



Speaking notes by Deputy Minister of Health, Dr Sibongiseni Dhlomo during the celebrations of 20 years of African Palliative Association - Cape Town

Friday, 17 May 2026

Thank you, Master of Ceremony, Andre Wagner
African Palliative Care Association Board Chair, Ms Thobekile Finger
African Palliative Care Association Executive Director, Dr Emmanuel
Luyirika

Malik Jaffer, former USAID Representative in South Africa Distinguished Guests,
Ladies and gentlemen
Good evening,

It is my honour to welcome the African Palliative Care Association back to its roots. Tonight, we are gathered here to celebrate the existence of this pan-African network that was born right here in Cape Town at a meeting held in 2002 where a steering committee was established to develop the organisation which was then officially inaugurated in Arusha Tanzania in 2004.

We are glad to be a part of the commemoration of this great milestone for the association themed "20 years of Palliative and Comprehensive Chronic Care for Sustainable Development in Africa". The theme acknowledges the crucial role of good physical and mental health for humankind if the SDGs are to be attained. South Africa was one of the sponsors of the 2014 World Health Assembly resolution (WHA67.19) of "palliative care as an essential component of comprehensive health care throughout the life course". Thus, this is a double celebration: 10 years since the WHA resolution on palliative care and 20 years since APCA was established.

The significance of palliative care was echoed by Director-General of the World Health Organization, Dr Tedros Ghebreyesus in September 2021 when he wrote to all 194 Heads of Member States calling them to develop policy which strengthens palliative care service in response respond to this global challenge on palliative care, with collective compassion and urged them to strengthen palliative care services to expand access to these services.

Dr Tedros made that important call because he values the importance of strong palliative care in the health system. Palliative care brings dignity, reduces pain and suffering, and enables children and adults diagnosed with a life-threatening disease or condition to live a quality life for as long as possible.

Thus, we need to create equitable access to palliative care for a range of both communicable and non-communicable diseases, and it is no longer an option that only certain communities benefit from such care.

Palliative care, including appropriate pain management, should reach all children and adults in need and I have no that the signing of the National Health Insurance Bill into an Act of Parliament on Wednesday this week,

will go a long way to ensure equal access to quality healthcare including the palliative care which is not covered by most medical schemes.

Thus, the Universal Health Coverage will not be complete without ensuring improved access to quality and affordable palliative care services for all South Africans.

Historically, palliative care was associated with services provided by Hospices that provided relief of pain and suffering of patients and their families or caregivers especially during the end-of-life. These services were primarily linked to care of patients suffering from cancer.

However, with the growth of HIV and thousands of people ill and dying in Africa, palliative care shifted emphasis significantly to dealing with pain and death arising from HIV and other relevant diseases. As government we may not succeed without strong partnerships with stakeholders like African Palliative Care Association, hence the WHO resolution calls for stronger collaboration within a context of maintaining and respecting human rights.

As we celebrate here today, let us not forget some of the founding members of APCA, the likes of the late Kath Defilippi, the first President whose legacy has continues to live on through the organisations that she was instrumental in setting up, such as South Coast Hospice, the SA Hospice Palliative Care Association (now the Association of Palliative Care Centre) and the African Palliative Care Association.

In 2013, South Africa hosted the 4th International African Palliative Care Conference in Johannesburg, and this brought about a significant boost in the growth of the sector in South Africa.

APCA has made significant impact on the palliative care landscape on the African continent, especially through its initiatives such as;

- i. The small grants for palliative care development
- ii. The education scholarship for nurses and social workers
- iii. The triennial International African Palliative Care Conferences
- iv. Africa Ministers of Health meetings on palliative care
- v. Access to controlled medicines interventions
- vi. The pain free hospital initiative
- vii. Advocacy at regional level and supporting country level effort, including support to countries to develop national palliative care policies.
- viii. Webinar series for capacity building and palliative care training in all regions of the continent.

South Africa's contribution to the development of palliative care on the continent was further enhanced by institutions such as the University of Cape Town which integrated palliative care into academic curricula for health professionals, Wits Palliative Care (the Gauteng Centre for Excellence in Palliative Care), PALPRAC (The Association of Palliative Care Practitioners of SA), and children's palliative care groups including PaedsPal, PATCH, Umduduzi.

These organisations have been offering capacity building not only within South Africa but globally. The current and previous board chairs of APCA hail from South Africa, and I am proud to say as this country has provided and will continue to provide leadership towards improving access to palliative care, whenever we are given opportunity.

The education initiatives such as the post graduate programmes in palliative care have been offered by University of Cape Town to health care professionals across Africa, together with online training in children's palliative care offered by PATCH.

For many years, palliative care was provided only in non-governmental organisations. The first state service was established at Chris Hani Baragwanath Hospital, the Gauteng Centre for Excellence in Palliative Care also known as Wits Palliative Care. We are, therefore, committed to see this discipline of palliative care continue to grow.

Palliative care is not just about end-of-life support; it also plays a role in preventing complications and improving the quality of life for patients with chronic conditions. This requires a collaborative approach, and working closely with other stakeholders in healthcare, enabling feedback loops for continuous improvement and facilitates collective responsibility for improving community health and wellness.

In 2016, the then Minister of Health, Dr Aaron Motsoaledi, appointed a National Steering Committee on Palliative National which I happened to chair while I was the MEC for Health in my province of KwaZulu-Natal. This committee drafted the National Policy Framework and Strategy on Palliative Care (2017 – 2022) which was approved by the National Health Committee in April 2017. It took some time and donor funding to appoint a Deputy Director for Palliative Care. This was an important step to coordinate development activities in palliative care in each province and measuring this development through a morphine monitoring project.

All our provincial departments of health have established task teams to develop palliative care in each province with designated personnel to lead these initiatives. An important foundation for providing palliative care has been the training of health care professionals in palliative care, including short courses offered by hospice training centres and academic institutions, both on-line and face-to-face training. In some provinces there are dedicated posts in palliative care funded by the provincial department of health.

Key research studies have investigated aspects of palliative care provision and training. Two significant studies have been conducted highlighting the integration of palliative care into the health system. It will be important to review the research conducted in 2010 which showed that only 17% of people in South Africa requiring palliative care had access to this care. We trust this situation has improved!

The Association of Palliative Care Centres (APCC) and SA hospices continue to play a significant role in developing patient and family centred palliative care and providing good symptom management to patients with serious illness and providing emotional, practical, and spiritual support to these patients and their families. In particular, the APCC accreditation system for palliative care centres has been important to assess the standards of palliative care provision and to provide mentorship to organisation to meet these standards. Organisational compliance with the APCC standards allows patients and families the assurance they will receive quality palliative care from the service.

PALPRAC is an association of palliative care practitioners which connects palliative health care providers in a collaborative network and provides national leadership and advocacy for the equitable provision of palliative

care through appropriate frameworks, standards of care and technical support.

Children's palliative care is yet to receive sufficient attention or funding but has also been disseminated through training programmes at universities and through on-line courses offered by PATCH. Gaps remain in Children's palliative care both in identifying children in need, and providing and funding this care. As described by Umduduzi – Hospice Care for Children-children's palliative care aims 'to provide compassion, dignity, relevant care and relief from discomfort and pain to children diagnosed with a life-threatening or life-limiting illness.'

The World Health Organization reports that in South Africa long term health conditions account for a twelfth of the burden of ill health in young children but a massive third of the burden of disease in older children. These conditions require palliative care and paediatric palliative care services are required in all health facilities caring for children regardless of the level of care of the facility.

The Health Professions Council of South Africa has recognised Palliative Care as a subspecialty. This calls for specialized training and education pathways for specialist healthcare professionals.

The 2017 National Policy Framework and Strategy for Palliative Care is due for review and update. The goal of appropriate allocation of financial resources to strengthen and support palliative care services has not yet been realised and the goal of strengthening of governance and leadership towards implementation of the policy will be an ongoing activity.

There are still many challenges for palliative care in South Africa. Funding of palliative care remains a challenge even though many studies have shown that palliative care saves costs for the health system and for patients and families at the same time as providing appropriate compassionate care to people with serious illness.

Expanding palliative care education across the care continuum - from intensive care units (ICUs) to primary care settings and extending to training informal caregivers - is crucial. A significant gap is the omission of palliative nursing training in nursing curricula, despite many discussions with the South African Nursing Council about the importance of palliative care nursing training. Nurses are at the forefront of provision of palliative care and should be adequately trained to provide this care.

There are many service providers that claim to provide palliative care and yet do not have the knowledge skills and experience to provide palliative care. Standards for palliative care provision would assess the organisational capacity to provide palliative care.

The focus of palliative care is to relieve the suffering for the patient and the family and ensure the best possible quality of life for people with serious illness. We applaud APCA and its mission to ensure that palliative care is widely understood, integrated into health systems at all levels and underpinned by evidence in order to reduce health-related pain and suffering across Africa.

Our goals for the future of palliative care are that all health care professionals are trained in palliative care in order to care for those patients in need; that palliative care will be integrated into all levels of the health system and will be funded accordingly.

We join the African Palliative Care Association (APCA) in celebrating its 20th anniversary and look forward to making greater impact and contributing to the health component of the MDGs for Africa's development.

I thank you