

Statement of the Eastern Mediterranean NCD Alliance on Agenda Item: EM/RC72/8

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

Dear Chairperson, Excellencies, and colleagues,

The NCD Alliance and the Eastern Mediterranean NCD Alliance strongly support the *Resolution on Palliative care in the Eastern Mediterranean Region*.

Palliative care is a cornerstone of universal health coverage (UHC) and a basic human right. Yet, in our region, access to palliative care remains limited, especially in low- and middle-income countries and in fragile and conflict-affected settings. Millions of patients and families endure preventable suffering due to pain, lack of essential medicines, and weak integration of palliative services into health systems.

The technical paper and the resolution rightly emphasise that palliative care must be embedded in primary health care, hospital-based care, and community settings, with equitable access across all age groups and disease areas, including noncommunicable diseases (NCDs). Addressing barriers to opioid access, investing in healthcare workers training, education, and ensuring sustainable financing are critical to closing the gap.

From the civil society perspective, palliative care is not optional – it is an urgent priority to ensure dignity, relieve suffering, and promote equity in our health systems. Civil society organisations stand ready to partner with governments, the WHO, and all stakeholders to accelerate implementation of this resolution. We call on all Member States to:

- Endorse and fully implement the resolution on palliative care, with dedicated funding and accountability mechanisms.
- Integrate palliative care into UHC benefit packages and primary health care, in line with the Political Declaration of the 4th UN High-Level Meeting on NCDs which sets target of “at least 80% of primary health care facilities in all countries have availability of WHO-recommended essential medicines and basic technologies for NCDs and mental health conditions, at affordable prices” and “at least 60% of countries have financial protection

policies or measures in place that cover or limit the cost of essential services, diagnostics, medicines and other health products for NCDs and mental health conditions” by 2030.

- Reform restrictive opioid regulations to ensure access to essential pain relief while safeguarding against misuse, in line with [WHO’s new guideline on balanced national controlled medicines policies to ensure medical access and safety](#).
- Expand palliative care training across the health workforce, including community and frontline providers.
- Strengthen supply chains and regional procurement to ensure the availability of essential medicines and technologies.
- Establish monitoring systems to track equitable access, including availability, affordability and quality of palliative care services.
- Meaningfully engage civil society, patients, and families as partners in the design and delivery of palliative care programs.

Thank you.