Prioritising Palliative Care

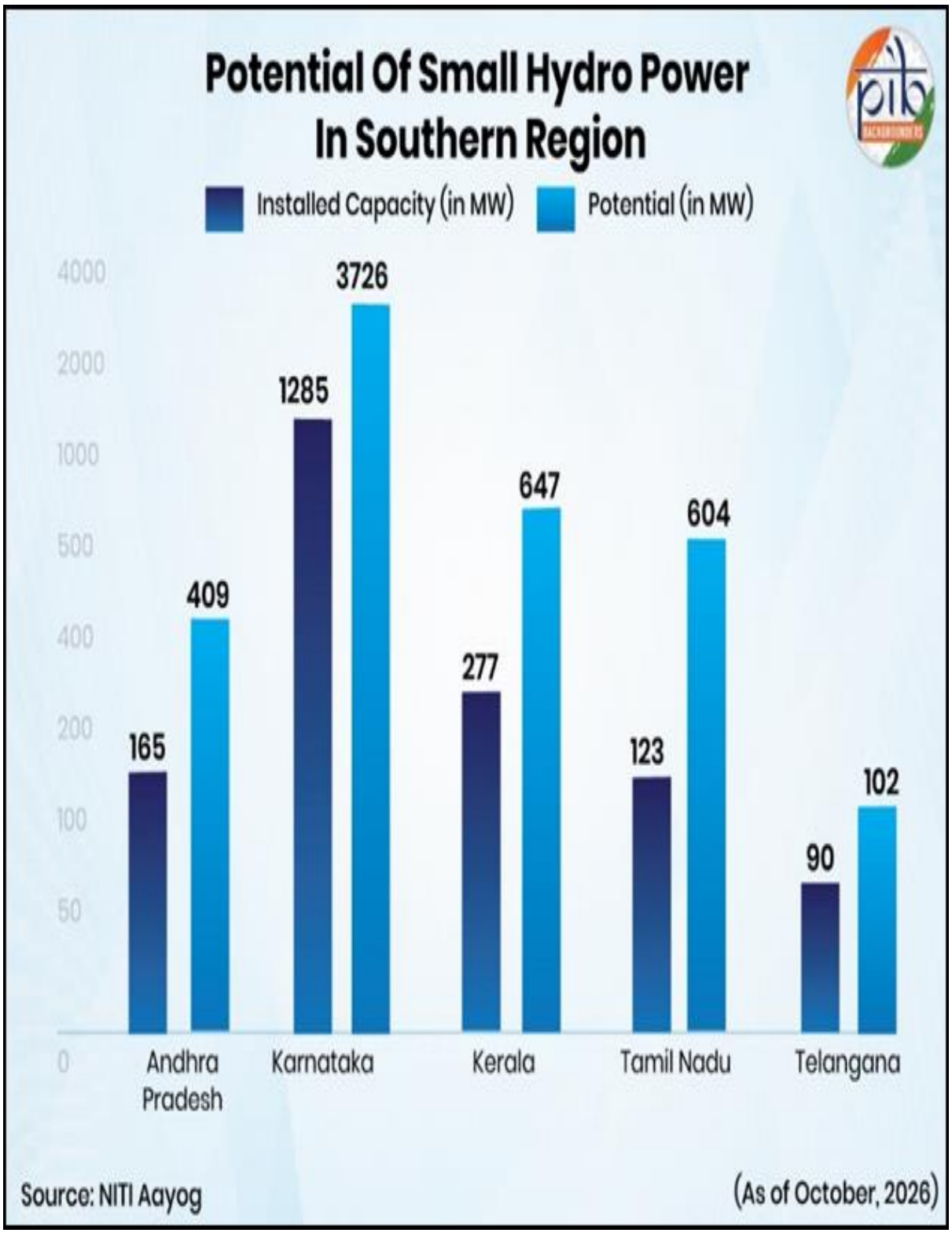
> ***Mains**: Issues relating to development and management of Social Sector | Services relating to Health, Education, and Human Resources.*

Why in the News?

On the occasion of National Doctors' Day (1st July, 2025), palliative care was given special attention.

What is palliative care?

- **Palliative Care** - It is a form of specialised care addressing a person's physical, emotional, social and spiritual needs.
- **Focus** - Unlike curative treatment that is aimed at eradicating disease, palliative care focuses on alleviating pain, reducing suffering, and improving quality of life — for patients and their families.
- **Aspects** - Palliative care extends beyond end-of-life support and includes pain management, psychological support, and improved quality of life at any stage of a serious illness.
- **Interdisciplinary Approach** - Palliative care involves a team of healthcare professionals, including doctors, nurses, social workers, and chaplains, who work together to address the various needs of the patient and their family.



What are the significances of palliative care?

- **Rise in Communicable Diseases** - The demand for palliative care is increasing constantly due to the global rise in non-communicable diseases such as cancer, diabetes and chronic respiratory conditions.
- **Reduces Pressure on Healthcare System** - India's health-care system is already strained and faces increasing pressure.
- This makes it essential to integrate palliative care to reduce unnecessary hospitalisations and ease the emotional and financial burden on families.

- **Protects Dignity** - Palliative care plays a crucial role in providing comfort and ensuring dignity to those navigating terminal conditions.

Palliative Care Initiative in India
• **National Health Policy, 2017** – Inclusion of palliative care in the National Health Policy of 2017 in India marked a pivotal step in addressing the gap. • **National Program for Palliative Care (NPPC)** - Launched in 2012, is a key step towards integrating palliative care into the broader healthcare system. • **Educational Program** - The projects on pain and palliative care by the Indian Council of Medical Research and the All India Institute of Medical Sciences exemplify gradual progress in this area. • **Neighbourhood Network in Palliative Care (NNPC) Model** - Pioneered in Kerala, it demonstrates the effectiveness of community-led initiatives, where volunteers are trained to provide support and care to those in need within their communities.

What are the challenges in palliative care?

- **Accessibility Issue** - Access to palliative care remains uneven, especially in rural areas, and primarily among economically disadvantaged populations.
    - *Each year, approximately 7.2 million Indians need palliative care.*
- **Underfunded** - Inadequate budget allocation for much of the activities envisaged in the palliative care policy, namely, the creation of palliative care centres in district hospitals and in tertiary referral centres.
- **Underappreciated** - According to the World Health Organization (WHO), an estimated 40 million people globally require palliative care each year, with 78% of them living in low and middle-income countries.
- However, only 14% of those in need receive such care.
- In India, where an estimated seven million to 10 million people require palliative care annually, only 1%-2% have access to it.
- **Shortage of Trained Professionals** - While India's doctor-population ratio of 1:834, surpasses the WHO recommended norm of 1:1000, the availability of medical practitioners specialising in palliative care is disproportionately low.
- **Lack of Integration with Tertiary Sector** - While palliative care is included in the primary health sector, its integration into tertiary care remains incomplete.
- **Low Public Awareness** - Public awareness of palliative care remains limited, leading to misconceptions and late-stage access to these critical services.

What can be done to strengthen palliative care in India?

- The gap between demand for and availability of palliative care underscores the urgency for systemic intervention and policy prioritisation.
- **Capacity Building** - Strengthening the capacity of doctors to deliver this care, particularly in underserved regions, is imperative.
- In order to equip medical professionals with the skills and the empathy required to address end-of-life care, integrating palliative care into the core MBBS curriculum is crucial.
- **Task Shifting** - Given the limited availability of palliative care specialists, task-shifting

(delegating responsibilities to trained allied health-care workers) emerges as a viable solution.

- **Empowering Existing Workforce** - India has a huge base of 34.33 lakh registered nursing personnel and 13 lakh allied health-care professionals.
- Empowering this workforce through targeted training can help bridge the gap, ensuring holistic care, particularly in rural areas and underserved regions.
- **Prudent Policy** - Policymakers must recognise the long-term benefits of investing in palliative care, from improving patient outcomes to reducing the overall burden on the health-care system.
- **Dedicated Funding** - Governments can allocate dedicated funding for palliative care programmes, ensuring that public and private health-care facilities are equipped with the necessary infrastructure.
- **Insurance Coverage** - Insurance schemes such as Ayushman Bharat should expand coverage to include palliative care, making these services more financially accessible to patients and families.
- **Inclusion of Third Sector** - Partnerships with non-governmental organisations and private institutions can also accelerate the expansion of these facilities.
- **Public Awareness Campaigns** - It can demystify palliative care and encourage early access to services.
- **The U.S. Model** - The United States has a well-established palliative care system that is driven by robust funding mechanisms, insurance coverage, and hospice care models.

Reference

The Hindu | Integrating compassion, prioritising palliative care

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