



General data

POPULATION, 2023

PHYSICIANS / 1,000 INH, 2021

Socioeconomic data

COUNTRY INCOME LEVEL, 2022

GDP PER CAPITA (US\$), 2023

HEALTH EXPENDITURE (% GDP), 2021

UNIVERSAL HEALTH COVERAGE, 2021



WHO FRAMEWORK FOR PALLIATIVE CARE DEVELOPMENT

- ④ EMPOWERMENT OF PEOPLE AND COMMUNITIES
- ③ POLICIES
- ② RESEARCH
- ① USE OF ESSENTIAL MEDICINES
- ⑤ EDUCATION AND TRAINING
- ⑥ PROVISION OF PC

LEVEL OF DEVELOPMENT



Consultants: Data gathered through literature and AI tools.
National Association: -
Data collected: October 2024–March 2025
Report validated by consultants: No
Endorsed by National PC Association: -
Edition: Edited by Atlantes Research Team (University of Navarra, Spain).

Vatican City

F Provision of PC (Specialised Services)

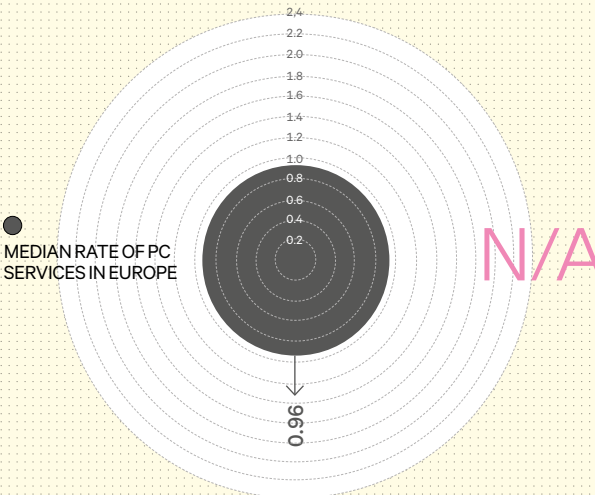
Total number of Specialised PC services

0

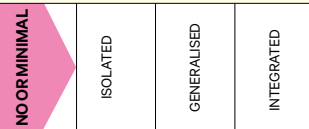
Rate of PC services per 100,000 inhabitants

N/A

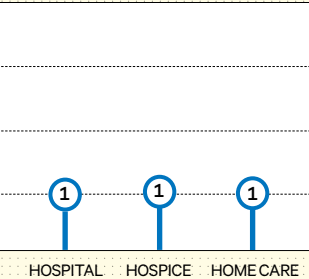
Holy See in the context of European region



Geographic distribution and integration of PC services



Level of development of different types of PC services



Paediatric PC Services

GEOGRAPHIC DISTRIBUTION AND INTEGRATION



TOTAL NUMBER

1



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D Use of essential medicines

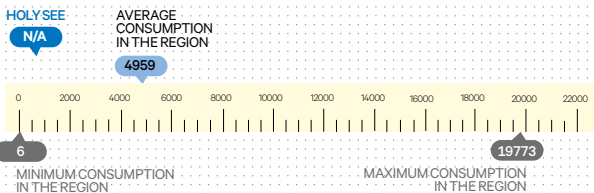


Opioids consumption (excluding methadone)

N/A

S-DDD/MILL INHABITANTS/DAY

Holy see in the context of European region



Overall availability of essential medicines for pain and PC at the primary level



IN URBAN AREAS %

N/A

IN RURAL AREAS %

N/A

General availability of immediate-release oral morphine at the primary level

IN URBAN AREAS %

N/A

IN RURAL AREAS %

N/A

General availability of different opioids and in different formulations at the primary level

IN URBAN AREAS %

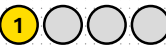
N/A

IN RURAL AREAS %

N/A

C Research

PC-related research articles



Inclusion of PC topics in National Research Calls



Existence of PC congresses or scientific meetings



E Education & Training

Medical schools with mandatory PC teaching



N/A

Nursing schools with mandatory PC teaching



N/A

PC Full Professors

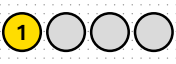


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Recognition of PC specialty

B Policies

National PC plan or strategy



Responsible authority for PC in the Ministry of Health



Inclusion of PC in the basic health package at the primary care level



A Empowerment of people and communities







Groups promoting the rights of PC patients







Advanced care planning-related policies



EU Vatican City

Ind1 Existence of groups dedicated to promoting the rights of patients in need of PC, their caregivers, and disease survivors.	 Existence of group(s) that cover palliative care in a more integrated way or over a wider range of disease/programme areas.	There are groups dedicated to promoting the rights of patients in need of palliative care, their caregivers, and disease survivors in Vatican City and associated with the Catholic Church. The most prominent of these is the Pontifical Academy for Life (PAV), which has taken a leading role in advocating for palliative care globally. The Pontifical Academy for Life (PAV) is a Vatican-based institution that has been actively promoting palliative care development worldwide. In 2017, they launched an international project called "PAL-LIFE: An International Advisory Working Group on diffusion and development of palliative care in the world". This project aims to: a) Promote greater sensitivity in Christian communities and civil society regarding palliative care development, b) Interact with academic institutions and scientific organisations to promote palliative care, and c) Work with various stakeholders to implement concrete palliative care initiatives.
Ind2 Is there a national policy or guideline on advance directives or advance care planning?	 There is no national policy or guideline on advance care planning.	There is no specific national policy or guideline on advance directives or advance care planning that is unique to Vatican City.
Ind3 3.1. There is a current national PC plan, programme, policy, or strategy. 3.2. The national palliative care plan (or programme or strategy or legislation) is a standalone.	 Not known or Does not exist.  Not known or does not exist neither standalone nor is included in another national plan.	While there is no specific national palliative care plan, programme, policy, or strategy unique to Vatican City, the Vatican, through the Pontifical Academy for Life (PAV), has taken a leading role in promoting and developing palliative care initiatives globally. These efforts, while not limited to Vatican City itself, reflect the Vatican's stance on palliative care and influence Catholic healthcare institutions worldwide.

EU Vatican City

3.3. There are indicators in the national plan to monitor and evaluate progress, with measurable targets.	 Not known or does not exist.	
Ind4 PC services are included in the list of priority services for Universal Health Coverage at the primary care level in the national health system.	 Not at all.	No evidence found.
Ind5 5.1. Is there a national authority for palliative care within the government or the Ministry of Health?	 There is no authority defined.	There is no specific national authority for palliative care within the government or Ministry of Health in Vatican City. However, the Vatican, through the Pontifical Academy for Life (PAV), plays a significant role in promoting and developing palliative care initiatives globally.
5.2. The national authority has concrete functions, budget and staff.	 Does not have concrete functions or resources (budget, staff, etc.).	

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<div>Ind6</div> <div>Existence of congresses or scientific meetings at the national level specifically related to PC.</div>	<div><div><div></div><div>2</div><div></div><div></div></div></div> <div>Only sporadic or non-periodical conferences or meetings related to palliative care take place.</div>	<div>There are congresses and scientific meetings related to palliative care that have taken place in Vatican City, though they are typically international in scope rather than strictly national.</div>
<div>Ind7:1</div> <div>Estimation of the level of peer-reviewed articles focusing on PC research published in any language in the past 5 years with at least one author from the country.</div>	<div><div><div>1</div><div></div><div></div><div></div></div></div> <div>Minimal or non-existent number of articles published on the subject.</div>	<div>No evidence found.</div>
<div>Ind7:2</div> <div>Inclusion of PC topics in national research calls.</div>	<div><div><div></div><div>2</div><div></div><div></div></div></div> <div>Although there are national research calls, no PC topics are ever included.</div>	<div>No evidence found.</div>
<div>Ind8</div> <div>Reported annual opioid consumption –excluding methadone– in S-DDD per million inhabitants per day.</div>		

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<div>Ind9</div> <div>9.1. Percentage of health facilities at the primary care level in Urban areas that have pain and PC medications as defined in the WHO Model List of Essential Medicines.</div> <div>9.2. Percentage of health facilities at the primary care level in rural areas that have pain and PC medications as defined in the WHO Model List of Essential Medicines.</div>		
<div>Ind10:1</div> <div>10.1.1. Percentage of health facilities at the primary care level in urban areas that have immediate-release oral morphine (liquid or tablet).</div> <div>10.1.2. Percentage of health facilities at the primary care level in rural areas that have immediate-release oral morphine (liquid or tablet).</div>		
<div>Ind10:2</div> <div>10.2.1. Percentage of health facilities at the primary care level in urban areas that have different opioids and in different formulations.</div> <div>10.2.2 Percentage of health facilities at the primary care level in rural areas that have different opioids and in different formulations.</div>		

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Ind11		
11.1. The proportion of medical schools with COMPULSORY teaching in PC (with or without other optional teaching)	N/A	
11.2. The proportion of medical schools with OPTIONAL teaching in PC.	N/A	
11.3. The proportion of nursing schools with COMPULSORY teaching in PC (with or without other optional teaching).	N/A	
11.4. The proportion of nursing schools with OPTIONAL teaching in PC.	N/A	
11.5. PC Full Professors	0	
11.6. Legislation/regulations concerning PC education	N/A	
Ind12		
Existence of an official specialisation process in palliative medicine for physicians, recognised by the competent authority in the country.		

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Ind13		
13.1. There is a system of specialised PC services or teams in the country that has a GEOGRAPHIC reach and is delivered through different service delivery platforms.	 <p>No or minimal provision of palliative care specialised services or teams exist in the country.</p>	While there are no specialised palliative care services specifically within Vatican City, the Vatican has been actively promoting and supporting palliative care initiatives both locally and globally. Its population may benefit from Roman palliative care providers.
13.2. Are available in HOSPITALS (public or private), such as hospital PC teams (consultation teams), and PC units (with beds), to name a few examples.	 <p>Not at all.</p>	
13.3. Free-standing HOSPICES (including hospices with inpatient beds).	 <p>Not at all.</p>	
13.4. HOME CARE teams (specialised in PC) are available in the community (or at the primary Healthcare level), as independent services or linked with hospitals or hospices.	 <p>Not at all.</p>	
13.5. Total number of specialised PC services or teams in the country.		
Ind14		
14.1. There is a system of specialised PC services or teams for children in the country that has geographic reach and is delivered through different service delivery platforms.	 <p>Isolated provision: palliative care specialised services or teams for children exist but only in some geographic areas.</p>	Tough no physically in Vatican, they opened Bambino Gesù Hospital, which is the Vatican's pediatric hospital, Bambino Gesù, that opened a new palliative care center near Rome in March 2022. It is the largest palliative care center for children in Italy, with 30 beds, aiming to provide a home-like atmosphere for terminally ill children and their families. It has already welcomed Ukrainian refugee patients, demonstrating its commitment to vulnerable populations.
14.2. Number of pediatric specialised PC services or teams in the country.	 <p>PPC TEAMS</p>	