



ANNUAL REPORT 2021-2022 >>

whpca
worldwide hospice palliative care alliance





WORLDWIDE HOSPICE PALLIATIVE CARE ALLIANCE

We impact people's lives on the ground.

We influence policy at the highest levels.

We are building a diverse and strong movement demanding care for all.



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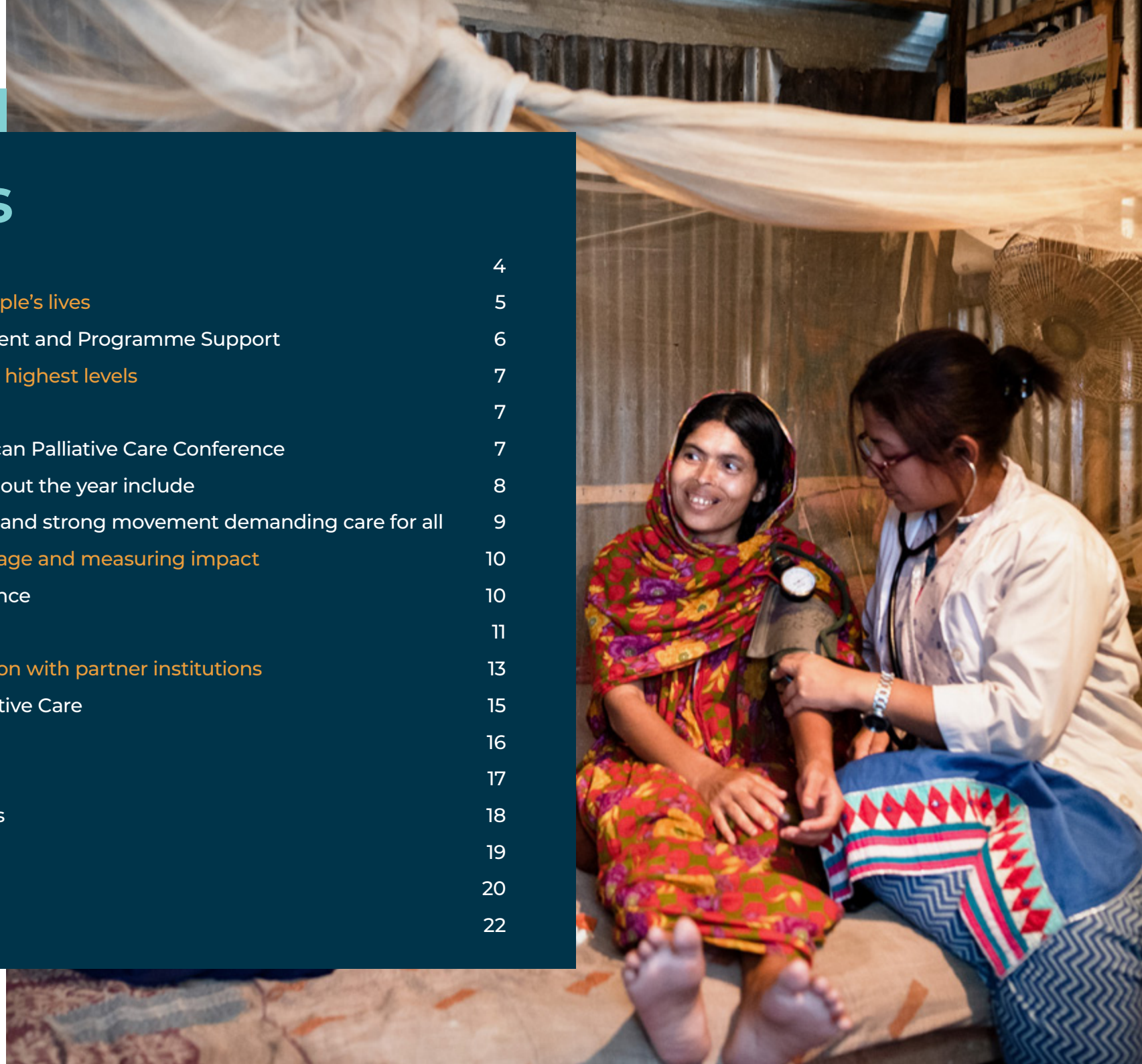
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Executive Summary

The global palliative care movement is making progress, however slow. Last year as part of our work on the Global Atlas of Palliative Care we published an article (Connor, Centeno, Garralda, Cleeland, and Clark, 2021) measuring the number of palliative care services and patients served. As part of our ongoing research measuring the six levels of palliative care development, we collected data from 198 countries and asked them how many services there were. We did this originally in 2011 and found that there were about 16,000 services delivering specialized care to hospice or palliative care patients. In 2017 that number had increased to approximately 25,000. We also did estimates of the number of patients a service could care for in each of the World Bank country income groups. That estimate grew from about three million patients in 2011 to seven million patients (and their families) in 2017!

While palliative care delivery is increasing so is the need for palliative care. Using data from the Lancet Commission on Palliative Care and Pain Relief, the estimated need for palliative care published in the 2020 Global Atlas was almost 57 million patients (pre-pandemic) and that number will continue to grow annually as the world's population continues to age. We need continuous advocacy for palliative care more than ever to ensure palliative care is part of every country's Universal Health Coverage (UHC) plans. In this year's annual report, you will learn what WHPCA is doing to promote palliative care in UHC along with how we are working to help develop indigenous models of palliative care in different parts of the world. As the world is (hopefully) emerging from the shadow of the COVID-19 pandemic we wish you good health and well-being. Continue to do good work and do keep in touch.

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01 How WHPCA Impacts people's lives

Organisational Development and Programme Support

In Bangladesh, the next phase of our funded work, **building an integrated age-attuned model of supportive palliative care** in Bangladesh project started in March. The project is implemented by a consortium of local partners (AYAT and BSMMU) and international partners (St. Christophers and the WHPCA). It aims to make available supportive palliative care integrating government and community health services in one Upazila Health Complex in Narayanganj, reaching at least 950 people with palliative care needs in their homes or at the outpatient department. To achieve this reach, training and mentoring will significantly increase the pool of skilled and supported health workers available and providing patient-centred care, and the project will mobilise and support community-based organisations, family members and community volunteers to engage in palliative care. At the national level, the project advocates for and provides technical support to the development of a national policy framework and budget allocation for palliative care, as well as the inclusion of palliative care in Universal Health Coverage.

WHPCA, in partnership with Alzheimer's Disease International and the World Innovation Summit on Health (WISH), has been assisting the government of Qatar to expand its capacity to deliver palliative care to older non-cancer patients. A needs assessment and initial palliative care education program was done and a report was released at the WISH summit fall 2022. An expanded training program and policy roadmap is planned for the coming year.

Building an integrated age-attuned model of supportive palliative care in Bangladesh project started in March.







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WHPCA has been providing technical support to the government of Greece in developing a national strategy for development and implementation of palliative care. This year the project remained in hiatus due to the COVID-19 pandemic but we hope to restart.

WHPCA and other partner organizations have been providing in-kind technical support to the Hospice and Palliative Professionals Association in the Russian Federation including on-line teaching, case conferences, and professional development throughout the year. The war in Ukraine has limited what can be done going forward but we continue to support palliative care professionals throughout the Eurasia region with our partner organization, the American Eurasia Cancer Alliance.

The WHPCA Palliative Care Toolkit and training manual continues to be a useful resource for those developing palliative care in limited resource settings. An updated version of the toolkit is now available. The toolkit & training manuals have been downloaded over 70,600 times.

DONWLOAD here
https://www.thewhpca.org/resources/palliative-care-toolkit

70,600

The number of times The toolkit & training manuals have been downloaded



The WHPCA continues to be focused on support of hospice and palliative care development in low and middle-income countries. We received funding for the above programme to support palliative care delivery in Bangladesh, have developed strong indigenous palliative care models with local members and are working on funding for further programmes.

Our co-edited book Building Integrated Palliative Care Programs and Services (2017) that is free to download and has been downloaded over 12,500 times.

DOWNLOAD here http://www.thewhpca.org/resources/building-integrated-palliative-care-programs-and-services

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02 We influence policy at the highest levels

Advocacy

This year we continued to focus our advocacy around integrating palliative care as part of health system strengthening and Universal Health Coverage reforms. We continued to work together with palliative care advocates and palliative care allies worldwide to achieve our aims for palliative care for all as part of UHC, with a particular focus on enabling the voice of people with lived experience of palliative care to be heard. We continue to work with WHO, as a non-state actor in official relations, and develop strong, collaborative non-state actor partnerships to deliver our objectives.

The 7th International African Palliative Care Conference

The 7th International African Palliative Care Conference co-hosted by the African Palliative Care Association (APCA) and the Worldwide Hospice Palliative Care Alliance (WHPCA), and co-sponsored by the IAHPC, ICPCN, Global Partners in Care and PallCHASE. The conference was a hybrid (physical and virtual) event that took place from 24-26 August 2022 in Kampala, Uganda.

The conference had international speakers including Dr Stephen Connor, Executive Director WHPCA, and also key speakers from the African continent. The conference theme, Palliative Care in a Pandemic, reflected both the current reality of palliative care provision on the continent, the experiences of patients and providers over the last 2 years and the projected risks of emerging infectious diseases in Africa in the future. This demands a great deal of preparedness and creativity to ensure that whatever happens, systems and services exist for all patients, young and old, male and female, rural and urban and their families continue to get palliative and comprehensive chronic care services for both communicable and non-communicable diseases.

Over the years, APCA conferences have been renowned for being a very effective platform to share research findings, best practices, and the experiences of interdisciplinary teams of health workers, patients and their families and communities as well as a ground to anticipate emerging problems and design actions that ensure preparedness leading to uninterrupted palliative and comprehensive chronic care service provision. Again this year's conference was preceded by the 4th African Ministers of Health meeting where a "Declaration on Palliative Care in a Pandemic" was signed.

PALLIATIVE CARE IN A PANDEMIC

7th International African Palliative Care Conference

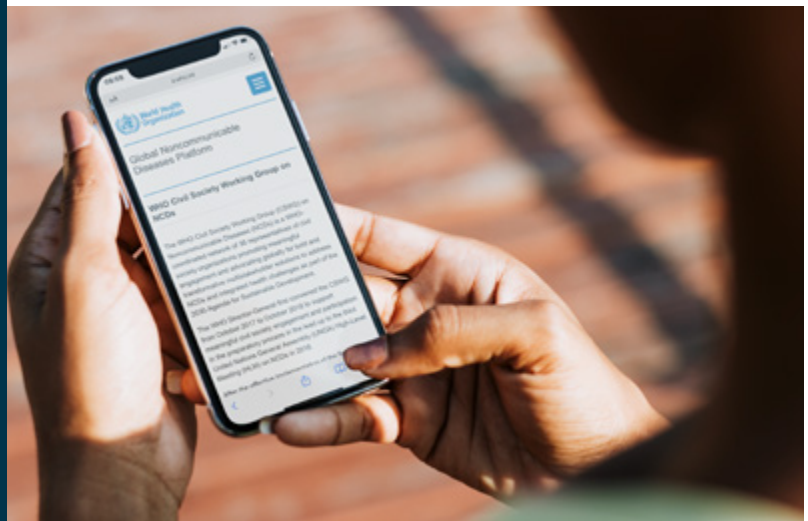
24–26 AUGUST 2022

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Our key activities throughout the year include:

- We contributed to high level events ensuring the voice of palliative care, and more specifically, people with palliative care needs were heard. This included the June 2021 World Health Assembly the civil society pre-consultation and January 2022 Executive Board.
- We have worked to support the implementation of the WHO Palliative Care Action Plan through active engagement on the WHO palliative care working group and with partners, including:
  - Semi-annual meetings with the WHO Internal Palliative Care Working Group
  - Membership in and support of:
    - The WHO HIV Quality of Care Working Group
    - The WHO Global Network for Long Term Care
    - The WHO Cervical Cancer Elimination program
    - The WHO Childhood Cancer Initiative
    - The WHO Civil Society Working Group on NCD's and Pandemic Readiness





- Our project in Kenya to support the integration of UHC was disrupted due to COVID. We found a resolution for this disruption and will begin implementation in 2022-2023.
  - As part of World Hospice and Palliative Care Day we published a new report on Equity in Palliative Care and ensured key messaging reflected the voices of people with lived experience globally on palliative care equity issues.

DOWNLOAD here: https://www.thewhpca.org/resources-2021/item/equity-in-access-to-palliative-care-report-2021

  - We delved deeper into the economics of palliative care – requesting support for palliative care in the WHO Council on the Economics for all Commission and co-publishing work on palliative care and economics.
  - We worked with the Open Society Foundations to co-publish articles on global work supported by OSF to advance palliative care, including lessons learned.

DOWNLOAD here: https://www.thewhpca.org/resources/whpca-publications-and-reports/item/open-society-progress-paper

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We are building a diverse and strong movement demanding care for all

- Our membership of the UK working group on NCDs including working collaboratively on a project to research and share the impact of NCDs financing on people with lived experience globally, including those with palliative care needs. This led to a meeting with the UK government civil servants on the findings, policy recommendations and the way forward.
  - We worked collaboratively with UK based NGO colleagues on a survey on the life course approach and will publish results in 2022-2023.
- We have delved deeper into work on inequalities in palliative care including delivering sessions on inequality at the global Fellowship Program led by the Institute of Palliative Medicine (Kerala), St Christopher's Hospice and BSMMU.
- We have continued to focus our work on targeted equity issues in palliative care integrating it across our advocacy, communications and programming including relating to gender and people with disabilities.



Our WHO/WHPCA Global Atlas of Palliative Care (2020) has now been downloaded over 70,000 times.

- We have continued our support of palliative care in humanitarian crisis by launching a fundraising platform for those affected by the crisis in Ukraine, and working collaborative with others to improve access to palliative care.
- Our WHO/WHPCA Global Atlas of Palliative Care (2014) has now been downloaded over 160,000 times. A new 2nd edition of the Global Atlas with WHO launched in October 2020 and has so far been downloaded over 70,000 times.

DOWNLOAD here: http://www.thewhpca.org/resources/global-atlas-on-end-of-life-care

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03 Communicating our message and measuring impact

One of our key aims is to build our membership to be an empowered advocacy network for universal coverage of palliative care. We do this by building a picture of lived experience of palliative care. We write plan and share engaging social media content and shine a light on best practices through editing the international edition of ehospice. The International edition of ehospice has supported WHPCA programmes and advocacy activity by reporting on: WHPCA programmes in Bangladesh, Kenya and Ethiopia, work on Universal Health Coverage, access to medications, rights of older persons, and the successful integration of palliative care services in the Philippines healthcare system, this can be used as a model by other countries trying to integrate palliative care services in their Universal Health Coverage systems.

Go to: www.ehospice.com/international





Growing our digital presence

Over the year we have increased our engagement on social media platforms, including Facebook, Twitter, LinkedIn and Instagram. Social media has the ability to reach global audiences with key WHCPA messages and is a measurable communication tool. This has been a key tool to disseminate information and resources such as the World Hospice and Palliative Care Day toolkit among other resources and information.

The WHPCA website is a global policy and programmatic resources hub and includes the 2nd Edition of the Global Atlas of Palliative Care and a directory of WHO documents. Please find more resources and engage with our website.

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Communication Tools

The WHPCA has continued to build up its communications tools.

Newsletter

Our monthly e-newsletter which is circulated to over 3,642 subscribers in over 120 countries. An increase of 588 subscribers since last year.

You can sign up to be kept up to date here: https://thewhpca.us15.list-manage.com/subscribe?u=7011dfc36f9d68a62dfde82aa&id=39accacaff

Website

The WHPCA website is an excellent resource and is updated with regular news relating to hospice and palliative care. .

Go to: www.thewhpca.org

Patient Power Project

The Patient Power Project, funded by the Joffe Charitable Trust was completed in Feb 2020. to use digital media and the voices of those people who need, or are accessing palliative care, to tell their stories to raise demand among people who would benefit from it. The second aim is to encourage national decision makers to include palliative care in Universal Health Coverage plans.

For an insight into the project, you can listen to Samuel's story, Living with liver cancer by watching her film and that of other lived experience people in South Africa here Increasing demand for palliative care as part of UHC in South Africa and Ethiopia https://www.thewhpca.org/about-us-3/anglophone-africa-project

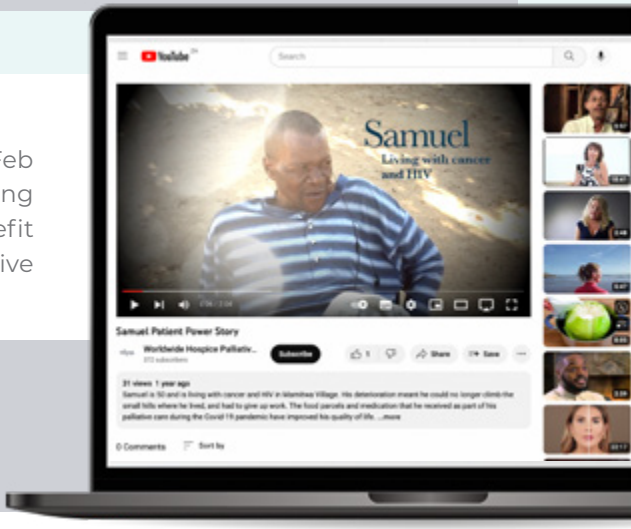
HEALING HEARTS & COMMUNITIES

WORLD HOSPICE & PALLIATIVE CARE DAY 8 OCT 2022

World Hospice and Palliative Care Day

This awareness day is a key driver in building a strong and diverse movement demanding care for all. In 2022 it took place on the 8th of October with the theme, "Healing Hearts and Communities." This highlighted grief and the need to heal unites humans worldwide. More than six million deaths were recorded worldwide during the COVID-19 pandemic resulting in tremendous strain on healthcare systems and unprecedented grief and suffering for health workers and caregivers.

Go to: https://www.thewhpca.org/world-hospice-and-palliative-care-day/about



HOW WE COMMUNICATED KEY MESSAGES

5,899 followers on Facebook
+1211

7,785 followers on Twitter
+1108

International ehospice saw
88,443 sessions
110,947 page views
75,978 new users
50% new users

414 LinkedIn followers

466 Instagram followers

MONTHLY NEWSLETTER HAD
3,642 subscribers in over
120 COUNTRIES

2022 WORLD DAY HAD
121 EVENTS
REGISTERED ON THE MAP FROM
41 COUNTRIES

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Presentations

1. American College of Cardiology, "Specifics of Hospice Benefit Care Allowances" 20 August 2021 by Dr Stephen Connor
2. 17th EAPC World Congress "Palliative care, COVID-19 and Unversal Health Coverage: Results of a Global Survey" 6 October 2021 by Dr Stephen Connor
3. WHO Quality of Care TAG ECHO Webinar, "Global Overview of Need for Palliative Care for HIV", by Dr Stephen Connor and Prof Richard Harding
4. Beloved Community Webinar, "Palliative Care, Pandemic Grief, and Compassionate Communities" 14 October 2022 by Dr. Stephen Connor
5. Russian Hospice Care Professionals Association 7th Annual Conference, "Global Atlas of Palliative Care 2nd Ed" 2 November 2021, by Dr Stephen Connor
6. Brazilian National Academy of Palliative Care, Masterclass, "Models and Barriers to Palliative Care" 19 January 2022, By Dr Stephen Connor
7. 13th Congress of CIS and Eurasia Oncologists and Radiologists, "Global Palliative Care Progress" 28 April 2022, by Dr Stephen Connor
8. St Jude Global Palliative Care Educational Series, "Global Adocacy in Pediatric Palliaticve Care," 22 March 2022
9. Hong Kong Jockey Club End of Life and Community Care Project, "End of life care and bereavement in the COVID-19 Context: Recommendations from the International Community," 25 March 2022
10. Association for Death Education and Counseling, "International Perspectives on the Direction and Future of Death Education," 20 April 2022, by Dr Stephen Connor
11. Kazakhstan Association for Palliative Care Annual Conference, "Palliative Care in the CIS Countries: Challenges to Meeting Physical and Psychosocial Needs," 28 April 2022, by Dr Stephen Connor
12. Chinese Nursing Association and Beijing Living Will Promotion Association, Greetings from WHPCA, 16 May 2022, by Dr. Stephen Connor
13. European Association for Palliative Care Preconference, "Humanitarian Crises: A global perspective on Palliative Care and Grief," 17 May 2022, by Dr Stephen Connor
14. International Work Group on Death, Dying, and Bereavement, "A call to action: Supporting the grieving family at the end of life and through bereavement during the COVID-19 pandemic," 22 May 2022, Oslo.
15. World Day Webinar, "Healing Hearts and Communities in the Aftermath of the COVID-19 Pandemic," 29 June 2022, by Dr Stephen Connor
16. Public Health and Palliative Care Conference, Bruges Belgium, "A cross country comparison of expert assessments of the quality of death and dying," 22 September 2022, by Dr Stephen Connor



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WHPCA Publications

Reports

Palliative Care – Celebrating Nurses Contributions Report (2021). Julia Downing (Ed). ICPCN, WHPCA, IAHPC Report. Access at: http://www.thewhpca.org/celebrating-nurses

Palliative Care, Covid-19, and Universal Health Coverage. (2020) WHPCA and ICPCN Report. Access at: http://www.thewhpca.org/resources/whpca-publications-and-reports/item/palliative-care-covid-19-and-universal-health-coverage-report

Book Chapters

- Connor S, Downing J, & de Lima L. (2020). What are the available resources at global/regional levels to support palliative care policies, programmes and research in low-middle income countries? In S. Connor (Ed). Global Atlas of Palliative Care, 2nd Edition. London UK: Worldwide Hospice Palliative Care Alliance.
- Clark D, Centeno C, Clelland D, Garralda E, Lopez-Fidalo J, Downing J, Varghese C, & Connor S. (2020). Chapter Four: How are palliative care services developing worldwide to address the unmet need for care? In S. Connor (Ed). Global Atlas of Palliative Care, 2nd Edition. London UK: Worldwide Hospice Palliative Care Alliance.
- Cleary J, Hastie B, Harding R, Jaramillo E, Connor S, & Krakauer E. (2020). Chapter Three: What are the main barriers to palliative care development? In S. Connor (Ed). Global Atlas of Palliative Care, 2nd Edition. London UK: Worldwide Hospice Palliative Care Alliance.
- Knaul F, Radbruch L, Connor S, de Lima L, Arreola-Ornelas H, Carniado OM, Kwete XJ, Bhadelia A, Downing J, & Krakauer E. (2020). Chapter Two: How many adults and children are in need of palliative care worldwide? In S. Connor (Ed). Global Atlas of Palliative Care, 2nd Edition. London UK: Worldwide Hospice Palliative Care Alliance.
- Connor S, Morris C, & Brennen F. (2020). Chapter Two: Introduction. In S. Connor (Ed). Global Atlas of Palliative Care, 2nd Edition. London UK: Worldwide Hospice Palliative Care Alliance.

Journal Articles

- Rosa WE, Pandey S, Epstein AS, Connor SR, Nelson JE. The inaugural United States World Hospice and Palliative Care Day Celebration: A virtual coming together. Palliat Support Care. 2021;19(2):182-186. doi:10.1017/S1478951521000237
- Krakauer E, Kane K, Kwete X, Afshan G, Bazzett-Matabele L, Bien-Aime D, Borges L, ByrneMartelli S, Connor S, Correa R, Devi B, Diop M, Elmore SN, Gafer N, Goodman A, Grover S, Hasenburg A, Irwin K, Kamdar M, Kumar S, Quynh TNX, Randall T, Rassouli M, Sessa C, Spence D, Trimble T, Varghese C, Fidarova E. (In-press). Cervical Cancer-Associated Suffering: Estimating the Palliative Care Needs of a Highly Vulnerable Population. JCO Global Oncology, 2021; 7:873-885. Doi: 10.1200/GO.21.00026.
- Krakauer E, Kane K, Kwete X, Afshan G, Bazzett-Matabele L, Bien-Aime D, Borges L, ByrneMartelli S, Connor S, Correa R, Devi B, Diop M, Elmore SN, Gafer N, Goodman A, Grover S, Hasenburg A, Irwin K, Kamdar M, Kumar S, Quynh TNX, Randall T, Rassouli M, Sessa C, Spence D, Trimble T, Varghese C, Fidarova E. (In-press). An augmented package of palliative care for women with cervical cancer. JCO Global Oncology, 2021; 7:873-885. Doi 10,1200/GO.21.00027.
- Krakauer E, Kane K, Kwete X, Afshan G, Bazzett-Matabele L, Bien-Aime D, Borges L, ByrneMartelli S, Connor S, Correa R, Devi B, Diop M, Elmore SN, Gafer N, Goodman A, Grover S, Hasenburg A, Irwin K, Kamdar M, Kumar S, Quynh TNX, Randall T, Rassouli M, Sessa C, Spence D, Trimble T, Varghese C, Fidarova E. (In-press). An essential package of palliative care for women with with cervical cancer: Resonding to the suffering of a highly vulnerable population. JCO Global Oncology. 2021; 7:862-872.
- Nevzorova D.V., Sidorov A.V., Ustinova A.I., Morev A.V., Krakauer E.L., Abuzarova G.R., Connor S.R., Chwistek M., Kunyaeva T.A., Michaelson S. (2021) Refractory Dyspnea in a Patient with End-Stage Idiopathic Pulmonary Fibrosis (Palliative Care unit Case Study). PULMONOLOGIYA. 2021;31(1):109-115. (In Russ.) https://doi.org/10.18093/0869-0189-2021-31-1-109-115
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Download here: http://www.thewhpca.org/resources/global-atlas-on-end-of-life-care

The new Global Atlas of Palliative Care

2nd Edition

The new Global Atlas of Palliative Care is a follow up to the original Global Atlas of Palliative Care at the End of Life originally published with WHO in 2014 and has been downloaded more than 70,000 times. The Atlas is a product of our 'official relations' with WHO and helps to paint a picture of the status of palliative care worldwide.

This new edition of the Atlas has been produced in cooperation with several partner organizations including the IAHPC, ICPCN, University of Miami, Walther Centre in Global Palliative and Supportive Care, Indiana University, and University of Glasgow. The original WHO methodology for determining the need for palliative care has been replaced with a modified version of the method used by the Lancet Commission on Palliative Care and Pain Relief. The original estimate of 40 million people needing palliative care has now been increased to almost 57 million annually.

The number of palliative care services has increased from 16,000 caring for three million patients in 2011 to over 25,000 services caring for seven million patients in 2017.

The Atlas addresses the following questions:

1. What is palliative care?
2. How many people are in need of palliative care worldwide?
3. What are the main diseases requiring palliative care?
4. What are the main barriers to palliative care?
5. Where are the existing gaps?
6. How well is palliative care developed in each country?
7. Where is palliative care currently available?
8. What are the models of palliative care worldwide?
9. What resources are devoted to palliative care?
10. What is the way forward?

Global Atlas stats

ALMOST 57 MILLION PATIENTS AND FAMILIES NEED PALLIATIVE CARE ANNUALLY

7% of people that need palliative care annually are children

ONLY 12% of global palliative care need is being met

ALMOST 25% of those 57 million suffer from communicable diseases like HIV, TB, and even COVID-19.

ALMOST 45% of those 57 million are at the end of life

64% of countries have no or very limited provision of palliative care

76% of adult palliative care need is in low & middle-income countries

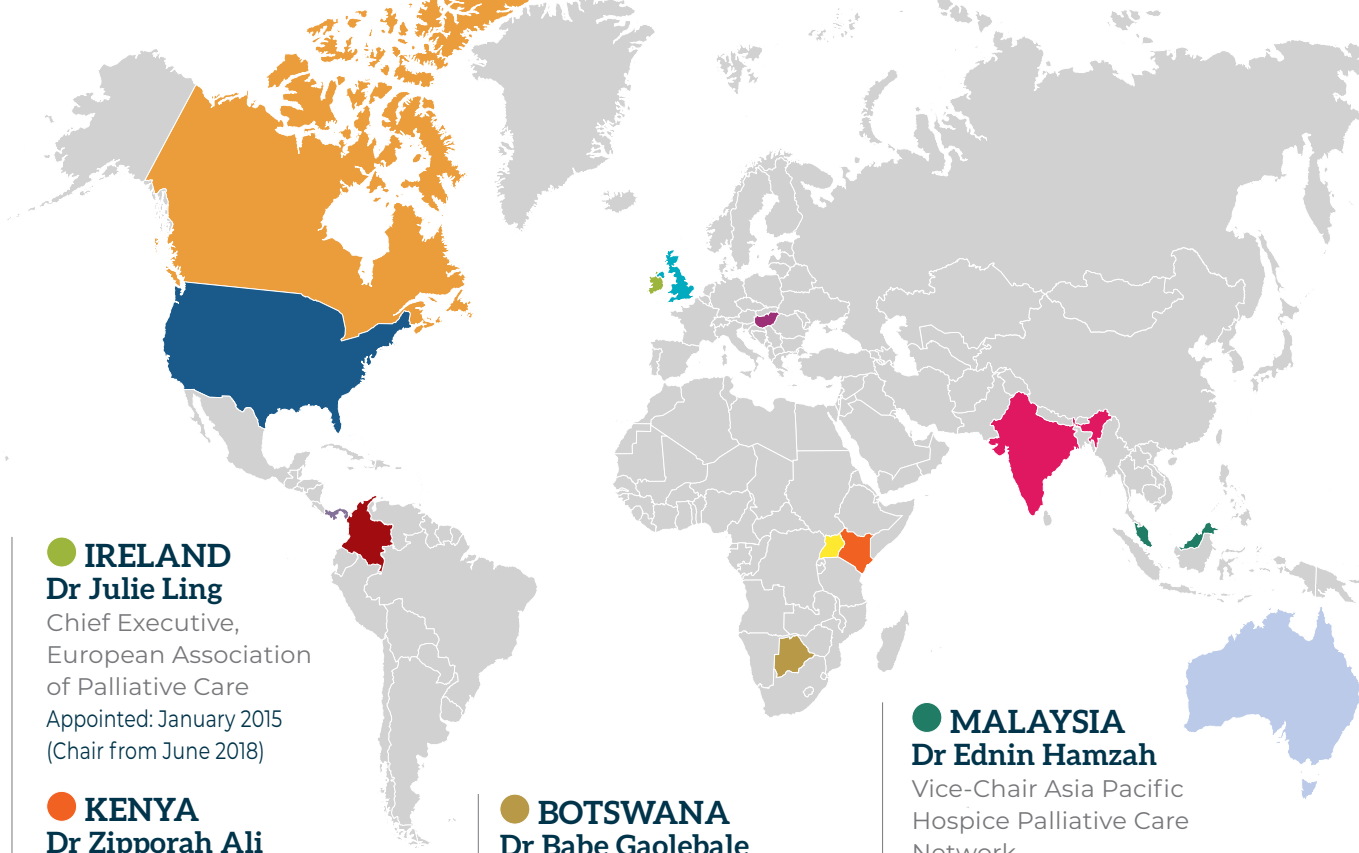
ALMOST 69% of people needing palliative care suffer from non-communicable diseases like cancer, dementia, stroke, heart-liver-kidney failure, lung diseases, or injuries

83% of countries have low to non-existent access to opioids for pain relief

87% The percentage palliative care is expected to increase by 2060

Governance Representation

Current and former Trustees



CANADA
Ms Laurel Gillespie
Executive Director, Canadian Hospice Palliative Care Association
Appointed: December 2020

USA
Mr. Edo Banach, JD
CEO and President National Hospice and Palliative Care Organisation
Appointed: October 2017

Dr James Cleary
Director and Walther Senior Chair of Supportive Oncology, Indiana University
Appointed: December 2016 to August 2022

PANAMA
Dr Nisla Camano Reyes
President, Panamanian Association of Palliative Care
Appointed: November 2018

COLUMBIA
Ms. Maria Marroquin
Administrator, Latin American Palliative Care Assoc.
Appointed: August 2020

UK
Dr Julia Downing
Chief Executive, International Children's Palliative Care Network
Appointed: March 2017

Mr. Craig Duncan, FCA
COO, Hospice UK
Appointed: August 2016

Dr Richard Harding
Kings College, Cicely Saunders Institute
Appointed: August 2016

Dr Helena Davies
Trustee with Palliative Care Needs
Appointed: October 2017

IRELAND
Dr Julie Ling
Chief Executive, European Association of Palliative Care
Appointed: January 2015
(Chair from June 2018)

KENYA
Dr Zipporah Ali
Former Executive directive, Kenya Hospices and Palliative Care Association
Re-appointed: Aug 2016; Retired 2021

UGANDA
Dr Emmanuel Luyirika
Executive Director, African Palliative Care Association
Re-appointed: Aug 2016

Dr Stephen Watiti
Trustee with Palliative Care Needs
Appointed: December 2018

BOTSWANA
Dr Babe Gaolebale
Botswana Ministry of Health
Appointed: December 2020

HUNGARY
Dr Agnes Csikos
Pecs-Baranya Hospice Foundation, Hungary
Appointed: March 2017

INDIA
Dr Savita Butola
Secretary, Indian Association of Palliative Care
Appointed: March 2020

MALAYSIA
Dr Ednin Hamzah
Vice-Chair Asia Pacific Hospice Palliative Care Network
Re-appointed: August 2017

JAPAN
Prof Yoshiyuki Kizawa
President, Japanese Society for Palliative Medicine
Appointed: September 2020

AUSTRALIA
Dr Frank Brennen
Physician
Appointed: December 2016

Prof Meera Agar
Chair, Palliative Care Australia
Appointed: September 2020

Executive Summary
01 How WHPCA Impacts people's lives
Organisational Development and Programme Support
02 We influence policy at the highest levels
Advocacy
Our key activities throughout the year include
We are building a diverse and strong movement demanding care for all
03 Communicating our message and measuring impact
Growing our digital presence
Communication Tools
04 Strengthening Collaboration with partner institutions
The new Global Atlas of Palliative Care
Global Atlas Statistics
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Challenges and Opportunities

The opportunity is for health systems to realize the value that palliative care brings to health care especially the prevention and management of serious health related suffering, the art of having difficult conversations and breaking bad news, and the importance of helping the bereaved to effectively grieve in situations where there was no opportunity to say goodbye to loved ones. As we look beyond the pandemic, which likely will not be the last one, we can do more to help low and middle-income countries to incorporate palliative care into healthcare systems using culturally appropriate indigenous models of care that are folded into universal health coverage schemes. What is needed is political will and the realization that palliative care is not a new burden but part of the solution to a healthcare crisis that will see more and more people with non-communicable and communicable illnesses where palliative care is a model for how to provide the right care at the right time.

We are seeking new funders to support an expansion of research and advocacy initiatives to meet the global demand for palliative care services.

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Thank You

We would like to thank our donors without whom our work would not be possible

Why your support is so important!

Narayanganj city was a red hot spot for Covid-19. They had several lockdowns in 18 months which made home care quite impossible. However, the Compassionate Narayanganj team did not stop their services.

They utilized social media such as Facebook and used WhatsApp effectively.

Patient care was given through tele- consultations, food packs and medicines were delivered to patients' homes. Whenever lockdown was relaxed they continued home care where they could.

Their greatest achievement was that they could realize their team strength, continued their service during this pandemic. They accepted this as the 'New Normal'.



WE EXTEND OUR APPRECIATION TO:

1. **Open Society Foundations – Public Health Program**
2. **UK Aid Direct**
3. **United States Cancer Pain Relief Committee**
4. **True Colours Trust**
5. **Anonymous Donor**

Financial Report

For the year ended 31 March 2022

				2022	2021
		Unrestricted	Restricted	**TOTAL**	TOTAL
	NOTE	£	£	**£**	£
Income					
Donations and legacies	*2a*	25,570	153,401	**180,971**	326,925
Income from charitable activities	*2b*	0	0	**0**	0
TOTAL INCOME		**25,570**	**153,401**	**180,971**	**326,925**
Expenditure					
Raising funds	*3*	0	0	**0**	1,929
Charitable activities	*3*	102,862	53,280	**156,142**	307,224
TOTAL EXPENDITURE		102,862	53,280	**156,142**	309,153
Net income / (expenditure) before		**(75,292)**	**100,121**	**24,829**	**17,772**
Transfer between funds					
Reconciliation of funds					
Net income / (expenditure) after reconsiliation of funds		**147,498**	**31,750**	**179,248**	**161,476**
Total funds brought forward		31,602	129,874	**161,476**	232,068
TOTAL FUNDS CARRIED FORWARD	*11*	**72,206**	**131,871**	**204,077**	**179,248**

Balance Sheet

	Note	2022 £	2021 £
Tangible Fixed Assets	*8*	225	674,9
Current assets			
Cash at bank and in hand		197,849	160,215
Debtors	*9*	12,603	19,718
		210,452	179,933,
Liabilities			
Creditors: amounts due within 1 year	*10*	(6,601)	(1,360)
Net current assents		203,852	178,573
Net assets		204,077	179,248
Funds			
Restricted funds		131,871	31,750
Unrestricted funds		72,206	147,498
TOTAL CHARITY FUNDS	*11*	204,077	179,248

WHPCA staff

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© November 2022 Worldwide Hospice Palliative Care Alliance

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