Pacific Dementia Mangalo, aims to provide more culturally relevant support for families affected by dementia.

Pacific Dementia Mangalo Workshop

During New Zealand's Mental Health Awareness Week 2024, the Aotearoa Tongan Health Workers Association (ATHWA) hosted a Pacific Dementia Māngalo Workshop to promote culturally grounded dementia education and reduce stigma within Pacific communities. The workshop brought together people living with dementia, family caregivers, and community members, using Pacific-based models, such as the Tongan 'Uloa collective-care approach, to strengthen understanding, encourage early help-seeking, and emphasize the role of family and community in dementia support. Framed around the MHAW theme "community is what we create together," the initiative highlighted the importance of social connection, culturally resonant explanations of dementia, and community-led strategies to improve well-being for Pacific families affected by cognitive decline.²

World Alzheimer's Month

In 2022, Huelo Alzheimer's Tonga marked World Alzheimer's Month with an unusually early start to its national awareness campaign. Activities began in June, when Dr. Ma'u led a workshop for caregivers and frontline health workers, launching a multi-month effort to improve dementia literacy across the Kingdom. This was followed by a large free memory clinic, which drew over 130 attendees, reflecting strong community demand for dementia screening and support. Building on this turnout, Huelo Alzheimer's Tonga continued to operate a weekly free clinic at Universal Pharmacy in Nuku'alofa throughout the subsequent months, providing ongoing assessment, guidance, and caregiver counselling. Their messaging publicly thanked families who traveled from all parts of the country to bring loved ones for evaluation, underscoring both the reach of the initiative and the heavy reliance on caregivers in a setting with limited formal dementia services. The same event was repeated in the following years.

References

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- <https://www.facebook.com/AlzTonga/posts/pfbid0WXkhRhJQfuB2iu88hN3qzYXnGLhbw3KBtWZUWGNtKnAjWHppArAvksdTNcKCaZyfl>

Dedicated media outlets

Tonga does not have dedicated dementia media outlets. Dementia-related topics occasionally appear in general news platforms such as Matangi Tonga Online, usually in connection with awareness events or activities organized by Huelo Alzheimer's Tonga.

References

- <https://www.facebook.com/AlzTonga/>
- <https://matangitonga.to/>