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**General data**

POPULATION, 2023  
**231,856**

PHYSICIANS/1000 INH, 2020-2022  
-

NURSES/1000 INH, 2020-2022  
-

LIFE EXPECTANCY, 2022  
**70.08**

**Socioeconomic data**

COUNTRY INCOME LEVEL, 2022  
**Low income**

HUMAN DEVELOPMENT INDEX RANKING, 2023  
**141**

GDP PER CAPITA (US\$), 2023  
**2,940.93**

HEALTH EXPENDITURE, 2021  
**186.11**

UNIVERSAL HEALTH COVERAGE, 2021  
**59**



**WHO FRAMEWORK FOR PALLIATIVE CARE DEVELOPMENT**

- Ⓐ EMPOWERMENT OF PEOPLE AND COMMUNITIES
- Ⓑ POLICIES
- Ⓒ RESEARCH
- Ⓓ USE OF ESSENTIAL MEDICINES
- Ⓔ EDUCATION AND TRAINING
- Ⓕ PROVISION OF PC



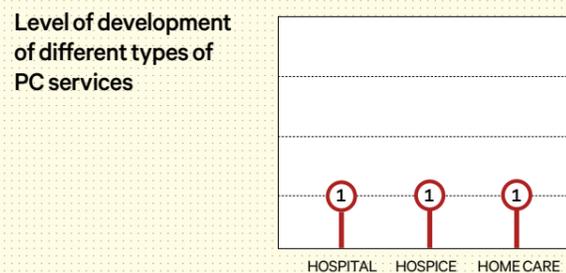
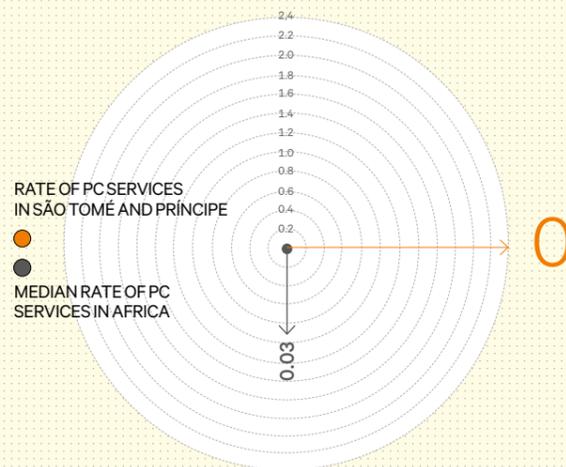
# São Tomé and Príncipe

**F Provision of PC (Specialised Services)**

Total number of Specialised PC services **0**

Rate of PC services per 100,000 inhabitants **0**

São Tomé and Príncipe in the context of African continent



**Paediatric PC Services**

Geographic distribution and integration **1**

Total number **0**

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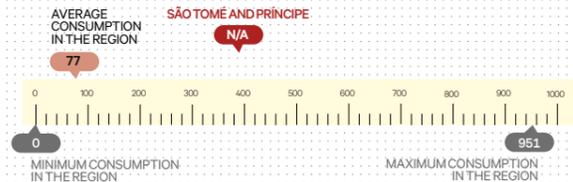
# São Tomé and Príncipe

**D Use of essential medicines**

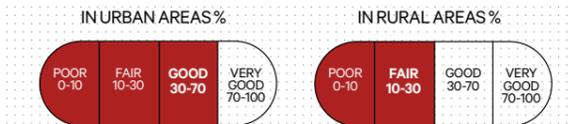
Opioids consumption (excluding methadone) **N/A**

S-DDD/MILL INHABITANTS/DAY

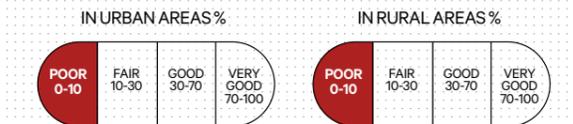
São Tomé and Príncipe in the context of African continent



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 **1**



National Association: No.

Consultants: Inês Egídio de Sousa.

Data collected: From December 2023 to March 2024.

Date validated by consultants: Yes

Endorsed by National PC Association: N/A.

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

**E Education & Training**

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

Nursing schools with mandatory PC teaching **0/1**

Recognition of PC specialty **1**

**B Policies**

National PC plan or strategy **1**

Responsible authority for PC in the Ministry of Health **1**

Inclusion of PC in the basic health package at the primary care level **1**

**A Empowerment of people and communities**

Groups promoting the rights of PC patients **1**

Advanced care planning-related policies **1**

# AF São Tomé and Príncipe

<p><b>Ind1</b></p> <p>Existence of groups dedicated to promoting the rights of patients in need of PC, their care-givers, and disease survivors.</p>	<p>1 ○ ○ ○ ○</p> <p>Only isolated activity can be detected.</p>	<p>In São Tomé and Príncipe, there are no known patient or care-giver groups formally dedicated to promoting the rights of individuals in need of palliative care. However, in April 2023, a training course in continuing and palliative care was delivered as part of the Health for All project. Organised by the Instituto Marquês de Valle Flôr (IMVF) with support from Portuguese Cooperation, I.P. and the Directorate-General of Health, the initiative contributed to raising awareness and building initial capacity in palliative care, although it did not involve the creation of a patient advocacy organisation.</p>
<p><b>Ind2</b></p> <p>Is there a national policy or guideline on advance directives or advance care planning?</p>	<p>1 ○ ○ ○ ○</p> <p>There is no national policy or guideline on advance care planning.</p>	
<p><b>Ind3</b></p> <p>3.1. There is a current national PC plan, programme, policy, or strategy.</p> <p>3.2. The national palliative care plan (or programme or strategy or legislation) is a standalone.</p>	<p>1 ○ ○ ○ ○</p> <p>Do not know or does not exist.</p> <p>1 ○ ○ ○ ○</p> <p>Not known or does not exist neither standalone nor is included in another national plan.</p>	<p>There is interest in developing palliative care but still no official government document or publication regarding palliative care exists (national program or strategy).</p>

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<p>3.3. There are indicators in the national plan to monitor and evaluate progress, with measurable targets.</p>	<p>1 ○ ○ ○ ○</p> <p>Do not know or does not exist.</p>	
<p><b>Ind4</b></p> <p>PC services are included in the list of priority services for Universal Health Coverage at the primary care level in the national health system.</p>	<p>1 ○ ○ ○ ○</p> <p>Not at all.</p>	<p>There is no national legal framework regarding palliative care in São Tomé and Príncipe. The Lei de Base da Saúde (Lei n.º 09/2018) does not mention palliative care. However, the provision of continuous care has recently started as part of integrated care in primary health services.</p>
<p><b>Ind5</b></p> <p>5.1. Is there a national authority for palliative care within the government or the Ministry of Health?</p> <p>5.2. The national authority has concrete functions, budget and staff.</p>	<p>1 ○ ○ ○ ○</p> <p>There is no coordinating entity.</p> <p>1 ○ ○ ○ ○</p> <p>Does not have concrete functions or resources (budget, staff, etc.).</p>	

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<p><b>Ind6</b></p> <p>Existence of congresses or scientific meetings at the national level specifically related to PC.</p>	<p><b>1</b> ○ ○ ○ ○</p> <p>There are no national congresses or scientific meetings related to palliative care.</p>	
<p><b>Ind7</b></p> <p>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.</p>	<p><b>1</b> ○ ○ ○ ○</p> <p>Minimal or non-existent number of articles published on the subject in that country.</p>	<p>A comprehensive scoping review conducted in March 2023, covering publications from 2017 onward, did not identify any peer-reviewed articles on palliative care in São Tomé and Príncipe that met all the inclusion criteria for this indicator.</p>
<p><b>Ind8</b></p> <p>Reported annual opioid consumption –excluding methadone– in S-DDD per million inhabitants per day.</p>		<p>No Data Reported for São Tomé and Príncipe.</p>

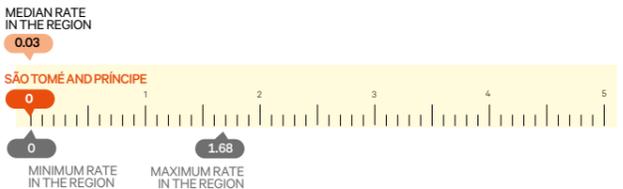
# AF São Tomé and Príncipe

<p><b>Ind9</b></p> <p>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.</p> <p>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.</p>	<p><b>3</b> ○ ○ ○ ○</p> <p>Good: Between 30% to 70%.</p> <p><b>2</b> ○ ○ ○ ○</p> <p>Fair: Between 10% to 30%</p>	<p>São Tomé and Príncipe has a national list of medicines, validated in July 2018, and an essential medicines list (LNME). However, until LNME 2023, there was no specific section for palliative care medicines. In 2024, essential palliative care medicines were finally included. Despite this progress, the pharmaceutical supply chain within the National Health Services remains inefficient, leading to frequent stockouts, especially in rural areas. While most essential medicines or therapeutic alternatives are available (except methadone and fluoxetine), their inconsistent supply limits access for patients in need.</p>
<p><b>Ind10</b></p> <p>10.1. Percentage of health facilities at the primary care level in urban areas that have immediate-release oral morphine (liquid or tablet).</p> <p>10.2. Percentage of health facilities at the primary care level in rural areas that have immediate-release oral morphine (liquid or tablet).</p>	<p><b>1</b> ○ ○ ○ ○</p> <p>Poor: Between 0% to 10%.</p> <p><b>1</b> ○ ○ ○ ○</p> <p>Poor: Between 0% to 10%.</p>	<p>Immediate-release oral morphine at the primary care level is not available; only tramadol is documented to be available.</p>

# AF São Tomé and Príncipe

<p><b>Ind11</b></p> <p>11.1. The proportion of medical schools with <b>COMPULSORY</b> teaching in PC (with or without other optional teaching)</p> <p>11.2. The proportion of medical schools with <b>OPTIONAL</b> teaching in PC.</p> <p>11.3. The proportion of nursing schools with <b>COMPULSORY</b> teaching in PC (with or without other optional teaching).</p> <p>11.4. The proportion of nursing schools with <b>OPTIONAL</b> teaching in PC.</p>	<p>0/0</p> <p>0/0</p> <p>0/1</p> <p>0/1</p>	<p></p> <p>There are no medical schools in the country and, as per nursing education, there is no formal training in palliative care within the existing curriculum.</p>
<p><b>Ind12</b></p> <p>Existence of an official specialisation process in palliative medicine for physicians, recognised by the competent authority in the country.</p>	<p></p> <p>There is no process on specializa-tion for palliative care physicians.</p>	<p>Currently there is no process for specialization or advanced training but it is being developed. There was a basic course, promoted by an NGO.</p>

# AF São Tomé and Príncipe

<p><b>Ind13</b></p> <p>13.1. There is a system of specialised PC services or teams in the country that has a <b>GEOGRAPHIC</b> reach and is delivered through different service delivery platforms.</p> <p>13.2. Are available in <b>HOSPITALS</b> (public or private), such as hospital PC teams (consultation teams), and PC units (with beds), to name a few examples.</p> <p>13.3. Free-standing <b>HOSPICES</b> (including hospices with inpatient beds).</p> <p>13.4. <b>HOME CARE</b> 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> <p>13.5. Total number of specialised PC services or teams in the country.</p>	<p></p> <p>No or minimal provision of palliative care specialized services or teams exist in the country.</p> <p></p> <p>Not at all.</p> <p></p> <p>Not at all.</p> <p></p> <p>Not at all.</p>	<p>There are no specialized palliative care services available in the country.</p> <p>RATE OF SPECIALISED PC SERVICES/100,000 INH</p>  <p>← SPECIALISED PALLIATIVE CARE SERVICES</p> <p></p>
<p><b>Ind14</b></p> <p>14.1. There is a system of specialised PC services or teams for <b>children</b> in the country that has geographic reach and is delivered through different service delivery platforms.</p> <p>14.2. Number of pediatric specialised PC services or teams in the country.</p>	<p></p> <p>No or minimal provision of palliative care specialized services or teams for children exists in country.</p> <p></p> <p>PPC TEAMS</p>	<p>There are no palliative care services available in the country.</p>