



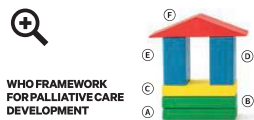
General data

POPULATION, 2023  
**800,005**  
SURFACE, KM², 2022  
**28,900**  
PHYSICIANS / 1,000 INH, 2022  
**N/A**

Socioeconomic data

COUNTRY INCOME LEVEL, 2022  
**Lower-middle**  
HUMAN DEVELOPMENT INDEX RANKING, 2021  
**155**  
GDP PER CAPITA (US\$), 2023  
**2041,64**  
HEALTH EXPENDITURE (% GDP), 2021  
**4,76**  
UNIVERSAL HEALTH COVERAGE, 2021  
**47**

Note: For the purposes of this study, we have included hospice care, end-of-life care, and palliative care concepts under the umbrella of palliative care as a whole.



WHO FRAMEWORK FOR PALLIATIVE CARE DEVELOPMENT

- Ⓐ EMPOWERMENT OF PEOPLE AND COMMUNITIES
- Ⓑ EDUCATION AND TRAINING
- Ⓒ USE OF ESSENTIAL MEDICINES
- Ⓓ RESEARCH
- Ⓔ EMPLOYMENT OF PEOPLE AND COMMUNITIES



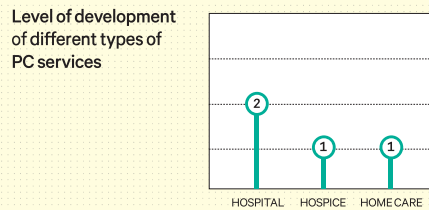
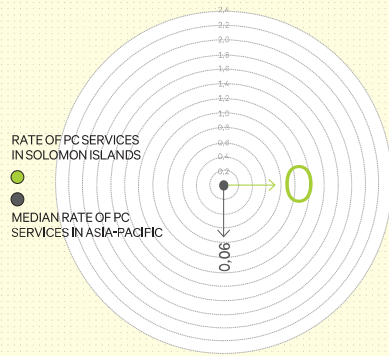
LEVEL OF DEVELOPMENT

# Solomon Islands

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

Total number of Specialized PC services **0**  
Rate of PC services per 100,000 inhabitants **0**

Solomon Islands in the context of Asia-Pacific regions



Pediatric PC Services

LEVEL OF DEVELOPMENT **1** (Emerging)  
GEOGRAPHIC DISTRIBUTION AND INTEGRATION **1**  
TOTAL NUMBER **0**

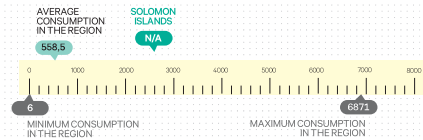


# Solomon Islands

**D Use of essential medicines**

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

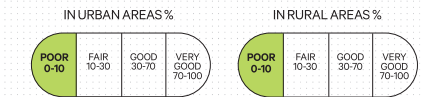
Solomon Islands in the context of Asia-Pacific regions



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: -  
Consultants: -  
Data collected: June-September 2024.  
Report validated by consultants: October - November 2024  
Report sponsored by National Association: N/A  
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 **0/2**

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 **3**


**A Empowerment of people and communities**

Groups promoting the rights of PC patients **3**  
Advanced care planning-related policies **1**

AP Solomon Islands

People & Communities

<p><b>Ind1</b></p> <p>Existence of groups dedicated to promoting the rights of patients in need of PC, their caregivers, and disease survivors.</p>	 <p>Existence of group(s) that cover palliative care in a more integrated way or over a wider range of disease/program areas.</p>	<p>In the Solomon Islands, several groups are committed to supporting patients requiring palliative care, their caregivers, and disease survivors. The Cancer Patient Support Network - Solomon Islands serves as a community platform where individuals affected by cancer can share experiences and offer mutual support. Additionally, the NRH Cancer Trust Fund, supported by the Bank of the South Pacific, was established to assist and support cancer patients. Some church organizations also provide occasional palliative care support to survivors and caregivers, further contributing to these efforts.</p>
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<p><b>Ind2</b></p> <p>Is there a national policy or guideline on advance directives or advance care planning?</p>	 <p>There is no national policy or guideline on advance care planning.</p>	<p>There is no specific national policy or guideline on advance directives or advance care planning in the Solomon Islands. Decisions regarding care are typically made by the immediate families of palliative patients, as they are primarily responsible for providing care and support both at home and during hospital admissions.</p>
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Policies



<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 stand-alone.</p>	 <p>Not known or does not exist.</p>  <p>A national palliative care plan is in preparation.</p>	<p>The Solomon Islands lack a dedicated national palliative care plan, program, or strategy, with minimal formalized services. The National Health Strategic Plan (2022-2031) aims to achieve universal health coverage but does not define a framework for palliative care. Existing efforts include a brief focus on pain management in the Adult Treatment Guideline (2011) and limited services at the National Referral Hospital, with little integration in provincial hospitals. Objectives under the National NCD Action Plan emphasize improving palliative care quality, follow-up, and home care, but measurable targets and indicators are absent. Challenges include logistical issues due to the country's dispersed geography and insufficient systematic integration.</p>
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AP Solomon Islands

Policies


<p>3.3. There are indicators in the national plan to monitor and evaluate progress, with measurable targets.</p>	 <p>Not known or does not exist.</p>	
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<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>Included in the essential list of services recognized by a government decree or law but not in the General Health Law.</p>	<p>Palliative care is included in the health service plan for primary healthcare (PHC) within the Solomon Islands' national health system. However, its implementation at the primary care level remains a significant challenge, requiring considerable strengthening to ensure effective delivery.</p>
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<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>There is no authority defined.</p>  <p>Does not have concrete functions or resources (budget, staff, etc.)</p>	<p>There is no coordinating entity at the national or provincial levels. However, the Ministry of Health allocates some budget for palliative care and survivorship.</p>
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AP Solomon Islands

Research

<p><b>Ind6</b></p> <p>Existence of congresses or scientific meetings at the national level specifically related to PC.</p>	 <p>Only sporadic or non-periodical conferences or meetings related to palliative care take place.</p>	<p>There are currently no national-level congresses or scientific meetings specifically dedicated to palliative care in the Solomon Islands. However, the country has benefitted from Essential Pain Management (EPM) trainings conducted by palliative care specialists in 2010, 2011, 2014, and 2017. These training focuses on the recognition, assessment, and treatment of pain and includes a comprehensive train-the-trainers course, helping to build local capacity in pain and palliative care management.</p>
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<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>Indicates a minimal or non-existent number of articles published on the subject in that country.</p>	
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Medicines

<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 the Solomon Islands.</p>
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AP Solomon Islands


Medicines


<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>Fair: Between 10% to 30%.</p>  <p>Fair: Between 10% to 30%.</p>	<p>In the Solomon Islands, around 30% of primary care facilities have the essential medicines and consumables needed for primary care, including pain and palliative care medications from the WHO Model List of Essential Medicines. While the Essential Medicines List includes injectable morphine and other palliative care drugs, their consistent availability is unreliable. Chronic shortages, driven by inadequate financing and fragmented distribution systems, hinder service delivery and often leave clinics unable to provide care. Efforts are being made to improve access to essential medicines, including palliative care drugs, through sustainable financing and better supply management, but significant inconsistencies remain across the healthcare system.</p>
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<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>Poor: Between 0% to 10%.</p>  <p>Poor: Between 0% to 10%.</p>	<p>Immediate-release oral morphine (liquid or tablet) is available at hospitals in the Solomon Islands, but not at primary care facilities such as Area Health Clinics, Rural Health Clinics, or Nurse Aid Posts. Injectable morphine is listed on the Essential Medicines List and theoretically available down to the Nurse Aid Post level, but its actual availability is inconsistent and limited in practice. Issues such as stock-outs, lack of follow-up for discharged patients, and inadequate prescription practices further restrict access, overall outside urban areas. Patients at home often go without adequate pain relief due to the limited supply and administration constraints of injectable morphine, which requires a nurse. As a result, many patients rely solely on paracetamol for pain management.</p>
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AP Solomon Islands





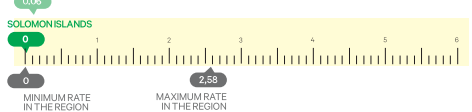

Education & Training



<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) over the total number of medical schools in the country</p>	<p>0/0</p>	<p></p> <p>The Solomon Islands does not have a medical school, so aspiring medical students typically study abroad in countries such as Fiji, Papua New Guinea, or Cuba. Within the country, the Solomon Islands National University (SINU) offers health-related programs through its Faculty of Nursing, Medicine &amp; Health Sciences, focusing on nursing and allied health sciences but not a full medical degree. Nursing education is primarily provided by SINU and Atoifi Adventist College of Nursing in Malaita. While both institutions offer comprehensive nursing programs, palliative care is addressed in a limited and general manner within their Diploma of Nursing and Degree curricula.</p>
<p>11.2. The proportion of medical schools with <b>OPTIONAL</b> teaching in PC...</p>	<p>0/0</p>	
<p>11.3. The proportion of nursing schools with <b>COMPULSORY</b> teaching in PC (with or without other optional teaching) over the total number of nursing schools in the country.</p>	<p>0/2</p>	
<p>11.4. The proportion of nursing schools with <b>OPTIONAL</b> teaching in PC...</p>	<p>0/2</p>	

<p><b>Ind12</b></p> <p>12. 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 specialization for palliative care physicians.</p>	<p>Currently, the Solomon Islands does not have an official specialization process in palliative medicine for physicians recognized by the national health authorities.</p>
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AP Solomon Islands

Provision of PC / Services

<p><b>Ind13</b></p> <p>13.1. There is a system of specialized PC services or teams in the country that has <b>GEOGRAPHIC</b> reach and is delivered through different service delivery platforms.</p>	<p></p> <p>No or minimal provision of palliative care specialized services or teams exist in the country.</p>	<p>The Solomon Islands lack a formal system of specialized palliative care services or teams with comprehensive geographic reach and delivery across multiple platforms. Palliative care remains centralized at the National Referral Hospital, with minimal services in provincial hospitals due to logistical challenges across the country's scattered islands. While there are no dedicated palliative care teams, individual health professionals work to improve aspects of palliative care, such as counseling and pain relief, within their capacities. Cases requiring specialized oncology care are also referred to the National Referral Hospital. Homecare is primarily provided informally by family members, with limited professional support. In Honiara, some patients may receive nurse visits for specific needs like wound care. Rehabilitation is included as part of palliative care, and occasional support is offered by church organizations and private nursing providers.</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></p> <p>Ad hoc/ in some parts of the country.</p>	
<p>13.3. Free-standing <b>HOSPICES</b> (including hospices with inpatient beds).</p>	<p></p> <p>Not at all.</p>	
<p>13.4. <b>HOME CARE</b> teams (specialized in PC) are available in the community (or at the primary Healthcare level), as independent services or linked with hospitals or hospices.</p>	<p></p> <p>Not at all.</p>	<p>RATE OF SPECIALIZED PC SERVICES/100,000 INH</p> <p>MEDIAN RATE IN THE REGION</p> <p></p> <p>← SPECIALIZED PALLIATIVE CARE SERVICES</p> <p></p>

<p><b>Ind14</b></p> <p>14.1. There is a system of specialized 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></p> <p>No or minimal provision of palliative care specialized services or teams for children exists in country.</p>	
<p>14.2. Please enter the total number of pediatric specialized PC services or teams in the country.</p>	<p></p> <p>PPC TEAMS</p>	