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Free Webinar!

2nd September 2026 9.00 AM Eastern

WORLD **HOSPICE** AND **PALLIATIVE CARE** DAY
10 OCTOBER 2026
PAIN MANAGEMENT: AN ESSENTIAL PART OF PALLIATIVE CARE

World Hospice and Palliative Care Day Advocacy!

The WHPCA invites you to attend a WHPCD webinar on **2nd September 2026 at 09:00 AM Eastern Time** (US and Canada). You must register in advance. The purpose of hosting the webinar is to help you improve your advocacy skills for World Day. Faculty this year will include:



Host
Dr Stephen Connor
Executive Director WHPCA



Elizabeth Mattfeld
Programme Manager WHPCA



Dr. Stephen Watiti
WHPCA Board Trustee



Mr. Howard Kinyua
WHPCA Communications Manager

Today's Program

- Stephen Watiti – The importance of including the voice of lived experience in events
- Elizabeth Mattfeld - Focus on pain management
- Howard Kinyua - Walk through of World Day Toolkit
- All - Q & A

This Year's Theme

- **Pain Management: An Essential Part of Palliative Care**
  - Access without excess
    - Evidence based treatment of pain is not just about access to strong analgesics
  - Evidence based holistic treatment of pain
    - Physical, psychological, social, spiritual
  - Lack of access to opioids continues to be a major problem for 75% of the world's population
    - Consumption has dropped

Global Average Consumption All Opioids dropped to 28.56 mg Per Capita in 2021

Table 1
2021 Global Opioid Consumption Data (International Narcotics Control Board)

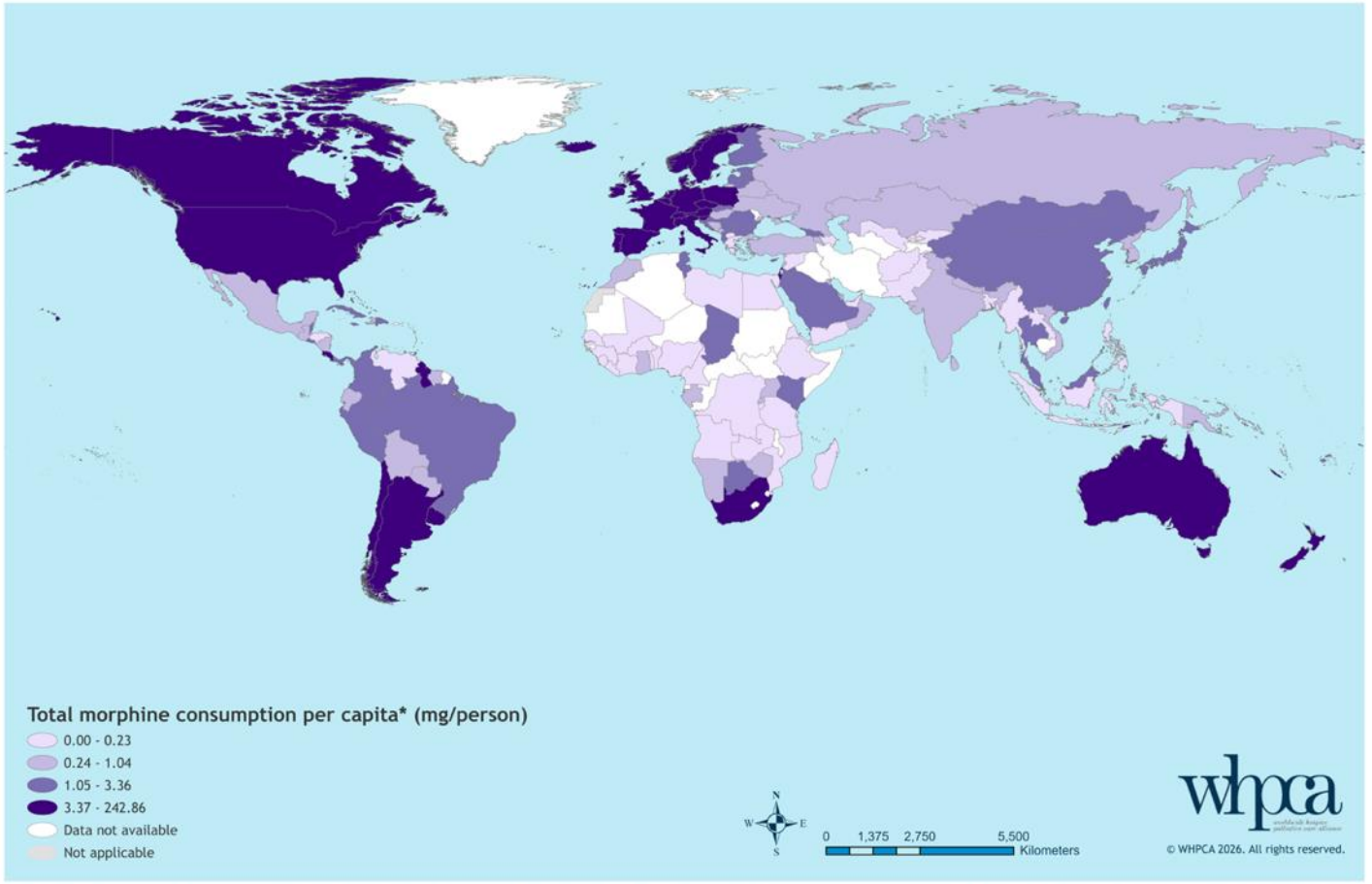
Year	2017	2021
Global Morphine Consumption (mg/person)	4.9282	4.4768

ME in mg/person ALL Opioids Minus Methadone

Morphine	4.9282	4.4768
Codeine	0.1782	0.1661
Fentanyl	15.030	11.4720
Hydromorphone	2.2142	2.1189
Pethidine	0.0618	0.0418
Oxycodone	10.8375	10.2835

Total ME in mg/person minus Methadone	33.2496	28.5591

Over 75% of population still lacks adequate access to opioids for pain control (INCB & WHO)



*Estimated mean morphine consumption (mg) computed as the mean of all available annual estimates within the 2021-2023. Mean values were then divided by the corresponding UN WPP24 population estimates.

Data Source: International Narcotics Control Board. (2025). Narcotic Drugs 2024: Estimated World Requirements for 2025 — Statistics for 2023 (Technical Report E/INCB/2024/2). United Nations. https://doi.org/10.18356/9789211071221

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World Health Organization

Global atlas of palliative care

Third edition



www.thewhpca.org

Worldwide Hospice Palliative Care Alliance
London, UK 2026

The need for palliative care - a global perspective



- About 60 million deaths worldwide annually
  - 65-80M by 2030
- Over 73 million need PC 38% at EOL
- Over 10.4 million admits from 33,700 Services
- 76.4% LMICs
- 65% 50+ / 14.4% children
- 75% will die in pain
- + >100 million grieving people – 1 billion attend services

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10 OCTOBER 2026

PAIN MANAGEMENT: AN ESSENTIAL PART OF PALLIATIVE CARE

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Pain Management Without Excess

- Pain Management is a bedrock of high-quality palliative care
- 75% of the world's population lives in countries without access to proper pain relief
- The Single Convention on Narcotic Drugs (1961) requires access to these medications for medical and scientific purposes
- Fear of opioid use persists

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Multidimensional Pain

- Physical, Psychological, Social, Spiritual
- Requires holistic, whole-person care
- Emotional, mental and existential suffering magnifies physical symptoms, complicates pain management
- Treatment should not be limited to pharmacological
- Requires an interdisciplinary, multiprofessional approach
- Any medicine, including opioids need to ensure safe use
- Responsible prescribing and stewardship

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Focus Areas for Stewardship

- **Government Regulation – submit realistic estimates, authorize import and export to maintain stock**
- **Financial plans in place to ensure stock at sustainable prices**
- **Medicine is safely transported, stored, dispensed and monitored**
- **Professionals are trained**
- **Public and patients understand their right to pain relief**
- **Patients, families and caregivers are trained**

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PAIN MANAGEMENT: AN ESSENTIAL PART OF PALLIATIVE CARE

Partners in Pain Management

- **Physical –** Physician, Nurse, Pharmacist, Physiotherapist
- **Psychological –** Psychiatrist, Psychologist, Social Worker
- **Social –** Friends, Neighbors, Clubs, Age Groups, Mentors, Volunteers
- **Spiritual –** Religion, Philosophy, Respect for Value Structure

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Thank You for the important work you do!

Elizabeth Mattfeld
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WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

World Hospice and Palliative Care Day 2026

Toolkit Launch & Advocacy Briefing

Pain Management: An Essential Part of Palliative Care

10 October 2026 | Global Day of Action

Presented by Howard Kinyua • Communications Manager, WHPCA

A briefing for communications leaders preparing to advocate, influence, and mobilize ahead of World Day

TODAY'S SESSION

What We'll Cover in 25 Minutes

1

The Case for Action

Why WHPCD 2026 matters — the scale of the pain-relief gap and this year's theme.

2

Launching the 2026 Toolkit

What's inside, and how to put it to work immediately.

3

Advocacy That Moves Policy

Lessons on turning messaging into real influence.

4

Your Role — Local to Global

Practical actions, plus registering your event on the World Day map.

THE CASE FOR ACTION

A Global Health Emergency Hiding in Plain Sight

73M+

people need palliative care every year

14%

of that need is currently being met

20M

die annually in unnecessary pain

75%

of the world lacks adequate access to opioid analgesics

“The pain they endure is not inevitable. It is the result of unequal systems, unequal policies, and unequal political will. That must change.”

— WHPCA, World Hospice and Palliative Care Day 2026 Digital Toolkit

2026 CAMPAIGN THEME

Pain Management: An Essential Part of Palliative Care

“No one should suffer in silence. Pain management is not a luxury — it is the foundation of compassionate care and a fundamental human right.”

The theme recentres attention on the multidimensional nature of pain — physical, psychological, social, and spiritual — and on palliative care as a genuinely person-centred right, not a specialist add-on.

THE CASE FOR ACTION

Four Sub-Themes Anchor the Campaign

Pain Relief is a Human Right, Not a Privilege

76% of need sits in LMICs, which receive only 4% of services. Over 80% of the world lacks adequate access to strong analgesics like morphine.

Breaking the Silence

Stigma is a double barrier — patients suffer quietly, and clinicians hesitate to prescribe adequate relief for fear of backlash.

Train to Care

Even where medicines exist, pain goes undertreated because the workforce lacks training and confidence to manage it.

Pain Has No Age Limit

Children are ~14% of global need, yet paediatric pain management remains severely under-prioritised worldwide.

THE CASE FOR ACTION

Key Messages to Carry Into Every Room

Pain relief is not optional.

It is the most basic promise of care — and any health system that fails to provide it is failing its most fundamental obligation to patients.

No one should die in pain when the medicine exists.

Morphine is inexpensive, on the WHO Essential Medicines List — yet 5.5 billion people live where it is barely accessible.

Caregivers need training, not just responsibility.

Family caregivers manage complex pain care at home, often without formal support — investing in them improves outcomes for everyone.

Children have the same right to relief as adults.

Paediatric pain management remains critically underfunded — this is an urgent, solvable global health priority.

PART TWO

Launching the 2026 Digital Toolkit

Everything your team needs to advocate, communicate, and mobilize — ready to use today.

TOOLKIT LAUNCH

What's Inside the 2026 Toolkit

Available now at thewhpca.org — production-ready and fully brandable for your context.

Campaign Branding & Logos

Ready-to-use logo lockups, colour palette, and typography.

Media Release Templates

Editable press releases for local and national outlets.

Government Petition Letter

A template letter to advocate with ministries and regulators.

Fundraising Toolkit

Guidance to raise funds and close the access abyss campaign.

Film-Yourself Tech Tips

Simple guidance for recording high-quality advocacy video.

Working With Media Guide

How to pitch, brief, and manage press relationships.

ADVOCACY THAT MOVES POLICY

From Messaging to Meaning

"Communications is a leadership responsibility, not a support function."

It means helping leaders read the policy terrain, anticipate shifts in funding or attention, and build coalitions across health and human rights actors — so palliative care is not just present in the global health conversation, but shaping it.

Move the narrative from compassion alone to evidence: cost-effectiveness, coverage gaps, and quality-of-life outcomes are what shift a finance ministry.

— Effective Communications for Global Palliative Care Advocacy

Define what you stand for

Not just within the sector — inside the broader UHC and human rights conversation.

Lead on the hard conversations

Access inequity, opioid availability, workforce shortages — before they become crises.

Sustain the storytelling

Across multiple countries and health systems, not just around World Day.

ADVOCACY THAT MOVES POLICY

The Gap Is Rarely the Strategy

Nearly every organisation has an advocacy strategy. Execution breaks down under real pressure — here's where.

Comms brought in too late

Treated as a dissemination function — newsletters, websites — and excluded from the leadership table until after the critical policy choices are already made.

Alignment fractures under pressure

When risk rises — a contested budget line, a sensitive debate, a donor pulling back — legal turns cautious, programmes turn reactive, and comms is sidelined or forced purely defensive.

Execution is underestimated

Strong advocacy needs more than a clear message. It needs systems, decision-making discipline, clear accountability, and empowered teams who can move without re-approval at every step.

ADVOCACY THAT MOVES POLICY

Influence Is Built Through Relationships — and Held to a Standard

Consistency over transactions

Ministries recognise engagement that only shows up around a deadline or crisis. Trust comes from sustained presence and evidence-sharing — even when nothing is being asked for.

Value, not just proximity

Bring data on unmet need, technical expertise on integration models, and the ability to convene clinicians, policymakers, and patients meaningfully in one room.

Institutional, not personal

Political leadership changes quickly. Anchor relationships across technical and policy structures — including WHO working groups — so trust survives when a champion moves on.

YOUR ROLE — LOCAL TO GLOBAL

Advocating Locally





Organise a community event

Bring together patients, families, and community members. Frame it around palliative care as integral to Universal Health Coverage.



Engage local media

Share the campaign's media release and pitch a story on this year's theme to local and national outlets.



Record a short video

A 2–3 minute video from a compelling spokesperson, calling on government to invest in palliative care.



Register your event

Add your activity to the official WHPCD global map so it's counted in the worldwide movement.

YOUR ROLE — LOCAL TO GLOBAL

Advocating Regionally & Nationally



Write to national stakeholders

Ministries of Health, WHO national/regional offices, health system providers, and professional bodies — urging palliative care's inclusion under UHC.

Partner with national associations

Collaborate with fellow institutions and sponsors, including private-sector contributors, to strengthen reach and credibility.

Enlist a public voice

A prominent patient, advocate, or public figure lending their story or endorsement attracts stronger media and public attention.

Bring evidence, not just emotion

Programme data, unmet-need statistics, and integration models are what move national health budgets.

YOUR ROLE — LOCAL TO GLOBAL

Influencing at the Highest Levels



"There is no Universal Health Coverage without palliative care integration into healthcare systems across the globe."



Position within UHC2030

Frame palliative care as a cornerstone of Universal Health Coverage — financial protection, equitable access, essential medicines.



Engage WHO working groups

Institutional participation in bodies shaping palliative care guidance sustains influence beyond any single champion.



Tag the global conversation

@DrTedros @UHC2030 @WHO @WHPCA @ICPCN @IAHPC @PallCHASE — and your national Ministry of Health.

YOUR ROLE — LOCAL TO GLOBAL

Amplify Across Every Channel

Main hashtags: #WHPCDay26 #PalliativeCare

Facebook

Build momentum, tell personal stories, and drive fundraising for local events.

Instagram

Striking visuals of every registered event — link in bio to add-event and donate pages.

X (Twitter)

Short, tagged posts aimed at @WHO, @UHC2030, and national policymakers.

LinkedIn

Professional framing for sponsors, institutions, and policy audiences.

Sample post angle:

"Every red pin on the map tells a story of care, compassion, and advocacy. Are you hosting an activity for World Hospice and Palliative Care Day 2026? Add it to the global map and join a worldwide movement."

TAKE ACTION NOW

Register Your Event on the Global World Day Map

Whatever you're planning — a walk, a webinar, a vigil, a policy roundtable — every registered event builds visibility for the movement and inspires others to act.

thewhpca.org/add-event

10 October 2026 • World Hospice and Palliative Care Day



World Day 2025 — every pin, a community that took action

BEFORE YOU GO

Your Advocacy Checklist

Practical strategies to strengthen your advocacy for pain management as an essential part of palliative care.

- Frame the ask in evidence — cost-effectiveness and coverage gaps, not compassion alone
- Get communications into the room before policy decisions are made, not after
- Build institutional relationships with ministries and WHO bodies before you need them
- Localise the toolkit — branding, petition letter, media release, and social posts
- Register your event on the global World Day map at thewhpca.org/add-event
- Carry one message everywhere: no UHC without palliative care integration

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"The organizations that shape the next decade of palliative care policy will be the ones who treated communications as a leadership discipline from the start."

— Effective Communications for Global Palliative Care Advocacy

Thank You

Together, we can ensure pain management and palliative care remain firmly on the global health agenda.

Howard Kinyua

Communications Manager, WHPCA

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Register your event: thewhpca.org/add-event

#WHPCDay26 #PalliativeCare



Thank you!

For questions about this presentation contact me at

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