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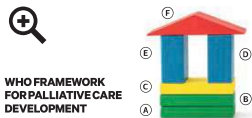


General data

POPULATION, 2023
104,597
SURFACE, KM², 2022
750
PHYSICIANS / 1,000 INH, 2022
1,009

Socioeconomic data

COUNTRY INCOME LEVEL, 2022
Upper-middle
HUMAN DEVELOPMENT INDEX RANKING, 2021
91
GDP PER CAPITA (US\$), 2023
N/A
HEALTH EXPENDITURE (% GDP), 2021
6,27
UNIVERSAL HEALTH COVERAGE, 2021
57



WHO FRAMEWORK FOR PALLIATIVE CARE DEVELOPMENT

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

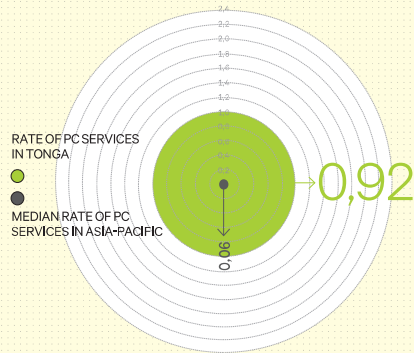


Tonga

F Provision of PC (Specialized Services)

Total number of Specialized PC services **1**
Rate of PC services per 100,000 inhabitants **0,92**

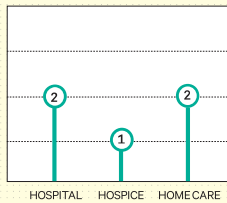
Tonga in the context of Asia-Pacific regions



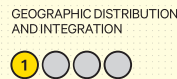
Geographic distribution and integration of PC services



Level of development of different types of PC services



Pediatric PC Services



TOTAL NUMBER

0

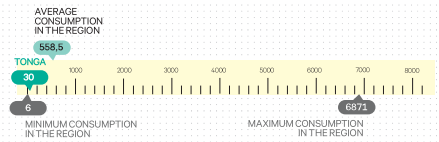
AP

Tonga

D Use of essential medicines

Opioids consumption (excluding methadone) **30**
S-DDD/MILL INHABITANTS/DAY

Tonga 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



Existence of PC congresses or scientific meetings



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 **1/1**



Recognition of PC specialty **1/4**

B Policies

National PC plan or strategy **1/4**

Responsible authority for PC in the Ministry of Health **2/4**

Inclusion of PC in the basic health package at the primary care level **2/4**

A Empowerment of people and communities

Groups promoting the rights of PC patients **3/4**





Advanced care planning-related policies **2/4**





AP **Tonga**

People & Communities





<p>Ind1</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 Tonga, multiple organizations support the rights of patients requiring palliative care, as well as their caregivers and those recovering from serious illnesses. These include the Breast Cancer Society, Children's Cancer Society, Ma'a Fafine moe Famili (MFF), church councils, and community organizations serving individuals with special needs and mental health challenges.</p>
<p>Ind2</p> <p>Is there a national policy or guideline on advance directives or advance care planning?</p>	 <p>There is/are national policies or guidelines on surrogate decision-makers.</p>	<p>Currently, Tonga lacks a dedicated national policy or guideline for advance care planning related to life-sustaining treatment or end-of-life care. Health practitioners follow the Health Practitioners Act in relevant situations. The Probate Law includes provisions on living wills, while the Family Protection Act designates individuals responsible for making critical decisions for patients during emergencies.</p>

Policies

<p>Ind3</p> <p>3.1. There is a current national PC plan, programme, policy, or strategy.</p>	 <p>known or does not exist.</p>	<p>Tonga currently lacks a national palliative care policy. Instead, fragmented guidelines are in place, focusing on prevention and support for the elderly, individuals with mental illnesses, and people with disabilities, provided by the Ministry of Internal Affairs (MIA) and several NGOs. Existing health policies primarily prioritize NCD prevention and medical management, integrating palliative care within discharge planning, follow-up clinics, rehabilitation support, and referrals to NCD and community services.</p>
<p>3.2. The national palliative care plan (or programme or strategy or legislation) is a standalone.</p>	 <p>Not known or does not exist neither standalone nor is included in another national plan.</p>	

AP **Tonga**

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>	
<p>Ind4</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>Decree or law to include palliative care in the list of health services provided at the primary care level in preparation.</p>	<p>While Palliative care is mentioned in the Universal Health Coverage (UHC) roadmap for Tonga, palliative care services are not currently included as a priority at the primary care level in Tonga's national health system.</p>
<p>Ind5</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>The authority for palliative care is defined but only at the political level (without a coordinating entity defined).</p>  <p>Does not have concrete functions or resources (budget, staff, etc.)</p>	<p>In Tonga, the Ministry of Health oversees palliative care through a coordinating body that is part of either the NCD unit or the Medical Department. However, the structure of this coordination unit has not been clearly defined.</p>

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Research

Ind6

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



At least one non-palliative care congress or conference (cancer, HIV, chronic diseases, etc.) that regularly has a track or section on palliative care, each 1-2 years (and no national conference specifically dedicated to palliative care).

The Ministry of Health in Tonga holds an annual review meeting, which indirectly addresses the need for palliative care, particularly in the context of the country's primary health burden, non-communicable diseases (NCDs). Additionally, professional conferences hosted by the Medical and Nursing Associations every two years include discussions on palliative care, highlighting its relevance in the broader healthcare landscape.

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.

Medicines

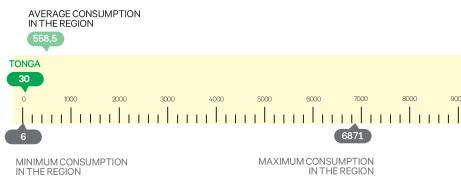
Ind8

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, 2020–2022: 30 S-DDD



COUNTRY VS REGION



AP **Tonga**

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.



Fair: Between 10% to 30%

In Tonga's urban areas, palliative care medications, including pain relievers, are generally accessible at primary healthcare (PHC) facilities, guided by the Ministry of Health's Standard Treatment Guidelines and Essential Drugs List. These guidelines follow the WHO analgesic ladder, ensuring essential medications to enhance quality of life for terminal patients. Vaiola Hospital in Nuku'alofa serves as the primary referral center, offering specialized services including palliative care. Alongside Vaiola, 14 health centers and three district hospitals provide PHC, including palliative care, through outpatient and emergency departments. Despite efforts to supply essential palliative care medications, access challenges persist, particularly in remote areas, due to geographic barriers, limited transportation, and staffing shortages, which impact equitable access to pain relief and palliative care services, especially for cancer patients and those with advanced disease in rural areas.

Ind10

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



Good: Between 30% to 70%.

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



Fair: Between 10% to 30%.

In urban areas of Tonga, palliative care medications, including analgesics, are generally available at the primary health-care level, guided by the Ministry of Health's Standard Treatment Guidelines and Essential Drugs List. Vaiola Hospital in Nuku'alofa serves as the main referral center, offering specialized palliative care services, supported by 14 health centers and three district hospitals providing primary care and palliative services through outpatient and emergency departments. However, access to palliative care medications, including opioids, is limited in rural areas due to geographical barriers, inadequate transportation, and shortages of healthcare personnel. These challenges contribute to inequities in pain relief and palliative care.

AP **Tonga**

Education & Training

Ind11

11.1. The proportion of medical schools with **COMPULSORY** teaching in PC (with or without other optional teaching) over the total number of medical schools in the country

0/0



In Tonga there are no medical schools. However, the Queen Salote Institute of Nursing and Allied Health offers a three-year nursing diploma that integrates palliative care into courses such as Nursing Theory and Practice, as well as Care of the Critically Ill Patient, within the Advanced Diploma in Nursing and Acute Care Nursing programs.

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

0/0

11.3. The proportion of nursing schools with **COMPULSORY** teaching in PC (with or without other optional teaching) over the total number of nursing schools in the country.

1/1

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

0/1

Ind12

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



There is no process on specialization for palliative care physicians.

AP **Tonga**

Provision of PC / Services

Ind13

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



Isolated provision: Exists but only in some geographic areas.

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).



Not at all.

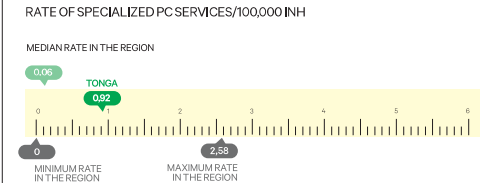
13.4. **HOME CARE** teams (specialized in PC) are available in the community (or at the primary Healthcare level), as independent services or linked with hospitals or hospices.



Ad hoc/ in some parts of the country.

13.5. Please enter the total number of specialized PC services or teams in the country.

Tonga has limited specialized palliative care services, primarily centralized at Vaiola Hospital in Nuku'alofa. Oncology care at Vaiola Hospital is largely palliative, and long-term care options are scarce, with families typically assuming caregiving roles. Some additional support comes from church-based organizations and international NGOs, but these services are also concentrated in Nuku'alofa. To assist the elderly, the Tonga Social Service Pilot program, launched in 2012 by the Ministry of Finance and National Planning (MoFNP) with support from the ADB and Japan Fund for Poverty Reduction, provides case management, social care, and home visits for vulnerable individuals aged 60 and older. With one specialized PC team at the hospital, Tonga's rate of palliative care service corresponds to 0,92 services per 100,000 people.



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. Please enter the total number of pediatric specialized PC services or teams in the country.



PPC TEAMS

There is currently no dedicated system of specialized palliative care services for children in Tonga. Palliative care services in the country are primarily focused on adults, with the main services centralized at Vaiola Hospital.