

General data

POPULATION, 2024
93,772

SURFACE KM², 2022
440

PHYSICIANS/1000 INH, 2021
N/A

NURSES/1000 INH, 2021-2022
N/A

Socioeconomic data

COUNTRY INCOME LEVEL, 2022
High

HUMAN DEVELOPMENT INDEX RANKING, 2023
53

GDP PER CAPITA (US\$), 2023
21,787.10

HEALTH EXPENDITURE PER CAPITA (US\$), 2021
923.41

UNIVERSAL HEALTH COVERAGE, 2021
76



WHO FRAMEWORK FOR PALLIATIVE CARE DEVELOPMENT

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

LEVEL OF DEVELOPMENT

- ① EMERGING
- ② PROGRESSING
- ③ ESTABLISHED
- ④ ADVANCED

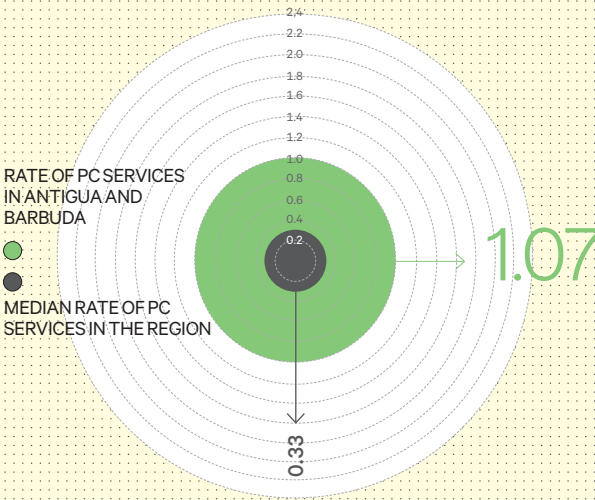
Antigua and Barbuda

⑥ Provision of PC (Specialized Services)

Total number of Specialized PC services
1

Rate of PC services per 100,000 inhabitants
1.07

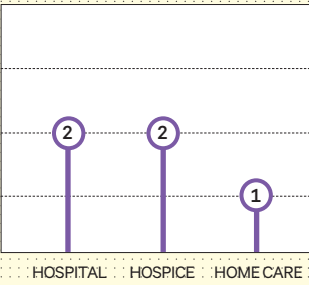
Antigua and Barbuda in the context of the region



Geographic distribution and integration of PC services



Level of development of different types of PC services



Pediatric PC Services

GEOGRAPHIC DISTRIBUTION AND INTEGRATION
1

TOTAL NUMBER
0

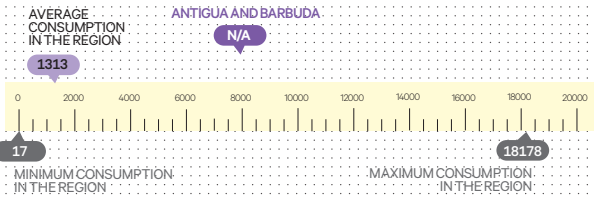


Antigua and Barbuda

④ Use of essential medicines

Opioids consumption (excluding methadone)
N/A
S-DDD/MILL INHABITANTS/DAY

Antigua and Barbuda in the context of the region



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



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



③ Research

PC-related research articles
1

Existence of PC congresses or scientific meetings
1



Consultants: Cherie Tulloch.
National Association: -

Data collected: November 2024-June 2025
Report validated by consultants: Yes
Endorsed by National PC Association: -
Edition: Edited by Atlantes Research Team (University of Navarra, Spain).

⑤ Education & Training

Medical schools with mandatory PC teaching
0/2

Nursing schools with mandatory PC teaching
0/1

Recognition of PC specialty
1

② 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

① Empowerment of people and communities

Groups promoting the rights of PC patients
1

Advanced care planning-related policies
1

AM

Antigua and Barbuda

People & Communities

Ind1

Existence of groups dedicated to promoting the rights of patients in need of PC, their care-givers, and disease survivors.



Only isolated activity can be detected.

There is no national PC association in Antigua and Barbuda. However, cancer support organizations provide assistance to individuals diagnosed with cancer, although their focus is not specifically on PC. The Antigua and Barbuda Cancer Support Community (ABCSC) offers medical assistance and monetary donations to cancer survivors and their families. Additionally, the Caribbean Cancer Portal, a regional initiative, aims to improve the quality of life for individuals affected by cancer by enhancing knowledge about prevention and care, and supporting informed decision-making regarding health and treatment. This platform provides resources that may benefit cancer patients in Antigua and Barbuda.

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.

Antigua and Barbuda currently has no specific national policy, legislation, or guidelines addressing advance care planning related to medical decisions for the use of life-sustaining treatment or end-of-life care.

Policies

Ind3

3.1. There is a current national PC plan, program, policy, or strategy.



Do not know or does not exist.

3.2. The national palliative care plan (or program or strategy or legislation) is a standalone.



Not known or does not exist neither standalone nor is included in another national plan.

Antigua and Barbuda does not currently have a national PC plan, program, policy, or strategy with a defined implementation framework. Plans are underway to develop a national strategy aimed at eliminating cervical cancer in alignment with the WHO 90/70/90 targets, which will include care for individuals diagnosed with advanced cervical cancer requiring palliation. While there is no specific PC strategy, the National Policy and Plan of Action on Healthy Ageing (2017-2027) highlights the need to enhance training opportunities in end-of-life and PC for healthcare workers and caregivers.

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Antigua and Barbuda

Policies

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.

PC is not explicitly mentioned in the current National Strategic Plan for Health of Antigua and Barbuda. Nevertheless, it is incorporated into the primary healthcare services offered within the public health system. According to WHO data, PC is generally accessible at the primary care level across the country. Furthermore, the National Policy and Plan of Action on Healthy Ageing (2017-2027) highlights the importance of ensuring availability, accessibility, affordability, and quality of primary healthcare, including long-term and community-based care services.

Ind5

5.1. Is there a national authority for palliative care within the government or the Ministry of Health?



There is no coordinating entity.

The Ministry of Health, Wellness, and Environment in Antigua and Barbuda does not have a dedicated department or authority specifically responsible for cancer care or PC. Between 2015 and 2023, the ministry collaborated with The Cancer Centre of the Eastern Caribbean (TCCEC) to offer radiation therapy services. However, following TCCEC's closure in 2023, patients now access radiation therapy and other specialized cancer services abroad through the Ministry's Medical Benefits Scheme. At present, there is no standalone cancer care unit within the ministry, nor is there a separate national authority overseeing PC.

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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Antigua and Barbuda

Research

Ind6

Existence of congresses or scientific meetings at the national level specifically related to PC.



There are no national congresses or scientific meetings related to palliative care.

There is no information available indicating that Antigua and Barbuda hosts national congresses or scientific meetings specifically dedicated to PC.

Ind7

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.



Indicates a minimal or non-existent number of articles published on the subject in that country.

PC research specific to Antigua and Barbuda is scarce, with no peer-reviewed articles authored by researchers from the country.

Medicines

Ind8

Reported annual opioid consumption –excluding methadone– in S-DDD per million inhabitants per day.

N/A

AM

Antigua and Barbuda

Medicines

Ind9

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.



Good: Between 30% to 70%.

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.



Poor: Between 0% to 10%.

The availability of essential medicines for pain and PC at the primary care level in Antigua and Barbuda is rated as good in urban areas. Medications available include acetylsalicylic acid, ibuprofen, paracetamol (acetaminophen), codeine, fentanyl, morphine, amitriptyline, dexamethasone, diazepam, docusate sodium, fluoxetine, haloperidol, hyoscine butylbromide, hyoscine hydrobromide, loperamide, metoclopramide, midazolam, and ondansetron, with palonosetron listed as a therapeutic alternative. The percentage of health facilities at the primary care level in rural areas with these medications is not known.

Ind10

10.1. Percentage of health facilities at the primary care level in urban areas that have immediate-release oral morphine (liquid or tablet).



Poor: Between 0% to 10%.

10.2. Percentage of health facilities at the primary care level in rural areas that have immediate-release oral morphine (liquid or tablet).



Poor: Between 0% to 10%.

The general availability of immediate-release oral morphine (liquid or tablet) at the primary care level in Antigua and Barbuda is limited.

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Antigua and Barbuda

Education & Training

Ind11

11.1. The proportion of medical schools with **COMPULSORY** teaching in PC (with or without other optional teaching)

0/2



In Antigua and Barbuda, there are two medical schools: the University of Health Sciences Antigua (UHSA) and the American University of Antigua (AUA). Neither institution includes PC as a compulsory or optional subject in their undergraduate curricula. Additionally, the country has one nursing school, also at the UHSA, which does not offer PC education as either a compulsory or optional component of its program.

11.2. The proportion of medical schools with **OPTIONAL** teaching in PC.

0/2

11.3. The proportion of nursing schools with **COMPULSORY** teaching in PC (with or without other optional teaching).

0/1

11.4. The proportion of nursing schools with **OPTIONAL** teaching in PC.

0/1

Ind12

Existence of an official specialization process in palliative medicine for physicians, recognised by the competent authority in the country.



There is no process on specialization for palliative care physicians.

There is no available process for specialization in palliative medicine for physicians within Antigua and Barbuda. **Individuals eligible for training in PC may receive government support to pursue specialization abroad.** All medical doctors and nurses are required to meet the general licensure requirements established by their respective professional councils to provide healthcare services in the country.

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Antigua and Barbuda

Provision of PC / Specialized Services

Ind13

13.1. There is a system of Specialized PC services or teams in the country that has a **GEOGRAPHIC** reach and is delivered through different service delivery platforms.



No or minimal provision of palliative care specialized services or teams exist in the country.

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.



Ad hoc/ in some parts of the country.

13.3. Free-standing **HOSPICES** (including hospices with inpatient beds).



Ad hoc/ in some parts of the country.

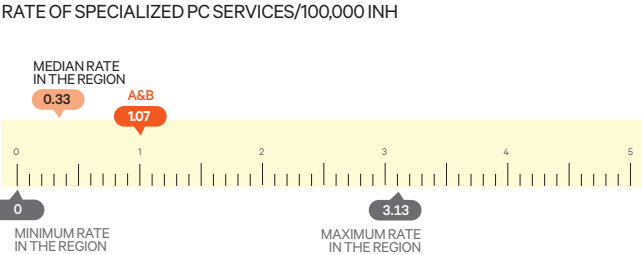
13.4. **HOME CARE** teams (Specialized in PC) are available in the community (or at the primary Healthcare level), as independent services or linked with hospitals or hospices.



Not at all.

13.5. Total number of Specialized PC services or teams in the country.

Antigua and Barbuda has one specialized PC service, the **St. John's Hospice**, a non-profit organization located in St. John's. It provides nine beds for terminally ill patients and two beds for short-term nursing care. Established in January 2012, it is overseen by a Board of Directors, with the Governor General, His Excellency Sir Rodney Williams, serving as Patron. There are no specialized PC teams associated with either the hospice or hospital that operate within the community to provide PC services. In Antigua y Barbuda, the services ratio is 1.07 per 100,000 inhabitants.



1
← SPECIALIZED PALLIATIVE CARE SERVICES

Ind14

14.1. There is a system of Specialized PC services or teams for **children** in the country that has geographic reach and is delivered through different service delivery platforms.



No or minimal provision of palliative care specialized services or teams for children exists in country.

14.2. Number of pediatric Specialized PC services or teams in the country.



In Antigua and Barbuda, there are no specialized PC services available for children.