

# Worldwide Hospice Palliative Care Alliance

## General Fact sheet 2015

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### About hospice and palliative care

#### What is hospice and palliative care?

The central element of hospice and palliative care is the relief of suffering. The goal is to improve quality of life for people and family members affected by life-threatening and life-limiting illness.

#### Definition of palliative care

The WHPCA supports the WHO definition:

“Palliative care is an approach that improves the quality of life of patients and their families facing problems associated with life-threatening illness, through the prevention and relief of suffering, the early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.”<sup>1</sup>

See the WHPCA policy statement on defining palliative care for clarification.<sup>2</sup>

In 2014, the World Health Assembly passed Resolution AG 67.19: 'Strengthening of palliative care as a component of comprehensive care throughout the life course'<sup>3</sup>, calling on WHO and Member States to improve access to palliative care as a core part of health systems.

**Palliative care affirms life and regards dying as a normal process** and intends neither to hasten nor to unduly postpone death.

**Palliative care improves the quality of life of people and their families** facing life-threatening or life-limiting illness, through the prevention and relief of suffering, early identification, and assessment and treatment of pain and other problems.

**Palliative care is a holistic approach.** It focusses on meeting the needs of the whole person, not just treating their condition. It addresses the physical, social, psychological and spiritual issues and other problems faced by those affected.

**Palliative care is a human right.** People should be able to access hospice and palliative care as soon as they are diagnosed with a life-threatening or life-limiting condition, and not just at the end of life.

**Hospice and palliative care is provided in different settings**, depending on where people need to access it. It can be home and community based, in hospitals and other health facilities and, in some

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<sup>1</sup> WHO definition of palliative care: <http://www.who.int/cancer/palliative/definition/en/>

<sup>2</sup> WHPCA, Defining palliative care: <http://www.thewhpc.org/resources/item/defining-palliative-care>

<sup>3</sup> World Health Assembly passed Resolution AG 67.19:  
[http://apps.who.int/gb/ebwha/pdf\\_files/WHA67/A67\\_R19-en.pdf](http://apps.who.int/gb/ebwha/pdf_files/WHA67/A67_R19-en.pdf)

cases, in prisons. It is provided by a group of compassionate individuals that can include family members, community carers, doctors, nurses, psychologists and social workers.

**Pain management is a key part of hospice and palliative care** as pain is one of the most common and distressing symptoms that people with life-threatening or life-limiting illness face. The WHPCA promotes the use of oral morphine in treating pain. It is the simplest, cheapest and most effective method which is sadly not available in many countries.

**Hospice and palliative care is most effective when started early in the course of an illness.** This care can take place together with treatment such as anti-cancer therapy or anti-retroviral therapy.

**Supporting family members and carers** is a key aspect of hospice and palliative care. This is to improve their quality of life and well being, an often neglected area of care.

## About the Worldwide Hospice Palliative Care Alliance

The Worldwide Hospice Palliative Care Alliance (WHPCA) is a network of national and regional hospice and palliative care organisations and affiliate organisations.

We believe that no-one with a life-threatening or life-limiting condition should live and die with unnecessary pain and distress.

### Vision

A world with universal access to hospice and palliative care.

### Mission

To foster, promote and influence the delivery of affordable, quality hospice and palliative care.

### How we work

We follow a public health model that emphasises policy, education, medication availability and implementation to enable and effect change.

### Policy

In many countries there is little or no government support for hospice and palliative care. We advocate at a global level for the inclusion of palliative care in national health systems.

We publish resources to help our members advocate for hospice and palliative care in their countries.

### Education

We believe that all medical professionals should have basic and continuing education in palliative care.

### Medication availability

We believe that essential medications for the treatment of pain should be universally available.

Around 80% of the world's population lack adequate access to the medications needed for hospice and palliative care.

18 million people die in unnecessary pain and distress each year.

In 2010 the WHO reported that 66% of the population had virtually no consumption of strong opioids

Only 7.5% of the population live in countries considered to have adequate opioid consumption levels.

## **Implementation – WHPCA membership**

WHPCA members are national and regional hospice and palliative care organisations and affiliate organisations supporting hospice and palliative care, currently representing 77 countries across the globe.

We currently have 207 members (October 2015). We work together with other organisations to advocate for palliative care at a global level.

## **WHPCA governance**

The WHPCA is governed by a Board of Trustees that is comprised of 13 leaders with extensive experience in hospice and palliative care from Africa, Asia Pacific, India, North America, Latin America, Europe and the Middle East.

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## **WHPCA purpose and activities**

The purpose of the WHPCA is to ensure availability and accessibility of quality hospice and palliative care for adults and children across the globe.

The WHPCA advocates for hospice and palliative care worldwide and supports national hospice and palliative care organisations to integrate palliative care into their country's health systems.

The WHPCA supports national and local hospice and palliative care organisations to source funding, and provides technical advice on policy development, needs assessment, strategic planning, advocacy with governments and education institutions, and implementation of WHO recommendations.

## **Hospice and palliative care internationally**

### **Access to palliative care**

42% of the world has no hospice and palliative care services and in an additional 32% of countries, palliative care services reached only a small percentage of the population.

Palliative care is integrated in only 8.5% of country health systems; therefore 91.5% of health systems globally do not yet have integrated palliative care.

Developing countries have the greatest burden of disease, and also low availability of hospice and palliative care services and inadequate access to medications for pain treatment.

Palliative care is a human right. People should be able to access it as soon as they are diagnosed with life-threatening or life-limiting conditions and not just at the end of life.

### **Palliative care and the Global Goals**

Low availability and accessibility of palliative care globally for people living with life-limiting illness is a prominent example of extreme inequality and injustice.

The WHPCA supports a focus on palliative care as part of the new Global Goals.

Civil society and citizens must be empowered to work towards equitable access to palliative care as part of the Global Goal for Health.

Palliative care is vital to achieve healthy lives and well-being for all at all ages and thus an essential part of Global Goal 3: Good Health and Well-being.

Palliative care is a critical component of Universal Health Coverage.