

SUMMARY

The results of this survey demonstrate a mixed global picture for access to palliative care, with significant variation between WHO regions. Palliative care is an essential component of a comprehensive response to NCDs, as outlined in the WHO Global Action Plan for the Prevention and Control of NCDs 2013–2020. In 2015, just over 50% of countries have included palliative care in their national NCD policy, and nearly two thirds reported some government funding for palliative care. Greater progress is needed in terms of service delivery and access to oral morphine for pain relief in primary care. There is a particularly critical need to strengthen country capacity for palliative care in low- and lower-middle-income countries. The results of this survey rely on the accuracy of information verified by national authorities. In addition, this survey does not offer any information about the scope, quality or population coverage of any services reported. A repeat of the WHO NCD CCS in 2017

will measure progress in these key aspects of country capacity for palliative care.

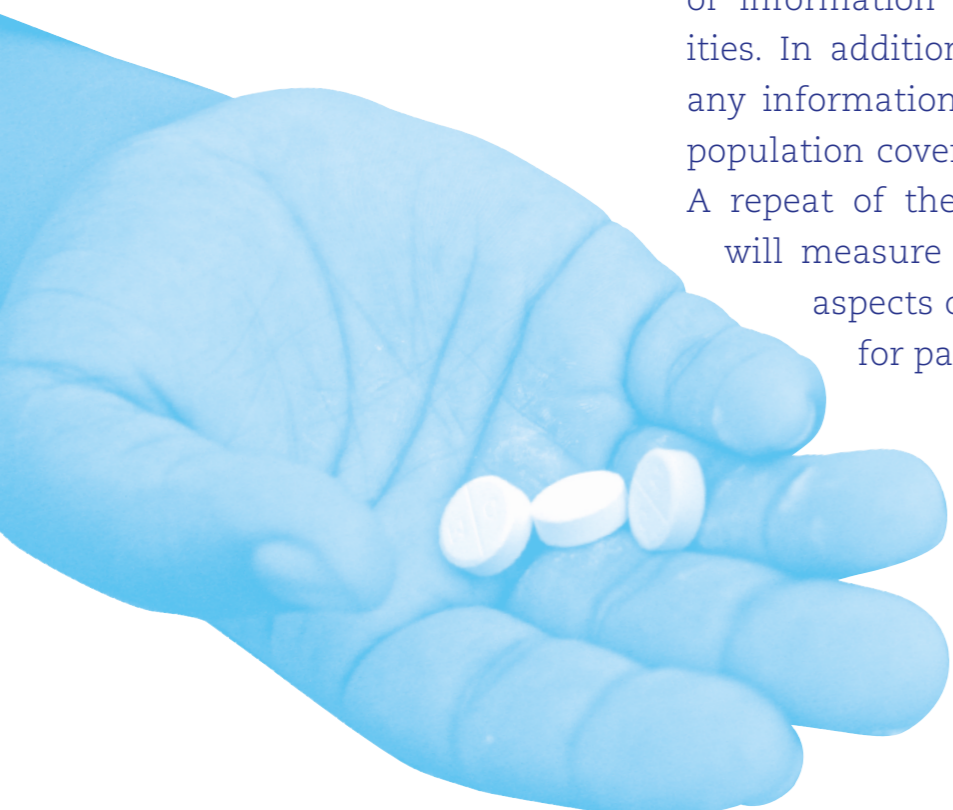
PALLIATIVE CARE FOR NON-COMMUNICABLE DISEASES: A GLOBAL SNAPSHOT IN 2015

SUMMARY OF RESULTS FROM THE 2015 WHO NCD COUNTRY CAPACITY SURVEY

INTRODUCTION

In 2014, the 67th World Health Assembly resolution WHA67.19¹ on palliative care recognized that the limited availability of palliative care services in much of the world leads to great, avoidable suffering for millions of patients and their families. The resolution asked the World Health Organization (WHO) to monitor the global situation of palliative care, and evaluate the progress made. In 2015, WHO undertook a global survey to assess country capacity for responding to noncommunicable diseases (NCDs) and included an expanded set of questions about palliative care. This fact sheet summarizes the key results of this survey that relate to country capacity for palliative care. The 2015 WHO NCD Country Capacity Survey (CCS) questionnaire was sent to all WHO Member States. It was completed through an online web-based platform by the NCD focal point or designated colleagues within the health ministry or a national institute or agency between May and August 2015. Out of 194 Member States, 177 responded to the survey (response rate of 91%). The questions were developed in a manner intended to obtain objective information about adequacy of capacity, and countries were requested to provide supporting documentation.

1. <http://apps.who.int/medicinedocs/documents/s21454en/s21454en.pdf>

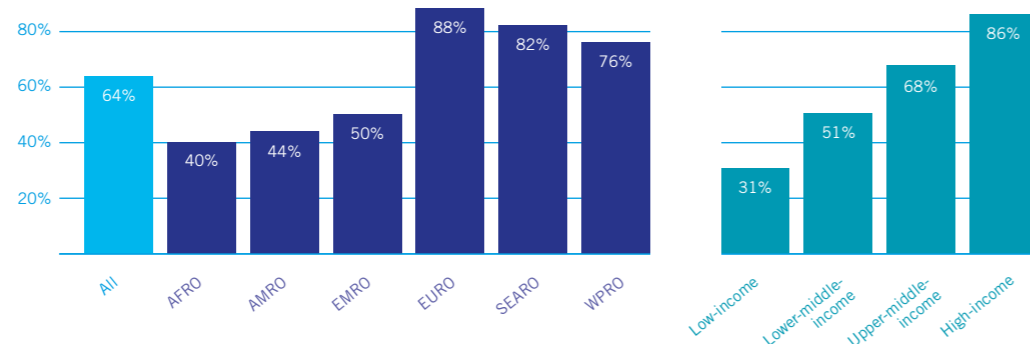


FUNDING FOR PALLIATIVE CARE

Overall, 64% of Member States reported that the Ministry of Health or equivalent agency has some type of funding available for palliative care (Figure 1). No further information was available regarding the amount or sources of this funding. In the South-East Asia Region and European Region, over 80% of countries reported funding for palliative care. In the African Region, Region of the Americas and Eastern Mediterranean Region, 50% or less of the countries reported funding for palliative care. There was a strong income gradient: 86% of high-income countries reported funding for palliative care compared to 31% of low-income countries.

FIGURE 1
Percentage of Member States with government funding for palliative care, by WHO Region and income group

Note: Based on 177 responses.
AFRO: African Region,
AMRO: Region of the Americas,
SEARO: South-East Asia Region,
EURO: European Region,
EMRO: Eastern Mediterranean Region,
WPRO: Western Pacific Region
Source: WHO NCD CCS 2015.

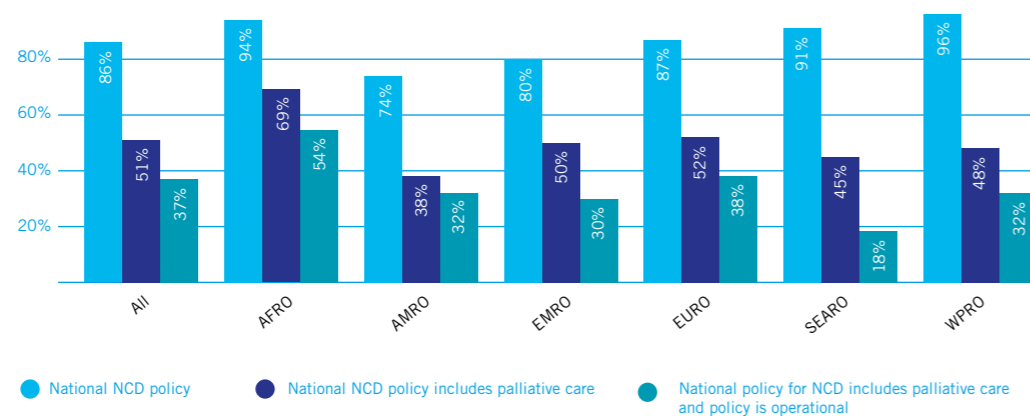


PALLIATIVE CARE AS AN ESSENTIAL COMPONENT OF NCD POLICIES

Overall, 86% of Member States reported that they have an integrated national strategy, policy or action plan for NCDs, and over half of these policies include palliative care (Figure 2). In total, 51% of countries reported that they have a national NCD policy that includes palliative care, and 37% reported they have a fully operational national NCD policy that includes palliative care. The African Region had the highest percentage of Member States with national NCD policies that include palliative care.

FIGURE 2
Percentage of Member States with a national NCD policy that includes palliative care, by WHO Region

Note: Based on 177 responses
Source: WHO NCD CCS 2015.



● National NCD policy ● National NCD policy includes palliative care ● National policy for NCD includes palliative care and policy is operational

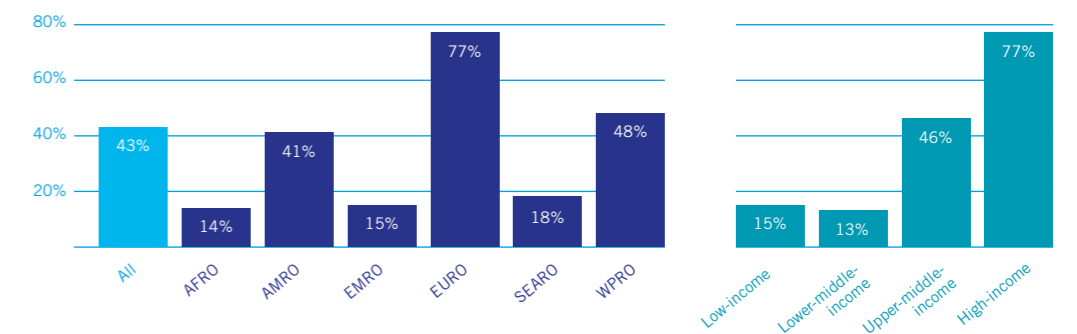
ESSENTIAL PALLIATIVE CARE MEDICINES IN PRIMARY CARE

Oral morphine is included on the list of basic essential NCD medicines for primary health care in the WHO Package of Essential NCD Interventions in Primary Health Care (WHO PEN).² In 2015, only 43% of countries reported that oral morphine is generally available in primary care facilities in the public health sector (available in >50% of pharmacies) (Figure 3). Availability of oral morphine was highest in the European Region, with 77% of countries reporting that it is generally available. The availability was lowest in the African Region, South-East Asia Region and Eastern Mediterranean Region, with only 14–18% of countries reporting that oral morphine is generally available. There was also a strong income gradient: 77% of high-income countries reported that oral morphine was generally available compared to 15% of low-income countries.

2. http://apps.who.int/iris/bitstream/10665/133525/1/9789241506557_eng.pdf?ua=1

FIGURE 3
Percentage of Member States reporting that oral morphine is available in >50% pharmacies, by WHO Region and income group

Note: Based on 177 responses.
Source: WHO NCD CCS 2015.

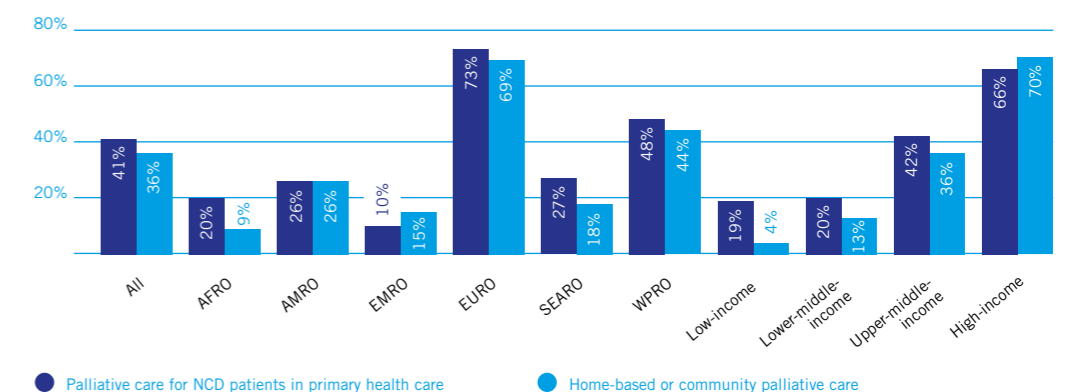


PALLIATIVE CARE SERVICES

WHA67.19 resolution on palliative care calls upon Member States to strengthen and implement palliative care services, with an emphasis on primary care, home care and community-based care. In 2015, 41% of countries reported that palliative care services are available to NCD patients (reaching 50% or more of patients in need) through primary care, and 36% reported that palliative care services were available (reaching 50% or more of patients in need) through home care or community-based care (Figure 4). There was a strong income gradient: 66% and 70% of high-income countries reported that they provide palliative care services through primary care or through home care or community-based care, respectively, compared to 19% and 4% of low-income countries.

FIGURE 4
Percentage of Member States providing palliative care services for NCD patients through primary care, home care or community care, by income group

Note: Based on 177 responses.
Source: WHO NCD CCS 2015.



● Palliative care for NCD patients in primary health care ● Home-based or community palliative care