The Eastern Mediterranean Regional Palliative Care Expert Network: Designing a roadmap for palliative care development in the region

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ABSTRACT

Since 2014 WHO has been advocating for the integration of palliative care into health systems. Although there has been some progress in the development of palliative care in the Eastern Mediterranean Region, many countries in the region still have no palliative care activity and none has achieved integration. The WHO Regional Office for the Eastern Mediterranean has been engaged in activities aimed to develop palliative care in the region since 2010. We report on the establishment of the Eastern Mediterranean Regional Palliative Care Expert Network and its mandate, activities, and plans.

Keywords: Palliative care, Eastern Mediterranean, health systems, public health, network

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Background

Palliative care is recognized as a necessity for attainment of the right to health and it is fundamental to improving the quality of life, relieving suffering and maintaining dignity of individuals with serious illness. It is increasingly recognized as an integral component of high-quality care for a variety of conditions including cancer, cardiovascular diseases, chronic respiratory diseases, AIDS, tuberculosis, dementia, and diabetes, and for some acute conditions such as injuries and haemorrhagic fever (1).

Palliative care is an important part of the WHO global strategy on people-centred, integrated health services, which offers a framework for the strengthening of palliative care programmes across diseases. It is recognized by WHO as a crucial part of the Global Action Plan for the Prevention and Control of Noncommunicable Diseases (NCDs) 2013–2020 and it is embedded in the definition of Universal Health Coverage (UHC), the Sustainable Development Agenda, and the WHO 13th General Programme of Work (GPW13) (2). In 2014, the World Health Assembly (WHA) Resolution WHA67.19, “Strengthening of palliative care as a component of comprehensive care throughout the life course”, called on Member States to improve access to palliative care services with an emphasis on community-based care and integration into primary health care (3,4). The importance of palliative care was further acknowledged in 2017 as part of World Health Assembly Resolution WHA70.12 on “Cancer prevention and control in the context of an integrated approach”. This resolution impacted the development and endorsement of the WHO Regional Framework for Action on Cancer Prevention and Control (EM/RC64/R.2) where improved access to essential palliative care services is one of six key areas of strategic health care interventions (5).

We describe regional efforts of the Eastern Mediterranean Region Palliative Care Expert Network (the Network) towards the development of palliative care in the 22 Member States of the WHO Office for the Eastern Mediterranean (WHO/EMRO).

Status of palliative care in the region

Palliative care is at different levels of development across the Eastern Mediterranean Region (EMR) (6). The region includes high-income, petroleum-rich Gulf Cooperation Council countries and low-income countries that have suffered the consequences of political instability, conflict, forced migration, and poverty. This variability is reflected in widely differing cultures, health systems, national priorities, and resource availability. Despite international calls for the integration of palliative care into health care systems, it remains inaccessible in several countries in the region (Table 1). In countries where palliative care is at more advanced stages of development, services remain limited to the larger cities. Only a fraction of patients in need of palliative care in the region actually receive it (7,8).

EMR is the region with the second lowest availability of palliative care services, with rates below 2.66 providers per million population across all countries (6). Few countries have included palliative care in their national health policies, and opioid consumption is far
below the global average (7). The increasing burden of noncommunicable diseases, coupled with projections that EMR will have the highest regional increase in cancer incidence by 2030, makes the scale-up of palliative care services a key part of the region’s public health approach to cancer and other life-threatening illnesses.

The Regional Palliative Care Expert Group (2010–2015)

Efforts to scale-up palliative care in the EMR have been gathering momentum for several years. The endorsement of the regional strategy for cancer prevention and control at a regional committee meeting (RC56) in 2009 indicates the importance of integrating palliative care as a core component of the comprehensive cancer control plan for the region (5). This provided important entry points and policy opportunities to strengthen the regional palliative care agenda.

WHO/EMRO established the first regional palliative care expert group in 2010 to oversee the implementation of the palliative care strategic objectives. The group included 20 regional and international experts, many of whom had contributed to developing the regional strategy on cancer control and the process of development and review of the terms of reference of the group. The first meeting of the regional palliative care expert group was held in Cairo in partnership with the European Society of Clinical Oncology (ESCO) in October 2010, where a regional palliative care work plan was launched. The work plan (2010–2015) highlights 6 strategic objectives for palliative care:

1. Establish appropriate policies on palliative care
2. Improve access to and affordability of palliative care medicines
3. Scale-up education of health professionals on palliative care
4. Enhance implementation of palliative care services
5. Raise awareness about palliative care among the public, patients, and health professionals
6. Improve research and generate local data for monitoring and evaluation of palliative care services.

As part of their activities, the group developed a proposal for an annual training of trainers programme with financial support from WHO/EMRO and the Gulf Federation for Cancer Control. It targeted physicians and nurses from countries in the EMR, introducing the concepts and principles of palliative care. The focus was to build a cadre of trainers to expand palliative care services and empower health care providers. The programme was implemented from 2011 to 2015 and included 125 participants from the 22 EMR Member States, many of whom became palliative care champions and led palliative care programmes in their respective countries.

The regional palliative care expert group held meetings as side-events of the training of trainer workshops. These provided opportunity to share experiences and support many activities including country assessments, consultations on access to opioids, and analysis of legislation and policies. It led to the updating of the national essential medicines lists in 8 EMR countries.

Regional Palliative Care Expert Network (2019–2021)

WHO/EMRO convened a meeting of regional and international experts in palliative care in September 2019, in collaboration with Balsam-Lebanese Center for Palliative Care, Harvard Medical School, and Massachusetts General Hospital, and hosted by the American University of Beirut Medical Center. Participants included 22 individuals representing 9 Member States, international experts, and representatives of WHO headquarters, WHO/EMRO, and WHO country offices. The meeting aimed to facilitate exchange of local experiences, discussion of regional needs, and collaboration to prepare a strategy for the development of palliative care in the EMR. Participants in the meeting drafted a roadmap for palliative care development in the region and formed the Regional Expert Network on Palliative Care with a proposed structure and terms of reference.

The regional expert network was tasked to support implementation of the roadmap for palliative care development and provide regionally-relevant expertise and guidance to WHO/EMRO to allow it to better support governments as they develop their palliative care services. The network includes representatives of Egypt, Iraq, Kuwait, Lebanon, Morocco, Pakistan, Saudi

Table 1: Level of palliative care development by country in the EMR

<table>
<thead>
<tr>
<th>Level of palliative care development</th>
<th>Countries</th>
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<tbody>
<tr>
<td>Level 1: No known palliative care activity</td>
<td>Djibouti, Iraq, Somalia, Syrian Arab Republic, Yemen</td>
</tr>
<tr>
<td>Level 2: Capacity-building on palliative care</td>
<td>United Arab Emirates</td>
</tr>
<tr>
<td>Level 3a: Isolated palliative care provision</td>
<td>Afghanistan, Bahrain, Egypt, Islamic Republic of Iran, Kuwait, Lebanon, Libya, Morocco, Pakistan, Palestine, Sudan, Tunisia</td>
</tr>
<tr>
<td>Level 3b: Generalized palliative care provision</td>
<td>Jordan, Oman, Qatar, Saudi Arabia</td>
</tr>
<tr>
<td>Level 4a: Palliative care services at preliminary stage of integration</td>
<td>None</td>
</tr>
<tr>
<td>Level 4b: Palliative care at advanced stage of integration</td>
<td>None</td>
</tr>
</tbody>
</table>

Source: World Palliative Care Alliance (WPCA) (5)
Arabia, Sudan, and Qatar. Experts from countries not represented during the meeting were later invited to join the network.

The roadmap for palliative care development

Building on the WHO model for palliative care and guidance from WHO headquarters, the roadmap for palliative care development focused on 4 domains: policy, access to medicines, human resources, and clinical services. These domains were organized under 3 working groups (Table 2) with clearly defined deliverables and a 2-year action plan.

Unfortunately, plans for an in-person meeting and contribution to the 67th Regional Committee in Cairo in October 2020 could not be fulfilled because of the COVID-19 pandemic. Despite the challenges and disruptions of the COVID-19 pandemic, the working groups continued its activities through electronic communications and virtual meetings. It developed: a report on "Regional strategy to improve access to controlled medicines in the EMR", a policy brief with seven key messages, an essential package of palliative care for the region, a compilation of case studies, and a draft regional curriculum on palliative care.

The network contributed to efforts by colleagues from the Global Palliative Care Observatory ATLANTES, the University of Navarra to develop key indicators to monitor the quality of palliative care services (9), which will soon be implemented in selected Member States.

Plans

Current efforts focus on dissemination of the products developed to the relevant audiences, including policymakers, health care providers, managers, and the public. Dissemination is being done in collaboration with national, regional, and international palliative care and oncology organizations using the top-down and bottom-up approaches to expand the reach.

The WHO/EMRO website now has a webpage for palliative care, which serves as a repository for materials developed by the network. It will be updated regularly with relevant materials (http://www.emro.who.int/noncommunicable-diseases/palliative-care.html). This edition of the Eastern Mediterranean Health Journal was conceived as part of the dissemination and to harness available knowledge about palliative care in the EMR.

The mandate of the first cohort of the network expired at the end of 2021, and a new network of experts has been constituted. The new group will develop a 2-year action plan for the development of palliative care across the EMR, building on the maiden edition of the roadmap.

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Competing interests: None declared.

Table 2 Roadmap for palliative care development in EMR (2019–2021)

<table>
<thead>
<tr>
<th>Working group</th>
<th>Strategic objective</th>
<th>Deliverable</th>
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</thead>
<tbody>
<tr>
<td>Policy</td>
<td>Inform policymakers and build awareness about palliative care</td>
<td>Policy brief on regional burden and palliative care needs</td>
</tr>
<tr>
<td></td>
<td>Ensure availability and affordability of essential medicines for palliative care</td>
<td>Policy brief on accessibility and affordability of essential medicines</td>
</tr>
<tr>
<td>Human resources</td>
<td>Build capacity and skill of health care professionals to ensure provision of essential palliative care services</td>
<td>Regional curriculum for intermediate-level palliative care training</td>
</tr>
<tr>
<td>Service delivery</td>
<td>Develop effective models of care adapted to country context and health system infrastructure</td>
<td>Compilation of case studies from the region</td>
</tr>
<tr>
<td></td>
<td>Develop an essential package of palliative care for the region</td>
<td>Essential package of palliative care for the region</td>
</tr>
<tr>
<td></td>
<td>Develop a system of quality evaluation, improvement, and assurance of palliative care services</td>
<td>Set of region-specific quality indicators for palliative care</td>
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Réseau régional d’experts en soins palliatifs de la Méditerranée orientale : conception d’une feuille de route pour le développement des soins palliatifs dans la Région

Résumé

References


