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Caring for refugees
and migrants:
what is the role of
palliative care?



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<https://youtu.be/gXWMB1zj5n8?si=U7MAXXgjZj2i29UB>

Nahla Gafer

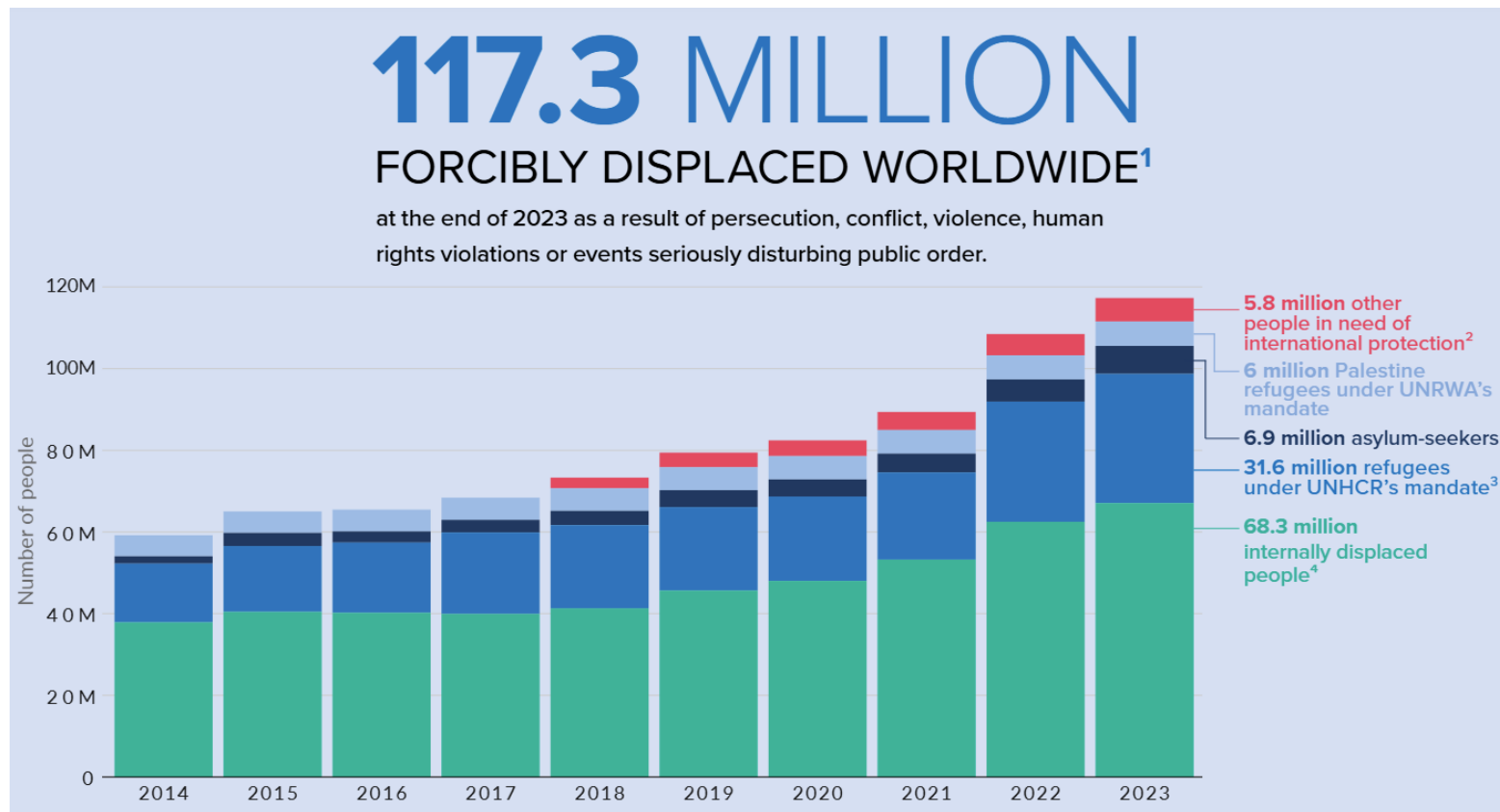
Palliative care; humanity in action

Values based care; promoting dignity, relieving suffering, demonstrating compassion, fighting for justice



People on the move; forcibly displaced

- 1 in 69 of earth's people
- 68.3m internally displaced
- 43.4m refugees (*under UNHCR/mandate*)
- 5.6m asylum seekers
- 75% hosted in LMIC
- refugees >10 years displaced
- 90% impacted by climate change
- 43 emergency in 29 countries



<https://www.unhcr.org/global-trends-report-2023>

<https://unfccc.int/news/conflict-and-climate>

NCDs in emergencies; emergency response

- very quick response but then protracted period of ongoing conflict, repeated disaster
- infrastructure may be severely damaged and supplies destroyed
- planning, coordination, rapid referrals of those needing urgent treatment if feasible and integrated response
- focus on stopping **preventable death** but also alleviating **avoidable suffering** and **keep patients stable** until treatment can recommence

(Krakauer et al. 2019)



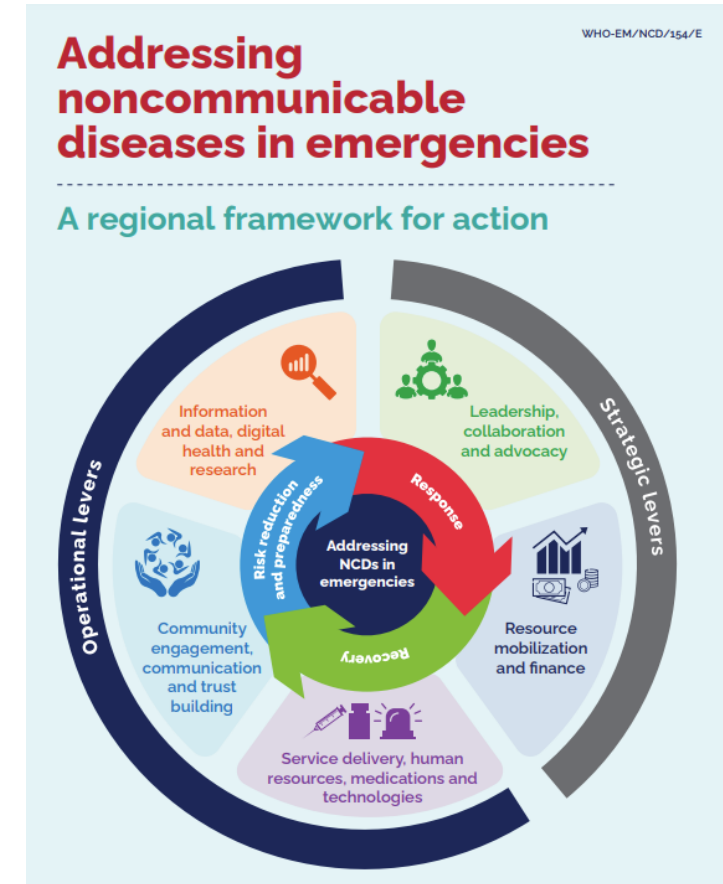
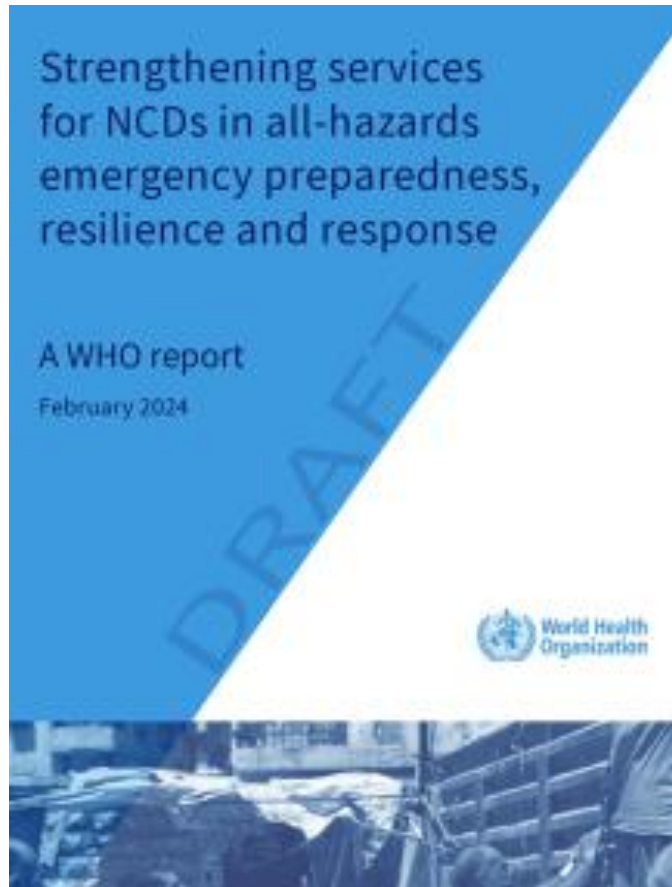
<https://uhcc.who.int/uhcpackages/packages/global>

WHO NCD emergency medicines kit



Addressing NCDs in Emergencies

- premature death due to NCDs 25.1% in fragile or conflict-affected contexts (cf 17.8%)
- 2-3 x increase in stroke, heart attack after disaster
- very little access to palliative care and pain relief
- *prepare, respond, rebuild*



Saving lives PLUS alleviating suffering

Integration in a protracted crisis; Uganda

*‘These refugees, we are the same people. We have the same future we have the same destiny. **When your house is on fire where do you run, you run to your neighbours.** Whenever they are here they are like us and if they run for help they must get it’. Local government official*

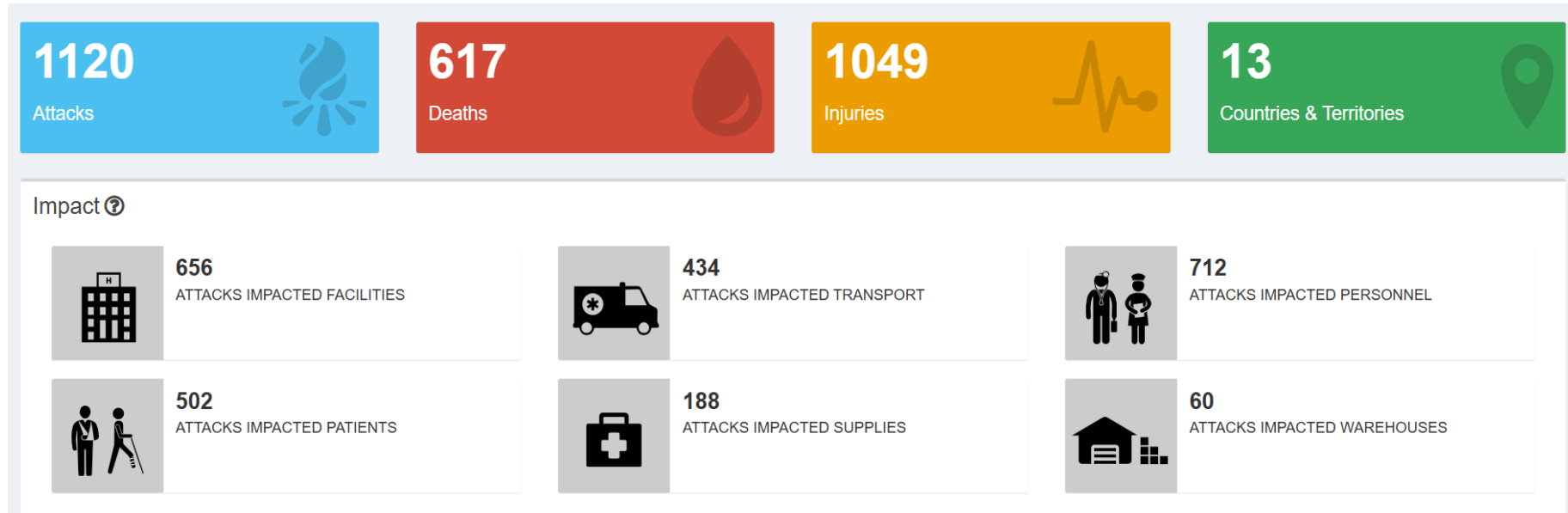
<https://eapcnet.wordpress.com/2024/10/08/when-your-house-is-on-fire-where-do-you-runyou-run-to-your-neighbours/>



Leng M, Downing J, Purewal G, et al. Evaluation of the integration of palliative care in a fragile setting amongst host and refugee communities: Using consecutive rapid participatory appraisals. *Palliative Medicine*. 2024;38(8):818-829. doi:10.1177/02692163241269129

Healthcare is under attack across the globe

2024

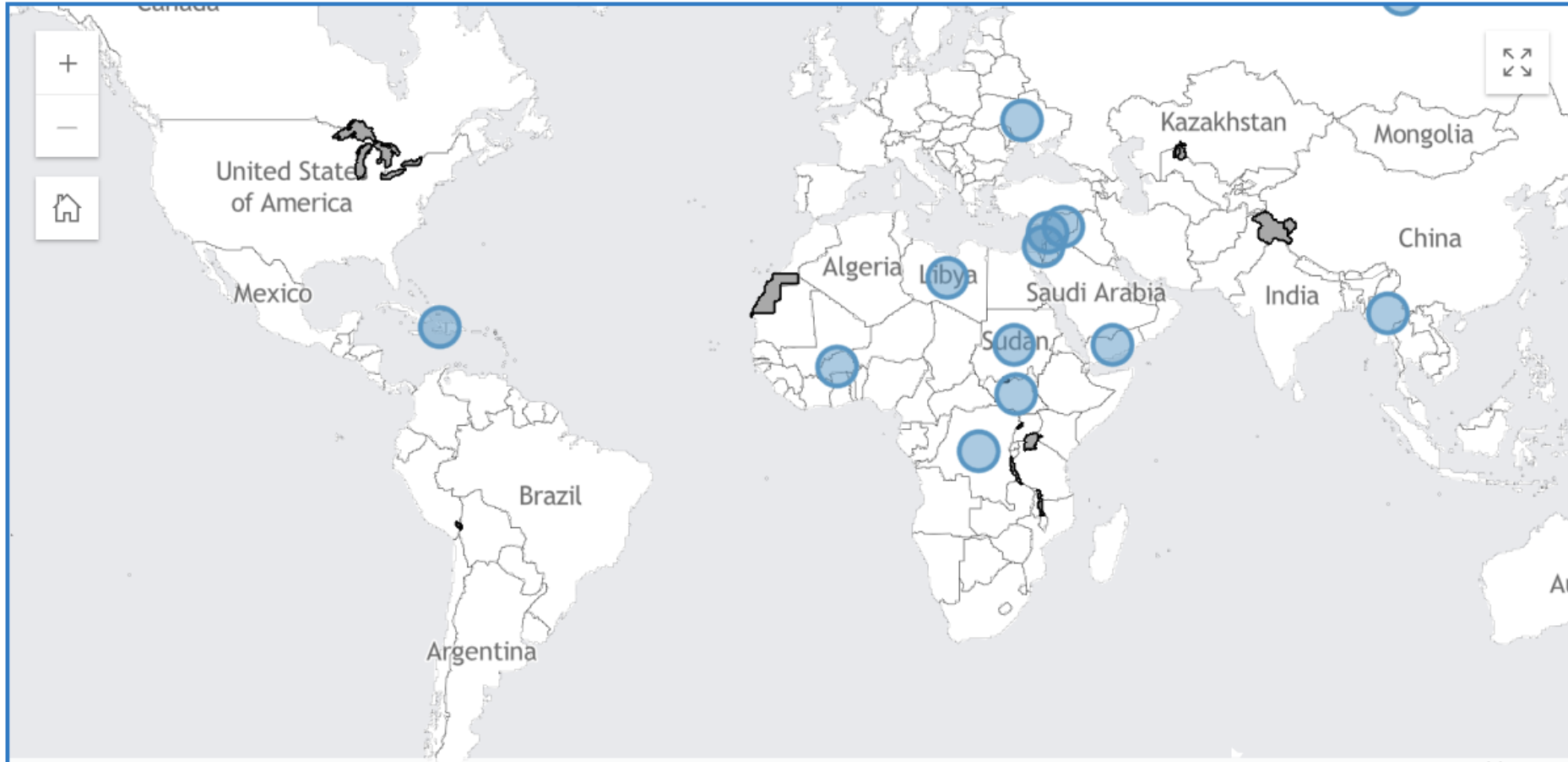


*‘This is a disease that has **grown and spread and affects many corners of the world**. We have reached a point where attacking **healthcare has become an object** of war and not just the accidental consequence of war and conflict. **Health is under attack.**’ Dr Micheal Ryan, Executive Director of Health Emergencies, WHO Exec Board 2023*

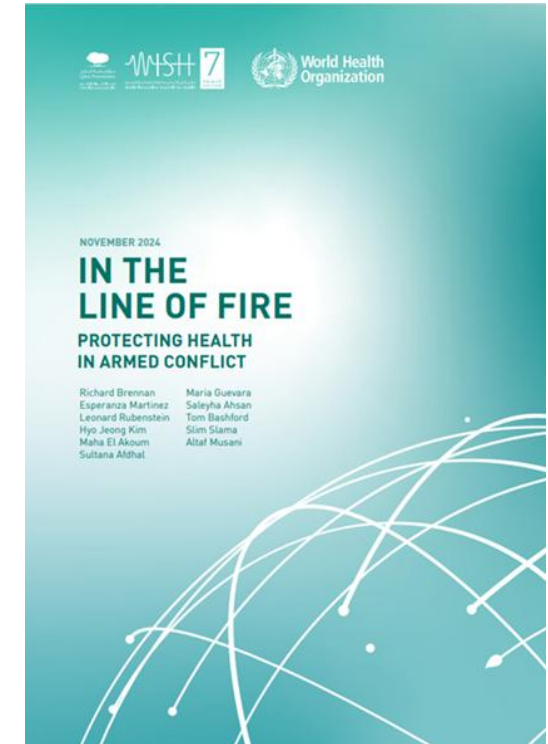
<https://extranet.who.int/ssa>

<https://www.who.int/activities/stopping-attacks-on-health-care>

Healthcare is under attack; 2024



<https://extranet.who.int/ssc>



<https://www.who.int/publications/m/item/in-the-line-of-fire--protecting-health-in-armed-conflict>

Humanity; humanitarian law

*‘to advocate and demand unequivocally that the Geneva Convention is fully respected—without permissive policies—in **protecting medical personnel, prohibiting attacks against medical units, and preserving the rights of sick people, including those diagnosed with cancer.**’ Cancer Manifesto*

Ghebreyesus, Tedros Adhanom et al. The Lancet, Volume 404, Issue 10451, 427



Sarawak statement on palliative care in humanitarian crises

- recognition of the rights of people and communities to live in safety and have their universal healthcare needs supported
- the urgent reinstatement, continuation and increase of development and humanitarian assistance, including medical and health assistance
- an end to hostilities in all places
- the protection of health and social care professionals and healthcare institutions under international law
- communities confronting humanitarian crises, including war and other extreme events, to be firmly at the heart of decisions that affect them and not determined by political interests
- restoration of respect for human health, life and dignity.

Sudan



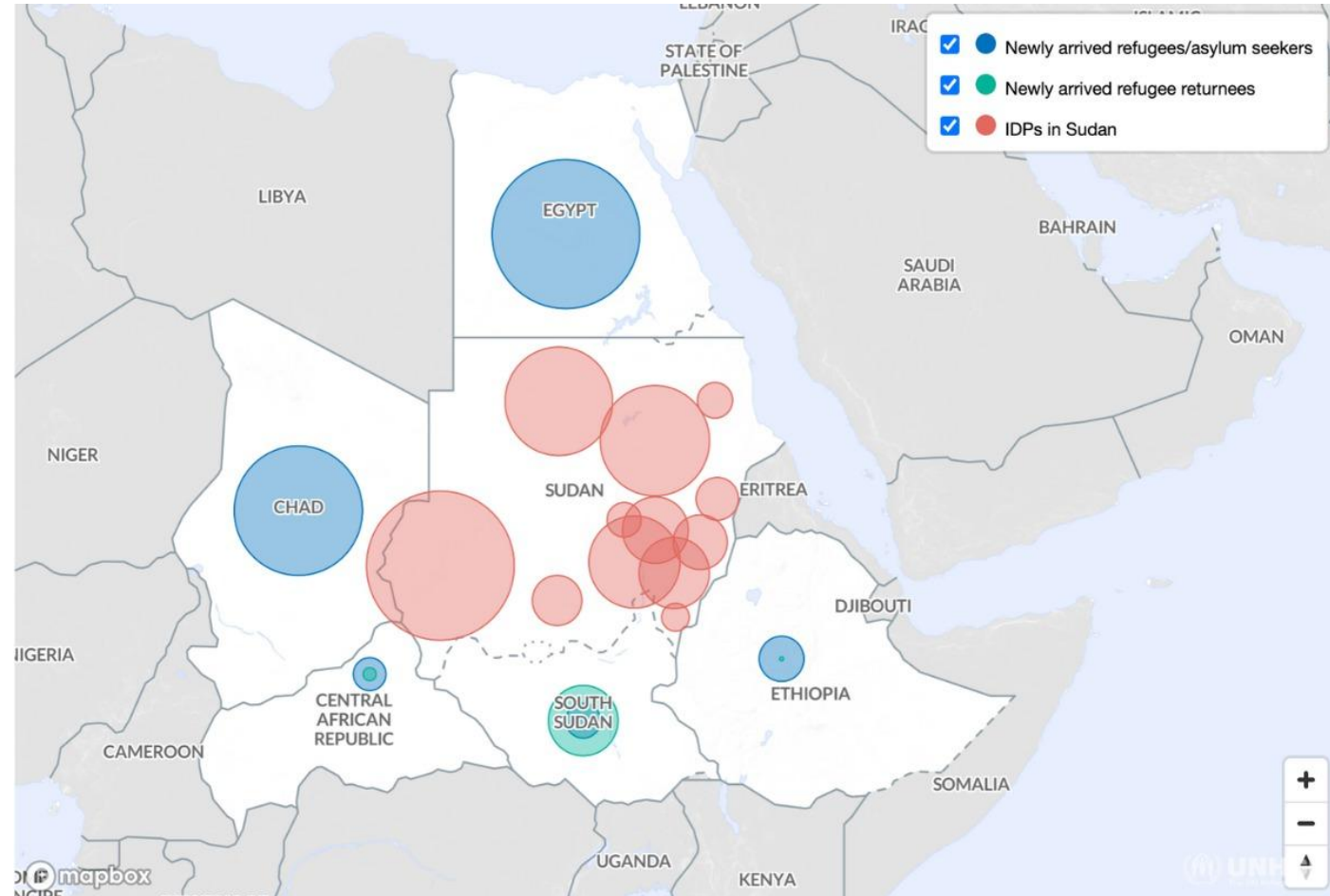
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Sudan; forced displacement and migration

- already hosted 3.8 million internally displaced + 1.4 million refugees

Since April 2023

- 7.1 million internally displaced
- 2.1 million displaced across borders
- 24.8 million people (50%) need humanitarian assistance
- 17.7 million face high levels of acute food insecurity



Impact on patients

Fatima, newly diagnosed with breast cancer, travelled 300 km, separated from family; missed her treatment for 6 months; re-presented with advanced disease.



Holistic needs in humanitarian crises

- **Physical**

- Insecurity (avoid getting killed)
- Need for lodging
- Need for food
- No access to medications
- Physical injury
- Reduced immunity
- Loss of sleep due to bombing

- **Psychological**

- Anxiety about the situation
- Fear
- Displacement
- Worry about the future
- Loss of property, loss of lives



- **Spiritual**

- Displacement
- Guilt for decisions
- Guilt for not contacting/helping others
- Not enough time to mourn the dead; improper death rituals*

- **Social**

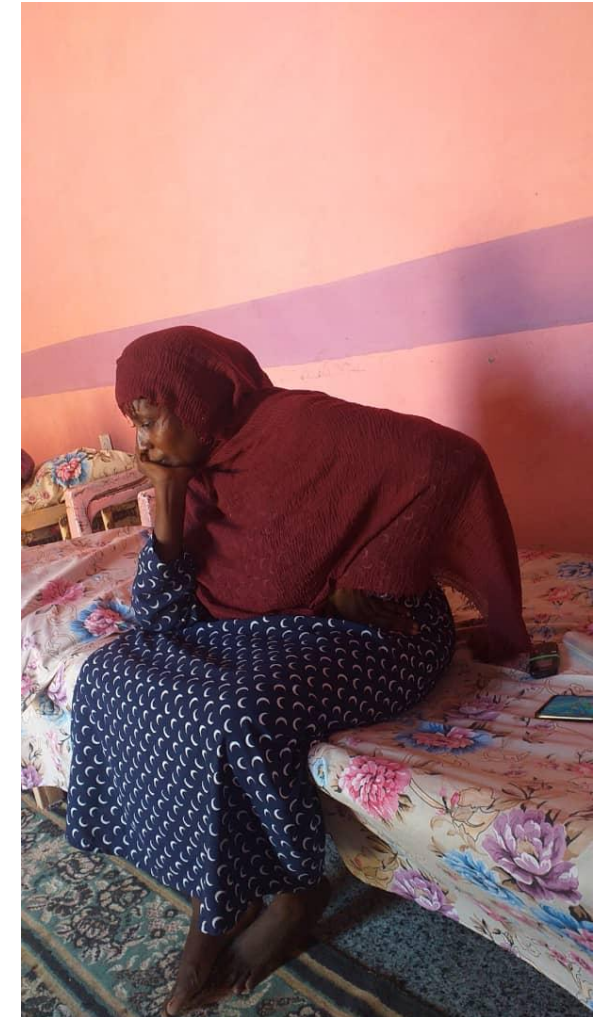
- Loss of work
- Loss of contacts
- Disruption of communities
- Intrusion into an unfamiliar and new society
- Financial difficulties

Impact on healthcare providers

Online Survey on 60 Health Workers:

- 55% lost homes; 30% lost jobs.
- 75% face uncertainty; 40% report anxiety.
- 15% lack access to medications to treat their patients.

Staff face all the same challenges as patients including access to food, safety, communications



Challenges faced by refugee and displaced patients

- **Access;** damaged infrastructure, cost barriers (Podolsky et al, 2023)
- **Prioritization;** acute care > chronic conditions (Hunt et al. 2020)
- **Trauma;** displacement exacerbates psychological distress (Guo et al. 2021)
- **Cultural/Language Gaps;** diverse needs, power imbalances, community engagement (Peprah et al, 2024)



“Sunshine during War” Project

Psychological and practical support:

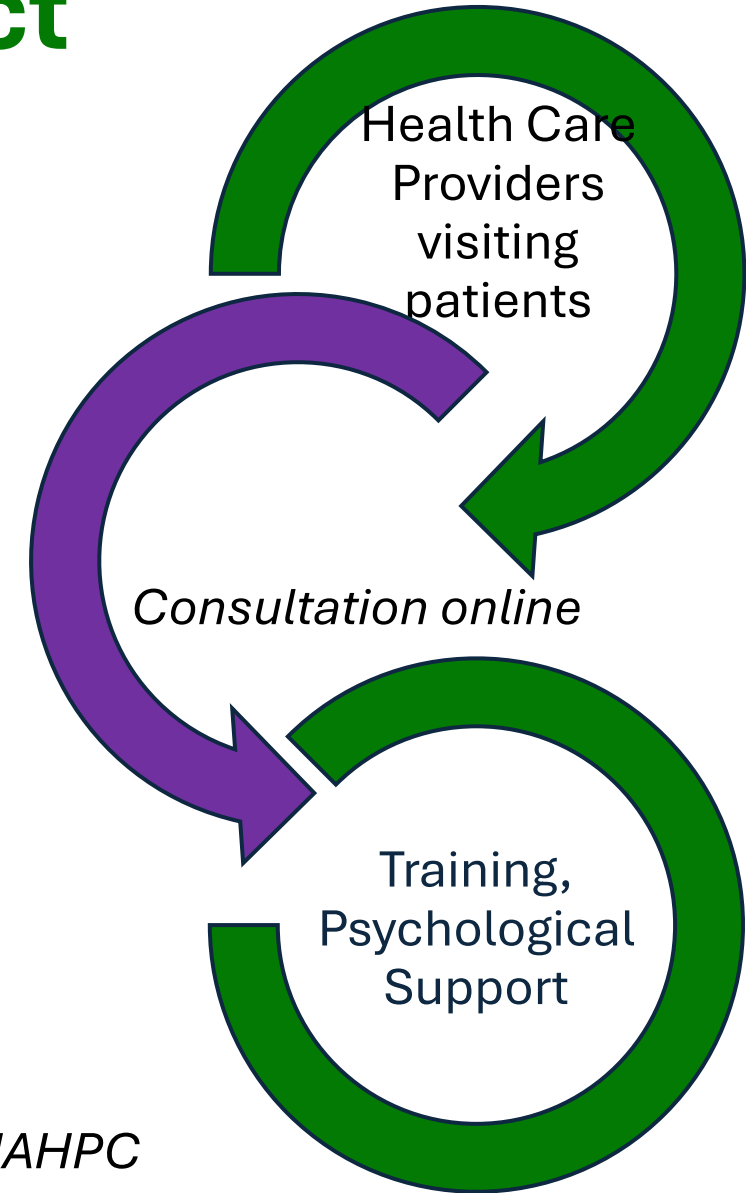
self-care sessions
for 50+ providers

Tech solutions:

virtual consults, peer networks

Reach:

800+ patients
displaced within Sudan
refugees in Egypt, Libya
South Sudan and Chad



Collaboration with Sanad, Lebanon and Cairdeas IPCT and IAHP

Psychological and practical support

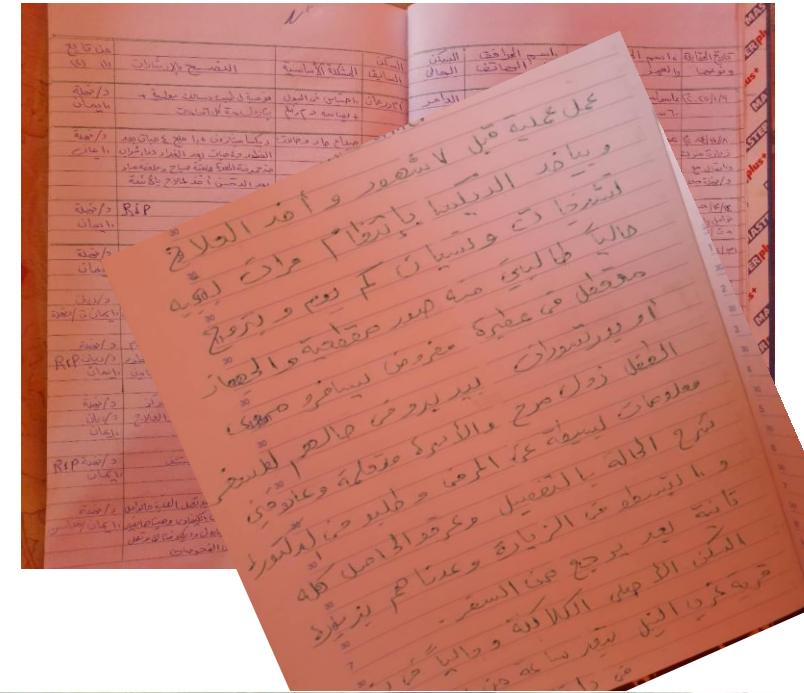
- Psychological support for patients and families and team members
- Online sessions to support resilience
- Mentorship support and networking
- Financial support for living and working

*‘Yes, we helped them, **they needed us**, but also, we needed to preserve the work that we had started; **we needed to help our patients. It is part of who we are.** This way **we are really healing, caring and humane health professionals.**’*



Technology as a Bridge

- Nurses on ground + remote experts, paper ledger to keep records.
- Support via Whatsapp and phone
- Palliative care delivered remotely; including EOL care and bereavement support



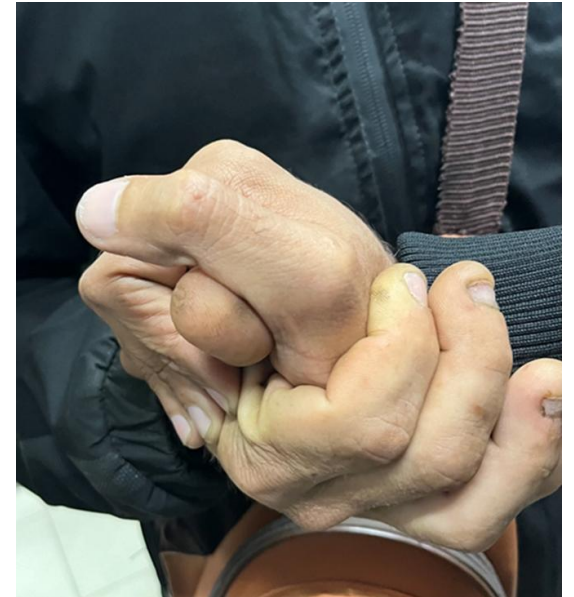
Results and Impact

- restored dignity and reduced isolation for patients.
- empowered healthcare workers with coping strategies.
- bridged gaps in care for refugees across borders.
- *‘seeing a family member’ ‘they gave me hope. I am not forgotten.’*
- **even in war, compassionate care is possible with innovation and collaboration.**



Recomendations

- Integration of pain and palliative care for refugees, migrants and the countries affected by emergencies
- Include palliative care in humanitarian health frameworks and response planning.
- Ensure holistic care including access to medications
- Support staff who are also affected by the same emergency
- Be innovative (low and high tech)
- Be collaborative
- *Ensure community ownership*



Humanity; 'we are not numbers'

- Palliative care is a lifeline for vulnerable populations in crises.
- Initiatives like "Sunshine during War" prove scalable solutions exist.
- True humanitarianism prioritizes both survival and dignity.



*'Then let us pray that come it may, (As come it will for a' that),
That Sense and Worth o'er a' the earth, Shall bear the gree an a' that.
For a' that, an a' that, It's coming yet for a' that,
That man to man, the world, o'er, Shall brithers be for a' that.'* Rabbie Burns

Many thanks

Global networks

You are invited to join the PallCHASE network, to learn more about our work and how you can join the movement to increase access to palliative care in humanitarian settings.

- Education >
- Advocacy >
- Research >
- Communication >
- Locate a Palliative Care Programme



<https://pallchase.org/>



Support Sunshine during War

www.cairdeas.org.uk



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