

Chapter 5 What are the existing models of palliative care development in different resource settings?

India

Neighbourhood Network in Palliative Care, Kerala, India

Description of the model

Neighbourhood Network in Palliative Care (NNPC), a community-owned programme in Kerala (India), is a project evolved out of a series of needs-based experiments in the community. In this programme, initiated in the year 2000, volunteers from the local community are trained to identify problems of the chronically ill in their area and to intervene effectively, with active support from a network of trained professionals. Essentially, NNPC aims to empower local communities to look after the chronically ill and dying patients in the community. It is inspired by the concept of primary healthcare described by the World Health Organization in the Declaration of Alma-Ata: “Primary healthcare is essential healthcare based on appropriate and acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost the country and the community can afford, to maintain the spirit of self-reliance.” Within 10 years, the initiative has grown into a vast network of more than 500 community-owned palliative care programmes looking after more than 15,000 patients at any one time. It has a workforce of over 15,000 trained community volunteers, 50 palliative care physicians, and 100 palliative care nurses.



Level of support from the existing health system

The challenge before palliative care workers in the developing world is to evolve a culturally and socio-economically appropriate and acceptable system for long-term care and palliative care, accessible to most of those who need it. This can be possible only if the service is part of a community-based primary healthcare system using local manpower and other resources. Many authors have highlighted the role of community participation in placing palliative care within this holistic context.

Innovations to highlight

All the palliative care units in the network have outpatient services led by palliative care physicians. The doctor-nurse teams that manage these outpatient clinics are employed by the local community volunteer groups. The number of outpatient clinic days per week varies from unit to unit. Patients registered at one unit can also attend an outpatient clinic run by another unit. Community volunteers visit most patients at home. In addition, all the units offer regular nurse-led home care services, supplemented by home visits by doctors. Services offered by outpatient clinics and professional home care units include medical consultations, medicines, procedures like tapping of ascetic fluids, and wound care. Neighbourhood network groups also offer emotional support to patients, food for the needy patients and family, educational support to their children, transport to hospital when required, and social rehabilitation programmes in addition to the medical and nursing services.

Sustainability

The NNPC is a highly sustainable model due to direct ownership by the community. In addition, the local and state governments, which values NNPC's services to the communities, provided \$3.6 million in parallel support.



Group meeting