COUNTRY REPORTS COUNTRY REPORTS



# GRENADA Saint George's 113000000

### General data

POPULATION, 2024 117,207

SURFACE KM<sup>2</sup>, 2022

340

PHYSICIANS/1000 INH, 2021

N/A

NURSES/1000 INH, 2021-2022

N/A

### Socioeconomic data

COUNTRY INCOME LEVEL, 2022

### Uppermiddle

HUMAN DEVELOPMENT INDEX RANKING, 2023

99......

GDP PER CAPITA (US\$), 2023

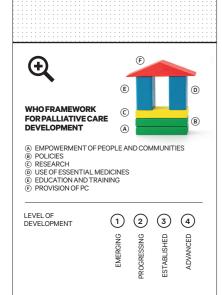
11,246.35

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

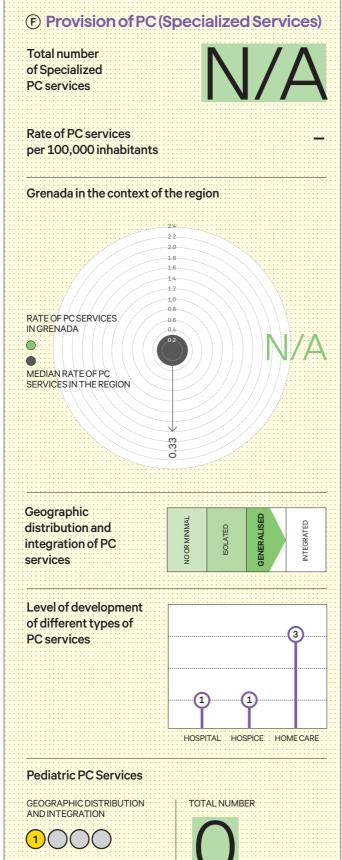
505.4

:UNIVERSAL:HEALTH:COVERAGE, 2021

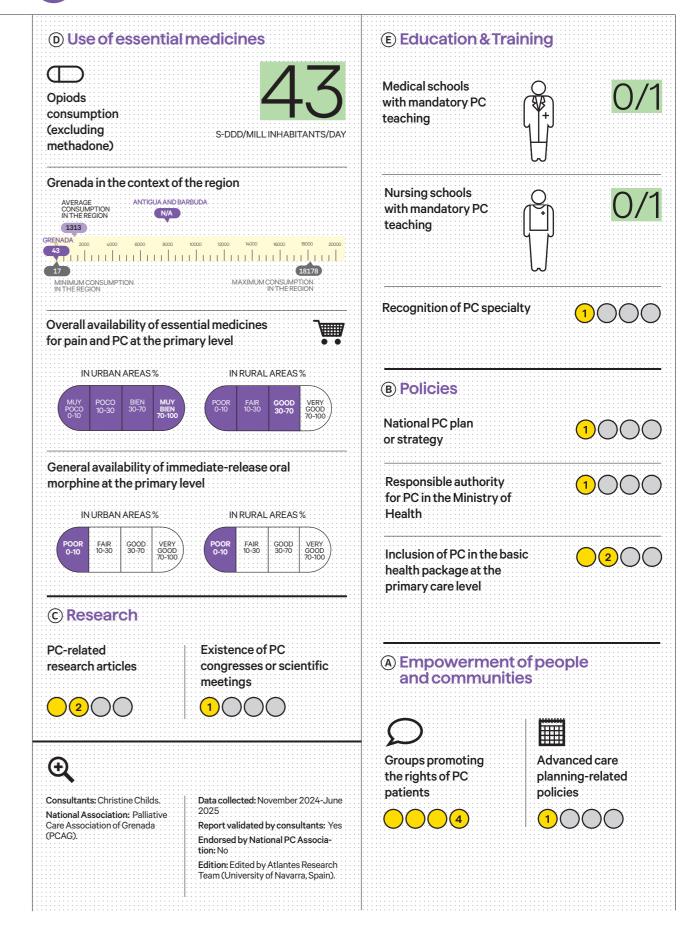
70







# M Grenada



# **AM** Grenada

### Ind1

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



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Strong national and sub-national presence of palliative care advocacy and promoting patient rights (as a professional association of Palliative Care, i.e.). The Palliative Care Association of Grenada (PCAG), led by the Iota Epsilon Alpha Honor Society at St. George's University School of Medicine, is a dedicated voluntary organization advocating for the rights of patients needing PC, their caregivers, and disease survivors. Established on March 18, 2015, and affiliated with WINDREF, PCAG promotes quality of life, dignity, and compassionate care for individuals facing serious life-threatening illnesses. PCAG plays a role in advocacy, education, and policy development, working to establish national standards for PC and appropriate medication regulation in Grenada. The organization also fosters a network of healthcare professionals, families, and communities to enhance PC delivery. The association has not updated its website or social media since 2017.

### Ind2

Is there a national policy or guideline on advance directives or advance care planning?



There is no national policy or quideline on advance care planning.

Grenada does not currently have a national policy or formal guidelines for advance directives or advance care planning. However, some information on advance directives is available. These documents allow individuals to specify their preferences for medical treatment, including the choice to pursue aggressive interventions to prolong life. Advance directives can be stored in various locations, such as a lawyer's office, an individual's home, or an electronic health record (EHR). If recorded in an EHR, healthcare providers and medical personnel can access the directive in the event of a medical emergency. In cases where an individual does not have an advance directive and is unable to make medical decisions, state laws dictate who is authorized  $to\,make\,decisions\,on\,their\,behalf.\,Typically, this\,responsibility$ falls to a spouse, parent, or adult child.

# 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.



er national plan.

Grenada does not have a standalone national PC plan, program, policy, or strategy, nor is PC explicitly included as a dedicated section in a broader national health strategy. While the National Chronic Non-Communicable Disease (CNCD) Policy and Multisectoral Action Plan (2013-2017) referenced PC, this document is now outdated. While the National Strategic Plan for Health (2016-2025) provides a broad framework for equitable healthcare access, it does not contain specific indicators for PC. However, the CNCD Action Plan (2013-2017) did include a measurable target (increasing opioid consumption by 50% by 2017), though it is now outdated. Despite this, PC access and medication procurement remain part of broader national health monitoring efforts. Ministry of Health and Social Security government of Grenada. National Chronic Non-Communicable Dis**Policies** 

# **AM** Grenada

3.3. There are indicators in the national plan to monitor and evaluate progress, with measurable targets.



The indicators to monitor and evaluate progress with clear targets exist, but have not been implemented.

ease Policy And Multisectoral Action Plan For Grenada (2013-2017) Grenada. 2013.

## 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.



Included in the essential list of services recognized by a government decree or law but not in the General Health Law.

Grenada aligns with WHO recommendations to integrate PC into national health policies under the UHC framework. PC is recognized as a priority service at the primary care level. However, it is not explicitly mentioned in the General Health Law (Public Health Act) or its amendments.

### 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 and Social Security in Grenada oversees healthcare services, including PC. However, there is no dedicated national authority or specialized body for PC. Instead, PC is coor $dinated\,through\,primary\,health care\,services, hospitals, and\,local$ health centers, with involvement from healthcare professionals.

5.2. The national authority has concrete functions, budget and staff.



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

Does not have



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Ind6

Research

Existence of congresses or scientific meetings at the national level

specifically related to PC.



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

As of January 2025, there are no specific national congresses or scientific meetings dedicated to PC scheduled in Grenada.

### 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.





Reflects a limited number of articles published.

In the past five years, peer-reviewed research on PC involving Grenadian-affiliated authors has been limited, though notable contributions do exist. These publications demonstrate continued efforts to tackle PC challenges in the Caribbean, with meaningful engagement from Grenadian researchers.

### 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.



S-DDD PER MILLION

COUNTRY VS REGION



MINIMUM CONSUMPTION IN THE REGION

MAXIMUM CONSUMPTION IN THE REGION

# M Grenada

### 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.



Very good: Between 70% to 100%.



Good: Between 30% to 70%.

Specific data on the availability of pain and PC medications at the primary healthcare level in Grenada is not readily available. However, several reports provide general insights into essential medicine availability: The Strategic Plan for Health 2016-2025 notes that the availability of essential medicines, particularly for chronic diseases, was about 85% in 2014, with distribution challenges causing stock-outs in community pharmacies. The 2023 Rapid Assessment Report by the Healthy Caribbean Coalition emphasizes equitable access to essential medicines but lacks specific data on PC medications. Additionally, the last published National Essential Medicines List (NEML) in 2007 excluded 218 medicines from the WHO model list, affecting the availability of key PC drugs. While these reports highlight general medicine availability, precise figures for pain and PC medications at the primary level, especially in urban areas, remain unclear.

### 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%.

Specific data on the availability of immediate-release or al morphine in primary healthcare facilities in Grenada is not readily available. However, regional studies suggest that opioid availability, including immediate-release oral morphine, is generally low across Latin America and the Caribbean, indicating that its presence in primary healthcare facilities may be limited.



# **AM** Grenada

### **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.











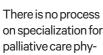
Grenada has one university with medical and nursing schools, but no dedicated PC module is explicit in its curriculum. Nonetheless, PC is integrated into geriatric care training, and some of its elements are taught through optional courses, such as "Clinical, Ethical, and Neuroscience Aspects of Pain."

### **Ind 12**

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



sicians.



As of January 2025, Grenada lacks an official specialization in palliative medicine recognized by the Grenada Medical and Dental Council (GMDC). While PC is part of medical education, there is no formalized pathway for physicians to specialize in the field locally. St. George's University (SGU) offers the "Palliative Care for Healthcare Providers" program, which equips healthcare professionals with skills in symptom management, end-of-life care, and bereavement support, but it is not a formal specialization. Physicians seeking advanced training typically pursue fellowship programs abroad, such as in the United States, where they receive in-depth training in hospice and PC to manage complex symptoms and provide comprehensive end-of-life care.

# M Grenada

### Ind<sub>13</sub>

Services

Specialized

**Provision** 

- 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.



Generalized provision: Exists in many parts of the country but with some gaps.



Not at all.

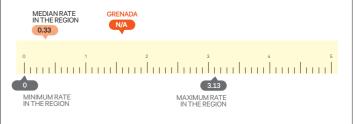
PC in Grenada is primarily community-based, led by the Palliative Care Association of Grenada (PCAG), which promotes home-based support. The country has 10 nursing homes and 4 home care agencies offering specialized PC services. Volunteer organizations and non-profits also play a key role in supporting patients and families. Grenada lacks free-standing hospices or a structured hospital-based palliative care system. While some hospitals provide pain management and end-of-life care, these services are integrated into general medical or oncology departments rather than dedicated PC units.



Not at all.

(3)







← 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.
- 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.



PPC **TEAMS**  Public and private healthcare facilities in Grenada may provide some palliative support for children with chronic or terminal illnesses. However, the country lacks specialized pediatric PC units, trained staff, and dedicated funding, resulting in nonspecialized and inconsistent services nationwide.

ATLAS OF PALLIATIVE CARE IN AMERICA 2025