



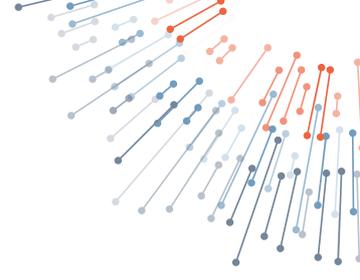
PALLIATIVE CARE FOR NONCOMMUNICABLE DISEASES

Introduction

Palliative care is an approach that improves the quality of life of patients – both in adults and children – and their families who are facing problems associated with life-threatening illness. In 2014, countries adopted the World Health Assembly Resolution 67.19 to integrate palliative care into national health policies – by revising laws and processes to improve access to opioids, and provide palliative care services through primary health care as well as through community settings with adequate resources.

WHO is monitoring country progress on strengthening national capacity to prevent and manage noncommunicable diseases (NCDs) through the WHO NCD Country Capacity Survey (CCS). Elements related to palliative care policy, services and availability were collected as part of the CCS. An update of the status is provided based on selected domains. This snapshot provides updated key figures for palliative care based on the 2019 survey response from the 194 WHO member states.¹

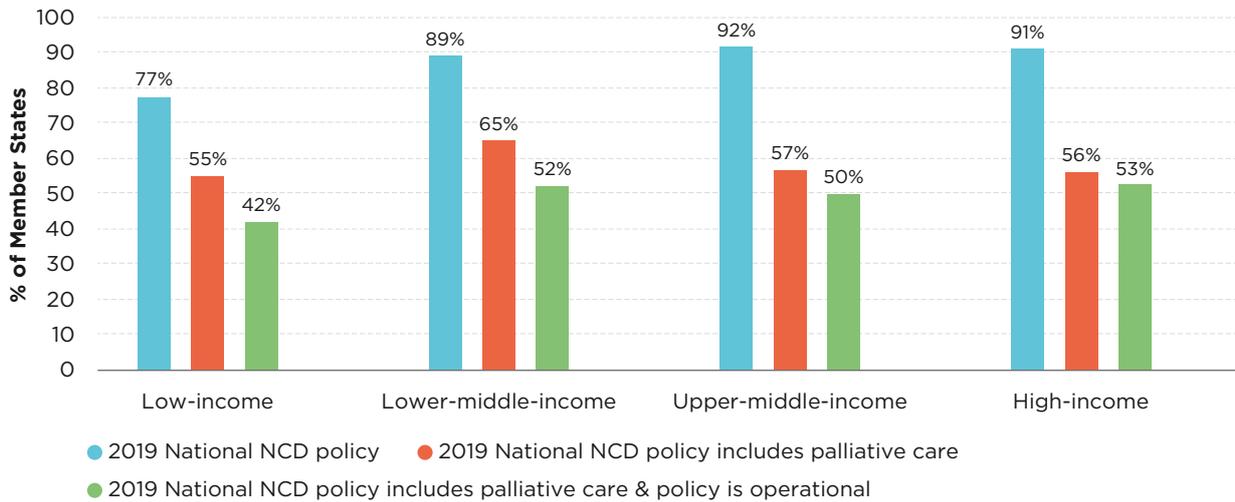
¹ <https://www.who.int/publications-detail/ncd-ccs-2019>



Integration of palliative care in response to NCDs

Palliative care is an essential component of a comprehensive response to NCDs. It is ideal that palliative care is included within NCD action plans in all countries. In 2019, only 50% of countries globally report having palliative care within their national NCD policy that is operational, with little variation in the availability across income groups. (Figure 1).

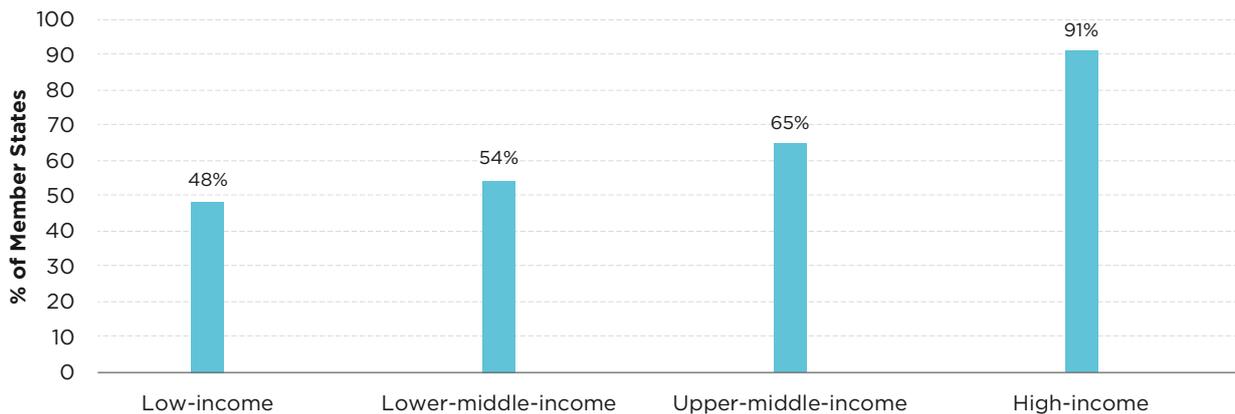
Figure 1. Percentage of Member States with a national NCD policy, strategy or action plan that includes palliative care, by income group, 2019



Allocation of funds for palliative care

There exists a wide gap in government funding allocation for palliative care. Over two-thirds (68%) of countries globally have dedicated funding for palliative care. More countries in high-income countries (91%) allocated funds than in low-income countries (48%). (Figure 2).

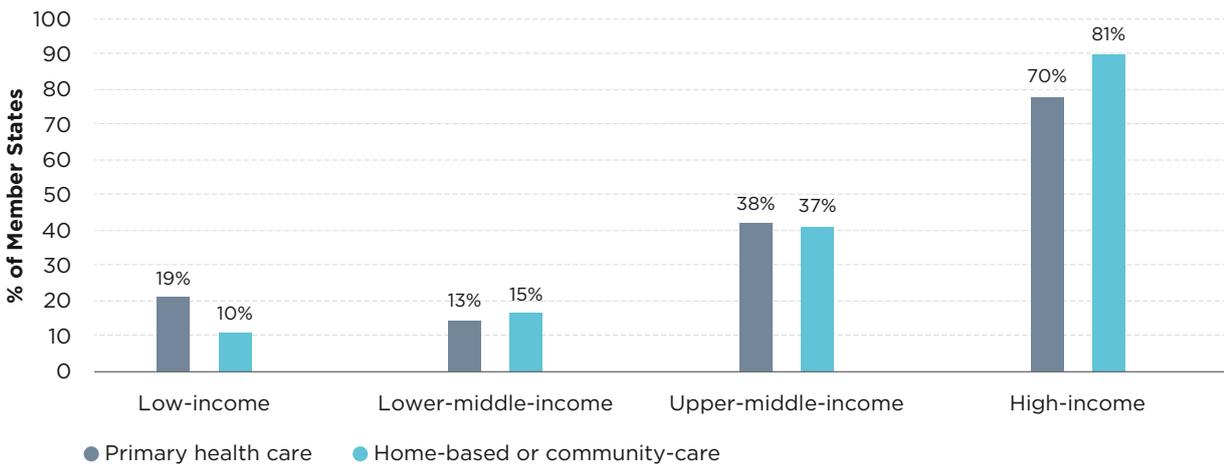
Figure 2. Percentage of Member States with government funding for palliative care, by income group, 2019



Availability of palliative care services

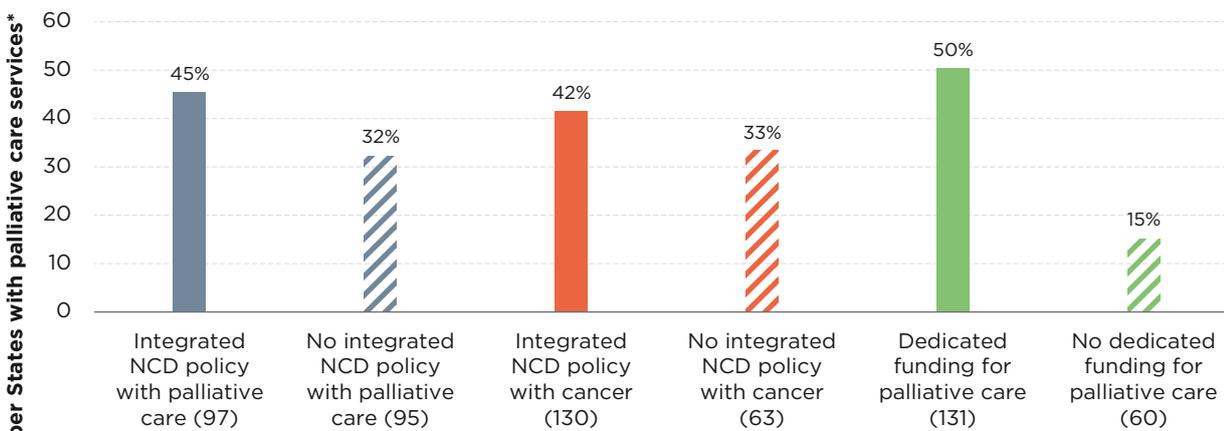
Availability to palliative care services remains limited for patients with NCDs globally, with only 39% of countries reporting general availability (reaching at least 50% of patients in need) in primary health care and 40% in community- or home-based care. Palliative care is far more widely available to patients in high-income countries (81% for home-based or community-care; 70% for primary health care) than in upper-middle-income (37%; 38%), lower-middle-income (15%; 13%) and low-income countries (10%; 19%). (Figure 3).

Figure 3. Percentage of Member States providing palliative care for NCD patients through primary health care, home-based care or community-care, by income group, 2019

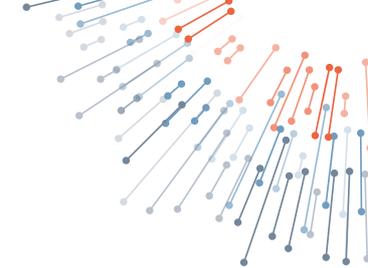


Palliative care is more likely to be available in countries where operational NCD policy integrates palliative care (45%) or cancer (42%) than in those without palliative care (32%) or cancer (33%) within their NCD policy. Correspondingly, countries that allocate funding for palliative care are more likely to have these services available than those without dedicated funding. Palliative care is generally available to patients in need in primary health care facilities in 50% of countries where funding is specifically allocated as compared to 15% of countries where there is no dedicated funding for palliative care. (Figure 4).

Figure 4. Percentage of Member States reporting general availability of palliative care (reaching at least 50% of patients in need) in primary health care, by integrated NCD policy and funding availability, 2019



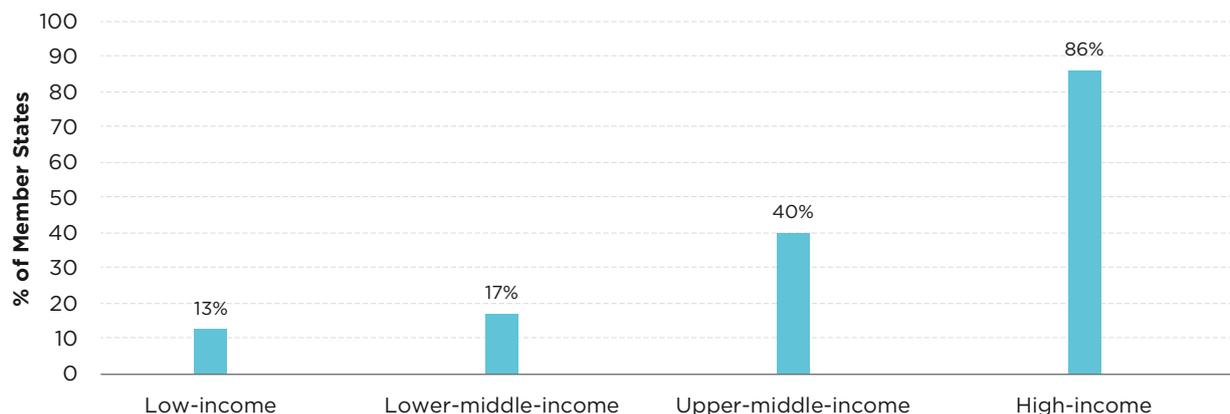
*Palliative care services in primary health care reaching at least 50% of patients in need; numbers in brackets indicate denominators for each group, excluding countries with unknown status of funding or where existence of integrated NCD policy was unknown.



Access to opioid pain relief

While progress has been made since the 2014 World Health Assembly resolution, the opioid pain relief for palliative care remains sparsely available in low- and middle-income countries. Oral morphine is reported as generally available in 44% of countries worldwide, with a large gap between income groups. (Figure 5).

Figure 5. Percentage of Member States reporting general availability of oral morphine (available in >50% of pharmacies) in public primary care facilities, by income group, 2019



Dedicated funding is also crucial in improving accessibility to opioids. Oral morphine is generally available in more than 57% of countries where there is allocated funding for palliative care. The availability falls to 15% in countries without dedicated funding for palliative care. (Figure 6).

Figure 6. Percentage of Member States reporting general availability of oral morphine (available in >50% of pharmacies) in public primary care facilities, by dedicated funding for palliative care, 2019



MUNICABLE DISEASES

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