

**2025.04 Federal Government to Complete the Development of the Office of Palliative Care**

**Resolved,** that national council of The Catholic Women's League of Canada in 105<sup>th</sup> national annual meeting of members assembled urges the federal government to complete the development of the Office of Palliative Care to ensure early, universal and equitable access.

**Brief: Federal Government to Complete the Development of the Office of Palliative Care**

Health Canada stated in the 2018 *Framework on Palliative Care in Canada* (Framework) and 2019 *Action Plan on Palliative Care in Canada—Building on the Framework on Palliative Care in Canada* (Action Plan) that it would establish the Office of Palliative Care (OPC). Its purpose is to “provide high level coordination of activities going forward. ... [to be] resourced internally through existing funds within Health Canada” (Health Canada, “Action Plan” 28; Office). The 67<sup>th</sup> World Health Assembly of the World Health Organization (WHO) report “Strengthening of Palliative Care as a Component of Comprehensive Care Throughout the Life Course”, provided national governments with actionable indicators guiding implementation of universal equitable palliative care (“Strengthening”). While equitable and accessible palliative care in Canada has improved, it is not available to all Canadians (Canadian 13-14).

The WHO definition of palliative care states: “Palliative care is an approach that improves the quality of life of persons and their families facing the problem associated with life-limiting illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual” (Palliative). Since 2014 palliative care has been recognized as an international right to health and it is not universally accessible (Canadian 13-14; WHO, “Palliative Care”).

The development of the 2018 Framework and 2019 Action Plan established four priority goals on palliative care: to educate healthcare workers and caregivers; to provide supportive resources for care providers and caregivers; to research and collect pertinent data; and to increase universal equitable access (Health Canada, “Action Plan”; Health Canada, “Framework”).

The report *Access to Palliative Care in Canada* by the Canadian Institute of Health Information (CIHI) indicated that of the 89,000 individuals who died in 2021-22 and could have qualified for palliative care, only 58% accessed the service. This was a 6% increase from 2018. Only 36% of palliative care recipients had their desired setting of home (Canadian 13). Further noted is the lack of early access during the illness, in conjunction with therapies intended to prolong life (Health Canada, “Action Plan” 2) as half of the palliative care recipients died within 22 days of diagnosis (Canadian 14). Canadians living with dementia were the least likely to receive palliative care with only 39% receiving care. It is also noted that seniors over the age of 85 were less likely to receive care (CIHI 15-16). This supports increased early, universal and equitable palliative care access.

Palliative care experts and organizations, as well as the World Medical Association, emphasize the value of “develop[ing] national palliative care standards and quality indicators tied to health care funding” (Expert 3). While 12 of 13 provinces and territories have published palliative care frameworks (Health Canada, *The Framework on Palliative Care* 6, Appendix B), there is no single national program for palliative care (Health Canada, “Palliative Care: What We’re Doing”).

Canadians deserve to live out their lives with dignity and in comfort. The federal government is urged to complete the development of the Office of Palliative Care to ensure early, universal and equitable access.

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### **Action Plan: Federal Government to Complete the Development of the Office of Palliative Care**

1. Write letters to the prime minister, minister of health and local members of parliament urging the government to develop an Office of Palliative Care to provide early, universal and equitable access to early community palliative care through creation of national policies and standards.
2. Increase communication, education and advocacy efforts in parishes, schools and communities through guest speakers, hosting the Canadian Conference of Catholic Bishops' *Horizons of Hope: A Toolkit for Catholic Parishes on Palliative Care* program, participating in "12 Hours of Prayer for Palliative Care" and/or distributing pertinent postcards/information.
3. Continue to monitor/follow-up with government on the progress related to this resolution.
4. Begin conversations to promote increased access to palliative care.