



**International Association for Hospice and Palliative Care
NSA in Official Relations with WHO
NGO in Consultative Status, UN ECOSOC**

Statement for Western Pacific 72nd Regional Committee

18 October 2021

RE: Agenda Item 9 Panel discussion on primary health care and Agenda Item 10 COVID-19

Introduction

The International Association for Hospice and Palliative Care is a global membership organization whose vision is a world free from health-related suffering.¹ As an NSA in official relations, we welcome this opportunity to participate in RC72.

Palliative care is the active holistic care of individuals across all ages with serious health-related suffering due to severe illness, and especially those near the end of life. Access to the essential palliative care medicines outlined in Section 2 of the *WHO Model List of Essential Medicines*² is lacking in more than 80 percent of the world, including in many countries in the Western Pacific region.

On World Hospice and Palliative Care Day 2021, WHO Director General Dr. Tedros Ghebreyesus informed a global audience that he had written to all heads of state urging them to integrate palliative care into their health systems.³

Palliative care needs across the Western Pacific, already high with our ageing populations, are escalating rapidly. The pandemic has made the imperative of integrating palliative care into health systems more urgent than ever. It should be included in all pandemic preparedness response and primary health care planning. The WPRO 72nd Regional Committee provides an important opportunity to examine the status of palliative care integration across our region.

Agenda Item 9: Panel discussion on primary health care

The importance of palliative care as an essential service in primary health care was emphasised in the *Declaration of Astana* (WHO, UNICEF, 2018).⁴ Subsequent WHO documents, including the recent *Universal Health Coverage Compendium* (WHO, 2021)⁵, have further underscored the place of palliative care within the [framework of integrated health services](#), universal health coverage, and the [continuum of care](#).^{6,7,8}

Given the inequity of access to palliative care across the Western Pacific region, we are disappointed that “palliative care” is missing from the RC72 primary health care panel discussion paper. We note that it is also missing from the Report of the WHO Regional Director (1 July 2020 – 30 June 2021),

despite the Report's extensive coverage of COVID-19 responses in the region.⁶ This suggests to us that awareness of the importance of palliative care integration is seriously lacking across the Western Pacific Region.

The primary health care panel discussion paper does recognise the challenges associated with achieving optimal primary health care in the Western Pacific and refers to the need to better support individuals to maintain well-being and functional quality of life. We recommend that dedicated attention is given to implementation of palliative care within primary health care frameworks, as development of this area of primary health care requires specific focus if we are to achieve significant integration in the Western Pacific Region.

In relation to access to controlled medicines, pre-pandemic opioid consumption was already very low in many countries across the Western Pacific. For example, countries in Melanesia, Micronesia and Polynesia consume less than 0.5% of opioids for medical purposes, compared to Australia and New Zealand, indicating severe lack of access for patients in need.⁷

Agenda Item 10: COVID-19

The pandemic has demonstrated the critical imperative of integrating palliative care into health systems. Palliative care needs arise due to the direct impacts of severe COVID-19 illness, the indirect impacts for people with other serious illness who have been unable to access services and medicines, and the impacts on grieving families. Health care providers are also severely impacted by the trauma of exposure to high levels of morbidity and mortality in their patient populations, and within their own communities and families.

During the pandemic, many Western Pacific countries have experienced shortages and stockouts of controlled medicines such as opioids and benzodiazepines needed for both COVID-19 management and palliative care. Stocks of controlled medicines have become extremely stressed. The WHO, UN Office of Drugs and Crime, and the International Narcotics Control Board issued a *Joint Statement* on 8 September 8 2021,⁸ urging member states to ensure that national systems improve access to controlled medicines for people affected by emergencies, including pandemics, and climate-related disasters.

In addition, the WHO publications *Integrating palliative care and symptom relief into responses to humanitarian emergencies and crises* (WHO, 2018)⁹ and the *Living Guideline Management of COVID-19* (WHO 2021)¹⁰ are clear in their recognition of palliative care as an essential component of humanitarian response. Palliative care is an essential component of care within responses to COVID-19 that must be included alongside disease mitigation and case management measures across the Western Pacific region.

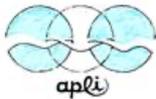
The IAHPC respectfully recommends that all Western Pacific Member States:

- Begin to integrate palliative care services into primary health care at all levels of care as per the *2014 WHA Resolution 67/19 "Strengthening of palliative care as a component of comprehensive care throughout the life course"*¹¹ and the *Declaration of Astana*.
- Adopt the recommendations in the 2021 *Joint Statement on Access to Controlled Medicines in Emergencies*.
- Strengthen their health workforces by including basic palliative care training in the undergraduate and postgraduate curricula of all healthcare workers, including those at the community level.

- Work with WHO Western Pacific offices and WHO Headquarters to support local and regional production and procurement of controlled essential medicines.

The IAHPC is happy to collaborate with WPRO member states on any work going forward with regard to improving access to palliative care and palliative care medicines.

This statement is endorsed by the Western Pacific Palliative Care Network, Australasian Palliative Link International and Palliative Care Australia.



References:

1. IAHPC website: www.hospicecare.com
2. WHO Model List of Essential Medicines: <https://www.who.int/groups/expert-committee-on-selection-and-use-of-essential-medicines/essential-medicines-lists>
3. Dr. Tedros Ghebreyesus statement for World Hospice Palliative Care Day 2021: <https://www.thewhpc.org/world-hospice-and-palliative-care-day>
4. Declaration of Astana 2018: <https://www.who.int/docs/default-source/primary-health/declaration/gcphc-declaration.pdf>
5. Universal Health Coverage Compendium 2021: <https://www.who.int/universal-health-coverage/compendium>
6. Report of the Regional Director: the work of WHO in the Western Pacific Region 2020-2021: <https://www.who.int/publications/i/item/9789290619611>
7. World Drug Report 2021: <https://www.unodc.org/unodc/en/data-and-analysis/wdr2021.html>
8. Joint Statement on Access to Controlled Medicines in Emergencies 2021: <https://www.who.int/docs/default-source/primary-health/declaration/gcphc-declaration.pdf>
9. Integrating palliative care and symptom relief into responses to humanitarian emergencies and crises 2021: <https://apps.who.int/iris/handle/10665/274565>
10. COVID-19 clinical management: Living guidelines 2021: <https://www.who.int/publications/i/item/WHO-2019-nCoV-clinical-2021-1>
11. 2014 WHA Resolution 67/19: Strengthening of palliative care as a component of comprehensive care throughout the life course: https://apps.who.int/gb/ebwha/pdf_files/WHA67/A67_R19-en.pdf

For further information see the following resources:

- Operational Framework for Primary Health Care: Transforming vision into action (WHO, UNICEF, 2020): <https://www.who.int/publications/i/item/9789240017832>
- Integrating palliative care and symptom relief into primary health care (WHO, 2018): <https://www.who.int/publications/i/item/integrating-palliative-care-and-symptom-relief-into-primary-health-care>
- Quality health services and palliative care: practical approaches and resources to support policy, strategy and practice (WHO, 2021): <https://www.who.int/publications/i/item/9789240035164>

- Assessing the development of palliative care worldwide: a set of actionable indicators (WHO, 2021): <https://www.who.int/publications-detail-redirect/9789240033351>