



## POPULATION, 2024 1,588,670

General data

PHYSICIANS/1000 INH, 2020-2022

N/A

### Socioeconomic data

COUNTRY INCOME LEVEL, 2022

High

HUMAN DEVELOPMENT INDEX RANKING, 2023 38

GDP PER CAPITA (US\$), 2023

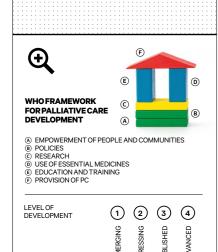
29.218.86

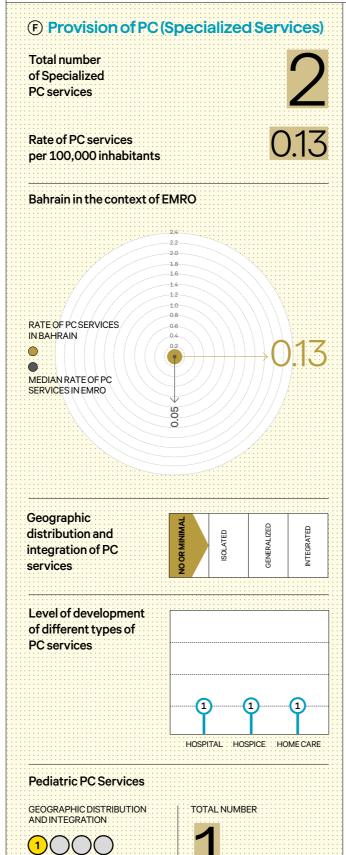
HEALTH EXPENDITURE 2021

1,146.47

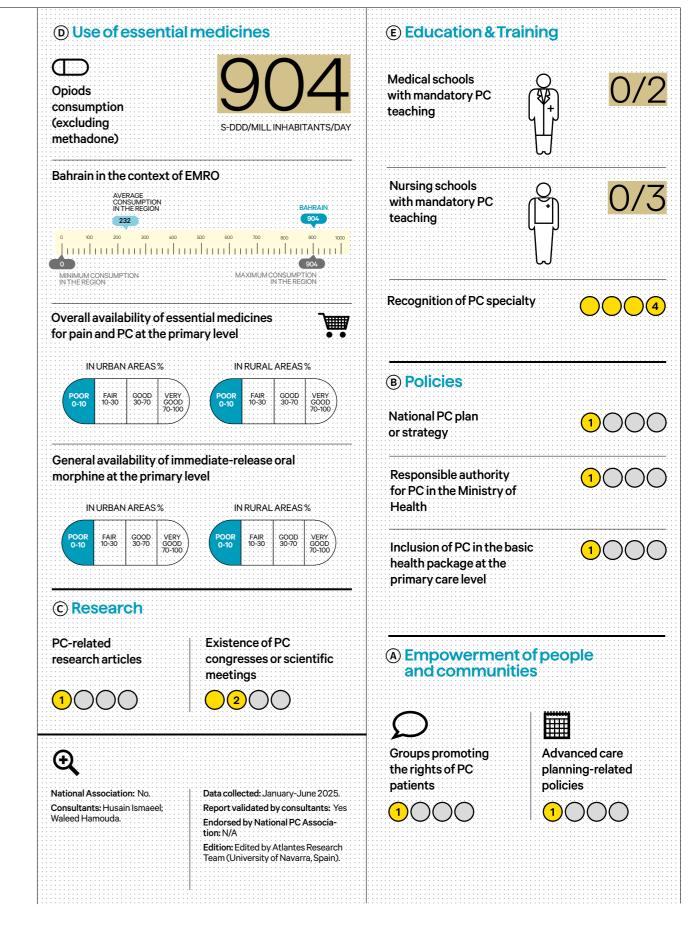
UNIVERSAL HEALTH COVERAGE, 2021

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## Bahrain





## Bahrain

## Ind1

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



Only isolated activity can be detected.

There is no documented evidence of a dedicated national patient advocacy group for palliative care in Bahrain. While palliative care services are in their early stages, formal groups specifically promoting the rights of patients requiring palliative care, their caregivers, or disease survivors have not been identified in the  $available\,literature.\,Professional\,organizations\,and\,oncology$ nursing staff at major hospitals, such as Salmaniya Medical Complex, provide some support to patients and families. Additionally, there are regional collaborations through conferences and hospital-based initiatives. However, overall advocacy efforts remain limited.

### 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.

Bahrain does not have a published, comprehensive national policy or guideline specifically addressing advance care planning for life-sustaining treatment or end-of-life care. Although the National Health Regulatory Authority outlines general healthcare policies, these do not include provisions for palliative care-specific advance care planning. Do-not-resuscitate orders and code status discussions are not practiced, and decisions related to palliative care are generally made by patients' families rather than through structured, formalized procedures. Efforts to develop such policies have recently begun.

## Ind3

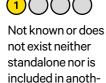
3.1. There is a current national PC plan, program, policy, or strategy.



Do not know or does not exist.

palliative care services, and integration into the mainstream health system remains limited.

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



er national plan.

1000

Bahrain does not have a current national palliative care plan, program, policy, or strategy with a defined implementation framework. The country is in the early stages of developing

Bahrain

3.3. There are indicators Policies 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.

Palliative care is not explicitly included in Bahrain's national Universal Health Coverage (UHC) benefit package or defined as part of the priority health services. Currently, palliative care services are primarily offered to cancer patients who have exhausted curative treatment options, with a limited scope and integration within the broader health system.

## Ind5

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

5.2. The national

staff.



There is no coordinating entity.

1000 authority has concrete Does not have functions, budget and

concrete functions or resources (budget, staff, etc.).

Bahrain does not have a designated national authority, department, or unit within the Ministry of Health solely responsible for palliative care. There is no available published information indicating the existence of a dedicated structure, staff, specific functions, organizational responsibilities, or budget allocated to palliative care at the national level.



## Bahrain

## Ind6

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



Only sporadic or non-periodical conferences or meetings related to palliative care take place.

Bahrain hosts scientific meetings that include palliative care topics, such as the Bahrain Conference on Oncology and Palliative Care, which is co-organized by government hospitals and partner institutions. However, there is no further evidence of national congresses or scientific meetings dedicated exclusively to palliative care.

## 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 nonexistent number of articles published on the subject in that country.

Few palliative care-related articles from Bahrain are indexed in international academic databases; specific figures for 2020-2025 are not available. Although recent qualitative studies have explored oncology nurses' experiences with terminally ill patients, palliative care is not a prominent focus within national research agendas. Between 1991 and 2020, only two articles with Bahrain-affiliated authors were published in palliative care journals, accounting for 0.5% of total publications from the Eastern Mediterranean Region.

## Ind8

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

Average consumption of opioids, in defined daily doses (S-DDD) for statistical purposes per million inhabitants per day, 2022.



S-DDD PER MILLION INHAB /DAY

COUNTRY VS REGION MINIMUM CONSUMPTION IN THE REGION MAXIMUM CONSUMPTION

## **Bahrain**

## Ind9

Medicines

-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.

-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%.

Access to essential pain and palliative care medications at the primary level in Bahrain is limited. The country faces barriers to opioid access, including policy restrictions and insufficient professional expertise.

# (1)

Poor: Between 0% to 10%.

## Ind 10

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

-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%.



Poor: Between 0% to 10%.

 $The \, general \, availability \, of \, immediate\text{-}release \, or al \, morphine$  $(liquid\ or\ tablet)\ at\ the\ primary\ level\ in\ Bahrain\ is\ limited.\ There$ is no documented evidence of the consistent availability of immediate-release oral morphine or other opioid formulations in either public or private healthcare sectors.



## Bahrain

### **Ind 11**

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

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

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

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









Bahrain has two accredited medical schools-Arabian Gulf University (AGU) and the Royal College of Surgeons in Ireland - Medical University of Bahrain (RCSI Bahrain)—and three accredited nursing schools, including RCSI Bahrain, King Hamad University Hospital Healthcare Academy, and AGU. There is no direct evidence indicating that palliative care is formally integrated as a mandatory or optional component in the undergraduate curricula of either medical or nursing programs.

### **Ind 12**

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



Palliative medicine is a speciality or subspeciality (another denomination equivalent) recognized by competent national authorities.

Bahrain's National Health Regulatory Authority (NHRA) officially recognizes "Hospice and Palliative Medicine" as a medical specialty for physician licensing. This recognition is documented in the NHRA's Physicians Qualifications Require $ments\, and\, licensing\, standards.\, A\, 2022\, comparative\, analysis\, of$ palliative care in the Eastern Mediterranean Region identifies Bahrain, alongside countries such as Saudi Arabia, Qatar, Iran, and Jordan, as recognizing palliative care as a medical subspecialty. This regulatory acknowledgment enables physicians in Bahrain to obtain licensure specifically in the field of palliative medicine.

## Bahrain

## Ind<sub>13</sub>

Services

Specialized

Provision of PC/

 13.1. There is a system of specialized PC services or teams in the country that has a GEOGRAPH-IC reach and is delivered through different service delivery platforms.

- 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.

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

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.

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



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



Not at all

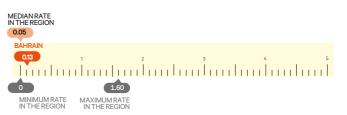
Bahrain does not have a national network of specialized palliative care services. Existing services are limited and primarily delivered within oncology departments of major hospitals, such as the Salmaniya Medical Complex. These services focus mainly on adult cancer patients, and there are no reports of dedicated pediatric palliative care services in national literature or international surveys. The scope and availability of specialized palliative care teams remain minimal across the country.

(1)No or minimal pro-

vision of PC specialized services or teams exist.

(1)

No or minimal provision of palliative care specialized services or teams exist in the country. RATE OF SPECIALIZED PC SERVICES/100.000 INH





← SPECIALIZED PAI I IATIVE **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.

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



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



Bahrain does not have specialized palliative care services or teams dedicated to children. Palliative care is primarily offered within oncology departments of major hospitals,  $such \, as \, Salmaniya \, Medical \, Complex, and \, focuses \, mainly \, on \,$ adult patients. There are no dedicated pediatric palliative care services documented in national literature or international surveys.