Seminar Series Starter Presentation Questions Global Future of Palliative Care

An enlightening and thought provoking talk from Shahaduz Zaman who shared his interesting research to date from a project funded by the Wellcome Trust.

Zaman introduced us to the 10 categories of palliative care interventions developed through his team’s research, and summarised case studies that are currently being investigated. We then went on to look at the potential future of palliative care, and how the global differences between countries affects the provision of care, for example in the availability of resources, population growth and the restraints of a political/legal framework.

Zaman explained that the ‘Western’ model of institutional and specialised palliative care was influencing other countries to aspire to this model, who would then be in a “waiting room” situation as they are not equipped either practically or culturally to provide similar care. Zaman advised from his research it was felt that all countries need to assess provision worldwide to learn from it. However, rather than merely transfer ways of providing palliative care into a different setting, to actually translate the care into practice in a manner that suits the different economic, political, and cultural context.

The talk ended by considering a community model where volunteers within the community provide the support and care for the dying; a practice which is happening in Kerala, India and some other areas in various countries. The effectiveness of this approach has proven difficult to quantify, and the notion of how to measure a ‘good death’ was challenged alongside the cultural and global differences of dying well.

This engaging seminar raised many questions regarding where the future lies, and whether it is right for the world to try and adopt a common, uniform approach to supporting people at the end of life, or whether it is more beneficial and realistic to consider plurality in approaches, where practice can be adapted to suit the environments and populations where it is delivered.

By Zana Saunders, Phd Researcher, WELS