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General data

POPULATION, 2023
28,873,034

PHYSICIANS/1000 INH, 2020-2022
0.18

NURSES/1000 INH, 2020-2022
0.8

LIFE EXPECTANCY, 2022
66.20

Socioeconomic data

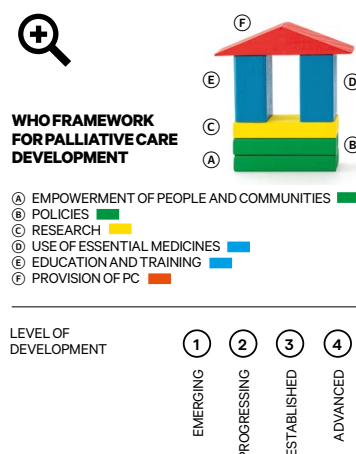
COUNTRY INCOME LEVEL, 2022
Lower middle income

HUMAN DEVELOPMENT INDEX RANKING, 2023
162

GDP PER CAPITA (US\$), 2023
2,477.98

HEALTH EXPENDITURE, 2021
80.52

UNIVERSAL HEALTH COVERAGE, 2021
41



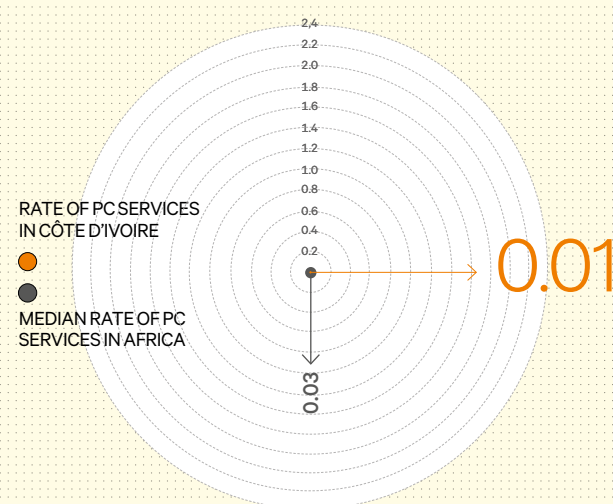
Côte d'Ivoire

F Provision of PC (Specialised Services)

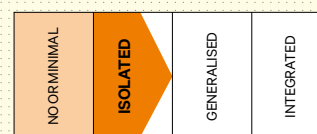
Total number of Specialised PC services **2**

Rate of PC services per 100,000 inhabitants **0.01**

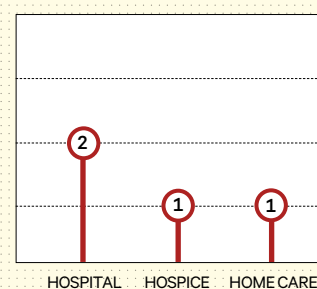
Côte d'Ivoire in the context of African continent



Geographic distribution and integration of PC services



Level of development of different types of PC services



Paediatric PC Services

GEOGRAPHIC DISTRIBUTION AND INTEGRATION **1**

TOTAL NUMBER **0**

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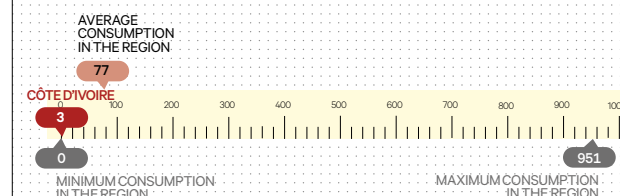
Côte d'Ivoire

D Use of essential medicines

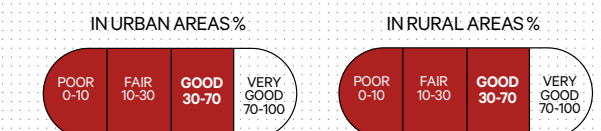
Opioids consumption (excluding methadone) **3**

S-DDD/MILL INHABITANTS/DAY

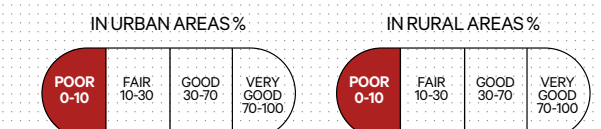
Côte d'Ivoire in the context of African continent



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



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



C Research

PC-related research articles

1

Existence of PC congresses or scientific meetings

2



National Association: Association de Soins Palliatifs de Côte d'Ivoire (ASPI).

Consultants: Gnahatin Franck; Kouakou Etienne Efo.

Data collected: From December 2023 to March 2024.

Date validated by consultants: Yes

Endorsed by National PC Association: No

Edition: Edited by Atlantes Research Team (University of Navarra, Spain).

E Education & Training

Medical schools with mandatory PC teaching **0/2**

Nursing schools with mandatory PC teaching **0/2**

Recognition of PC specialty **1**

B Policies

National PC plan or strategy **3**

Responsible authority for PC in the Ministry of Health **2**





Inclusion of PC in the basic health package at the primary care level **4**

A Empowerment of people and communities





Groups promoting the rights of PC patients **4**

Advanced care planning-related policies **1**

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Ind1 Existence of groups dedicated to promoting the rights of patients in need of PC, their care-givers, and disease survivors.	 4 Advanced Strong national and sub-national presence of palliative care advocacy and promoting patient rights (as a professional association of Palliative Care, i.e.).	Founded in 2010, the Palliative Care Association of Côte d'Ivoire (ASPI) promotes the development of quality palliative care for people living with chronic illnesses. The association also engages in advocacy efforts aimed at increasing governmental recognition of palliative care, including its integration into the National Health Development Plan.
Ind2 Is there a national policy or guideline on advance directives or advance care planning?	 1 There is no national policy or guideline on advance care planning.	No evidence found.
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.	 3 Actualized in last 5 years, but not actively evaluated or audited.  3 There is a dedicated section on palliative care contained within another national plan such as for cancer, NC diseases or HIV.	Côte d'Ivoire adopted a national palliative care policy in 2005. Since then, no updated standalone policy has been published. More recently, palliative care has been incorporated into the National Strategic Plan for Cancer Control 2022–2025. The plan identifies palliative care as a key component of cancer care and includes measures such as the promotion of home-based services, integration into public health facilities, and strengthening of psychosocial and nutritional support for patients. It also includes specific indicators to monitor progress and assess the impact of palliative care activities.

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3.3. There are indicators in the national plan to monitor and evaluate progress, with measurable targets.	 2 The indicators to monitor and evaluate progress with clear targets exist but have not been yet implemented.	
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.	 4 Palliative care is included in the list of health services provided at the primary care level in the General Health Law.	Law No. 2019-677 of 23 July 2019, which outlines public health policy in Côte d'Ivoire, explicitly includes palliative care as a patient right. Article 83, under Chapter II on increasing service utilisation, states that “when required by their health condition, patients have the right to access palliative care and appropriate support, in respect of human dignity.” This legal provision recognises palliative care as an essential service integrated into the national health system and aligned with the principles of Universal Health Coverage.
Ind5 5.1. Is there a national authority for palliative care within the government or the Ministry of Health? 5.2. The national authority has concrete functions, budget and staff.	 2 The authority for palliative care is defined but only at political level without coordinating entity defined.  1 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>Ind7</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 in that country.</div>	<div>A comprehensive scoping review conducted in March 2023, covering publications from 2017 onward, identified one peer-reviewed article on palliative care in Côte d'Ivoire that met the inclusion criteria for this indicator.</div>
<div>Ind8</div> <div>Reported annual opioid consumption –excluding methadone– in S-DDD per million inhabitants per day.</div>	<div><div><div></div><div>3</div></div><div>S-DDD PER MILLION INHAB /DAY</div></div>	<div>Average consumption of opioids, in defined daily doses for statistical purposes (S-DDD) per million inhabitants per day, 2020–2022.</div> <div><div>COUNTRY VS REGION</div><div><div><div>AVERAGE CONSUMPTION IN THE REGION</div><div>77</div></div><div><div>CÔTE D'IVOIRE</div><div>3</div></div><div><div>MINIMUM CONSUMPTION IN THE REGION</div><div>0</div></div><div><div>MAXIMUM CONSUMPTION IN THE REGION</div><div>951</div></div></div></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 palliative care 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 palliative care medications as defined in the WHO Model List of Essential Medicines.</div>	<div><div><div></div><div></div><div>3</div><div></div></div></div> <div>Good: Between 30% to 70%.</div> <div><div><div></div><div></div><div>3</div><div></div></div></div> <div>Good: Between 30% to 70%.</div>	<div>In Côte d'Ivoire, 17 essential medicines from the WHO Model List for Palliative Care are included in the 2019 Pharmaceutical Index. Eight of these are available from Level D (Rural Health Centers) to Level A (University Hospitals and National Specialized Institutes), thus covering primary care facilities in urban areas. The other nine medicines are limited to specialized centers, restricting their accessibility to the primary care level.</div>
<div>Ind10</div> <div>10.1. Percentage of health facilities at the primary care level in urban areas that have immediate-release oral morphine (liquid or tablet).</div> <div>10.2. Percentage of health facilities at the primary care level in rural areas that have immediate-release oral morphine (liquid or tablet).</div>	<div><div><div>1</div><div></div><div></div><div></div></div></div> <div>Poor: Between 0% to 10%.</div> <div><div><div>1</div><div></div><div></div><div></div></div></div> <div>Poor: Between 0% to 10%.</div>	<div>In Côte d'Ivoire, morphine is listed in the 2019 Pharmaceutical Index. However, its availability begins at the secondary level of care, specifically in Regional Hospitals (CHR) and General Hospitals (HG). It is not accessible at the primary healthcare level.</div>

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<div>Ind11</div> <div><div>11.1. The proportion of medical schools with COMPULSORY teaching in PC (with or without other optional teaching)</div><div>11.2. The proportion of medical schools with OPTIONAL teaching in PC.</div><div>11.3. The proportion of nursing schools with COMPULSORY teaching in PC (with or without other optional teaching).</div><div>11.4. The proportion of nursing schools with OPTIONAL teaching in PC.</div></div>	<div>0/2</div> <div>NA/2</div> <div>0/2</div> <div>NA/2</div>	<div></div> <div>Côte d'Ivoire has two medical schools, located in Abidjan and Bouaké, as well as the Institut Universitaire des Sciences de la Santé, which oversees nursing schools with branches in several cities including Abidjan, Bouaké, Daloa, Aboisso, Abengourou, and Korhogo. PC is not included as a mandatory subject in any of these institutions, and its inclusion as an optional subject could not be independently confirmed.</div>
<div>Ind12</div> <div><div>Existence of an official specialisation process in palliative medicine for physicians, recognised by the competent authority in the country.</div></div>	<div><div>1</div><div></div><div></div><div></div><div></div></div> <div>There is no process on specialization for palliative care physicians.</div>	<div>No evidence found.</div>

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<div>Ind13</div> <div><div>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.</div><div>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.</div><div>13.3. Free-standing HOSPICES (including hospices with inpatient beds).</div><div>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.</div><div>13.5. Total number of specialised PC services or teams in the country.</div></div>	<div><div><div></div><div>2</div><div></div><div></div><div></div></div><div>Isolated provision: Exists but only in some geographic areas.</div></div> <div><div><div></div><div>2</div><div></div><div></div><div></div></div><div>Progressing. Ad hoc/ in some parts of the country.</div></div> <div><div><div>1</div><div></div><div></div><div></div><div></div></div><div>Not at all.</div></div> <div><div><div>1</div><div></div><div></div><div></div><div></div></div><div>Not at all.</div></div>	<div>Even though 11 services were previously reported—two hospice services, two hospital-based services, and seven home-based palliative care services—recent information from national consultants indicates that only two services are currently active. Palliative care is mainly delivered in a fragmented manner through disease-specific programmes such as those addressing HIV/AIDS and cancer. This corresponds to an estimated ratio of 0.01 services per 100,000 inhabitants.</div> <div><div>RATE OF SPECIALISED PC SERVICES/100,000 INH</div><div><div><div>MEDIAN RATE IN THE REGION</div><div>0.03</div></div><div><div>CÔTE D'IVOIRE</div><div>0.01</div></div><div><div>0</div><div>MINIMUM RATE IN THE REGION</div></div><div><div>1.68</div><div>MAXIMUM RATE IN THE REGION</div></div></div><div>2</div><div>← SPECIALISED PALLIATIVE CARE SERVICES</div></div>
<div>Ind14</div> <div><div>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.</div><div>14.2. Number of pediatric specialised PC services or teams in the country.</div></div>	<div><div><div>1</div><div></div><div></div><div></div><div></div></div><div>No or minimal provision of palliative care specialized services or teams for children exists in country.</div></div> <div><div>0</div><div>PPC TEAMS</div></div>	<div>Palliative care for children is provided through adult services.</div>