

# PALLIATIVE CARE IN BURUNDI: CHALLENGES AND OPPORTUNITIES

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# Agenda

- Health Healing Network Burundi (HHNB): Right to Health commitment
- NCDs and Burundi Health System
- Palliative Care in Burundi:
  - Statements: current situation
  - Challenges:
  - Opportunities

**Capital : Bujumbura**

**Area : 27,834 km<sup>2</sup>**

**Population: 10.16 million (2013) World bank**

**Density : 314/km<sup>2</sup>(2014 estimation**

**GDP per capita: 267.11 USD (2013) World Bank**

7



# HHNB: Right to Health commitment

- Goal: Advocate and promote Right to Health for all.
  - Prevent cancer and other NCDs by promoting safe lifestyles
  - Help cancer and NCDs patients to access to adequate care
  - Help vulnerable to access to health services

# NCDs and Burundi Health System

- NCDs are increasing in Burundi
  - Cancer Prevalence is a heavy burden: a study conducted in 3 hospitals in 2009 showed a prevalence of 3.02%, 2.6 % and 1 .4% respectively ;
- Unhealthy lifestyles: tobacco and alcohol use are increasing: an average of 17% for tobacco use in 2012 whilst for alcohol consumption, Burundi is listed among the 10 biggest alcohol drinking countries in Africa [4,5]
- Lack of adequate cancer primary prevention programs: written national policy (adopted/revised) / National action plan; [6]

# NCDs and Health system (following)

- Insufficient diagnosis (one laboratory in whole country) and treatment possibilities: only surgery is possible but cancers are often diagnosed lately, when surgery is no longer feasible. No Radiotherapy unit , and chemotherapy is very expensive.
- Briefly, high burden of cancer + rudimentary cancer prevention programs and experiences barriers to accessing cancer treatment

# Palliative Care in Burundi:

## Current situation

- Palliative care: just new in Burundi, and not frequently discussed in health debates,
- 28th March 2014: PC was discussed during a National advocacy and sensitization workshop; organized under APCA financial support
- April 2014: attendance to the Hospice Africa Uganda course

## Palliative Care in Burundi: Lack of coverage in pain treatment

- **Treat the pain , 2012 report [1]**
  - Deaths related to Cancer and HIV only : 10,466
  - People dying of HIV or cancer with untreated moderate/severe pain: 6,933
  - Coverage of deaths in pain with treatment = 0.0%
  - Recent consumption of medications for pain relief average (2010-2012) (kg ) = 0 kg
  - Morphine needed to meet minimum demand from deaths due to HIV or cancer (kg): 43kg



# Opportunities

- Burundi is a Party to the 1961 Single Convention on Narcotic Drugs [2]
- WHA resolution: WHA 67. 19 « Strengthening of palliative care as a component of comprehensive care throughout the life course » [3]
- Plan to open a Cancer Unit
- Draft on NCDs policies especially the national policy on cancer
- Community Health workers and Burundian culture (accompanying families and
- Home care service; working at one of the Hospital

# Challenges

- Lack of skilled healthcare professionals (especially in PC where there is no doctor or Nurse well skilled)
- Low investment in NCDs and cancer, as it is in many developing countries
- Country depending mostly on foreign aid (partners are now decreasing their financial support to the government)
- Economic constraints to organize skills sharing sessions
- Current socio-political crisis
  - *Especially, PC as a new concept, it's hard to get policymakers involved when they are facing a socio-political and economic crisis..*

# What's planned?

- Keep advocating (involve all health stakeholders on Palliative care & pain treatment as a Human Right), until Palliative care is recognized as a component of integrated treatment within the continuum of care, according to the WHA resolution,
- Create a « pain free hospital » and Organize a training session for Health professionals from these hospitals (doctors, nurses, pharmacists, psychologists, social workers, etc): will provide Palliative care, help in advocacy campaigns and produce regularly reports which will serve as advocacy tools.

# References

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