

قرار
Resolution

**REGIONAL COMMITTEE FOR THE
EASTERN MEDITERRANEAN**

**EM/RC72/R.4
October 2025**

**Seventy-second session
Agenda item 5(c)**

**Palliative care in the Eastern Mediterranean Region:
from challenges to solutions**

The Regional Committee,

Having reviewed the technical paper on palliative care in the Eastern Mediterranean Region;¹

Recalling Regional Committee resolution EM/RC64/R.2 on the regional framework for action on cancer prevention and control which included palliative care as a key domain;

Recalling resolution WHA67.19, whereby the Sixty-seventh World Health Assembly recognized that enormous suffering for millions of patients and their families could be alleviated through access to palliative care services, especially at the primary health care level;

Welcoming the inclusion of palliative care in the definition of universal health coverage and recognizing that access to palliative care is a basic human right;

Acknowledging the benefits of palliative care across disease groups, at all stages of illness and for all age groups in reducing the suffering of patients and families and improving cost efficiency for the health care system;

Noting with appreciation the efforts of nongovernmental organizations and civil society to highlight the importance of palliative care;

Recognizing that the availability and appropriate use of internationally controlled medicines for medical and scientific purposes remains insufficient in most countries of the Region, and highlighting the need to ensure that efforts to prevent the diversion of narcotic drugs and psychotropic substances do not result in inappropriate regulatory barriers to medical access to such medicines;

Acknowledging with appreciation the inclusion of medicines for pain and symptom control in palliative care settings in the 23rd WHO Model List of Essential Medicines and the 9th WHO Model List of Essential

¹ EM/RC72/8.

Medicines for Children, and commending the efforts of WHO collaborating centres on pain and palliative care to improve access to palliative care;

Recognizing the need for adequate funding mechanisms for palliative care programmes, including for medicines and medical products, especially in developing countries;

Recognizing that palliative care utilizes an interdisciplinary approach, including physicians, nurses, social workers, mental health specialists and community health workers, to address the needs of patients with serious illness in diverse settings;

Also recognizing the importance of strong networks between professional palliative care providers, volunteers and affected families, providers of care for acute illness and the elderly, and the wider community;

Acknowledging that WHO has established and adopted clear indicators to assess the progress of palliative care development, as reflected in the technical paper and the associated regional framework for action;

1. **ENDORSES** the framework for action on palliative care in the Eastern Mediterranean Region

2. URGES Member States to:

- 2.1 Include palliative care services in national health benefit packages and universal health coverage policies, with dedicated funding, in line with global and regional commitments;
- 2.2 Embed palliative care into primary health care and hospital-based care, and leverage telemedicine to ensure early access and continuity of care including home care, particularly in rural and crisis-affected areas;
- 2.3 Expand palliative care education in undergraduate, postgraduate and continuing health care training, with appropriate recognition of the specialty to ensure a structured, tiered approach to competency development;
- 2.4 Reform national opioid regulations, including for oral morphine, to remove unnecessary barriers, while maintaining safeguards against misuse, in line with WHO guidelines;
- 2.5 Strengthen supply chain systems, promote regional production and pooled procurement strategies, and conduct targeted prescriber training to enhance safe and effective pain management;
- 2.6 Define and adopt standardized indicators to monitor service integration and outcomes, and develop national reporting systems for medicine availability, workforce deployment and equity in provision of services;

3. REQUESTS the Regional Director to:

- 3.1 Support Member States to develop national policies and plans that address palliative care and to ensure the availability of palliative care services for a wide spectrum of diseases and conditions that cause serious health-related suffering;
- 3.2 Provide support for regional and country-level capacity-building efforts, ensuring alignment in quality and scope, and tailoring technical support according to operational needs and feasibility;

- 3.3 Enhance regional and country level capacity-building in palliative care through establishing regional training hubs and mentorship programmes to build specialist capacity and support the integration of palliative care into primary and hospital-based services;
- 3.4 Ensure that WHO in its convening role brings together all key stakeholders in the development and implementation of palliative care services, including civil society organizations, patients and community members;
- 3.5 Promote regional procurement strategies, including the establishment of a regional platform for oral opioid procurement for countries that need it;
- 3.6 Encourage and support implementation research on palliative care to generate evidence on the cost-effectiveness of models and on standards of care that are relevant to the cultural and health contexts of the Region, while monitoring progress in palliative care service availability and quality;
- 3.7 Report to the Regional Committee at its 74th, 76th and 78th sessions on progress in implementing this resolution based on the indicators of the framework for action on palliative care.