

Morocco's long road to comprehensive palliative care



Raquel Maria Carbonell Pagola/Contributor

In May, 2014, the World Health Assembly unanimously adopted the resolution on strengthening of palliative care as a component of comprehensive care throughout the life course and called on member states to ensure that it is integrated into all levels of the health-care system. Many countries—not only low-income and middle-income ones—struggle with the provision of comprehensive palliative care. Morocco is no exception, but an assessment of its progress and failures highlights important areas for others to consider. In its report *Challenges and Progress in Ensuring the Right to Palliative Care in Morocco*, released on Feb 4, Human Rights Watch lays out Morocco's fairly recent attention to palliative care provision and its persistent obstacles and barriers.

In the 1990s, palliative care was non-existent in the country and oral morphine was introduced for the first time only in 1995. The Moroccan Society of Pain and Palliative Care opened in 1996, and it was not until 2005 that the first palliative care unit opened in Rabat linked to the National Oncology Institute. Two separate national health policies laid out a vision for the development of

palliative care in 2010 and 2012, albeit with perhaps overambitious goals, such as "support 100% of [cancer] patients requiring palliative care by 2019". There is also no clear direction on who is responsible for implementation and on monitoring progress. For the first time, palliative care education was included as a compulsory module in the undergraduate medical curriculum in 2015.

These are all very important first steps and it is good to see that palliative care has become a national priority in a region that is particularly weak in the development of palliative care services. However, there are many unnecessary obstacles to making adequate pain relief widely available. For example, morphine and its derivatives are labelled "poisons" in the controlled substance laws and require a special prescription pad. Only a small percentage of physicians are able to prescribe opioids and oral morphine is not available for those on the public insurance scheme outside hospitals. Palliative care should become an essential part of health care worldwide. All countries must accelerate progress urgently. ■ *The Lancet*

For more on the **Human Rights Watch** report see <https://www.hrw.org/report/2016/02/04/pain-tears-me-apart/challenges-and-progress-ensuring-right-palliative-care-morocco>

Australia's immigration centres are no place for children



The AGC/Contributor

Last week, the High Court in Australia ruled that the country was within its constitutional rights to detain asylum seekers offshore. This ruling is scandalously objectionable not only for the health and wellbeing of individuals seeking asylum or refuge in Australia, but also for the more than 260 people, including children, on the mainland who are now at risk of deportation.

As noted in Human Rights Watch's *World Report 2016*, released on Jan 28, Australia has a good record of protecting civil and political rights, but it fails to respect international standards for asylum seekers and refugees. The country detains migrants in centres on the mainland and offshore, including in poorer, less well equipped countries. As of Oct 31, 2015, more than 900 asylum seekers and refugees were detained in Australian centres on Manus Island, Papua New Guinea, while more than 600 were being held on Nauru in Micronesia. Serious health and human rights issues have been reported in some detention centres, including sexual and physical assaults of adults and children, rape, and self-harm.

Concerns have been raised about children in these facilities. A report by paediatricians from the University of Sydney to the Australian Human Rights Commission in October, 2015, concluded that closed immigration detention in Wickham Point (on the mainland) and Nauru was harmful to the health and mental health of young children and youth. The report called for all children to be immediately removed from such facilities, and stated that "under no circumstances should any child detained on the mainland be returned to or transferred to Nauru" either in detention or in the community because the island is an inappropriate place for asylum-seeking children.

The High Court has ruled that offshore detention is legal, but the conditions and populations being detained were not under review. We hope that had they been, the ruling would be different. The Australian Government needs to develop a humane response and reception for those seeking asylum and refuge in the country, starting with an end to the detention of children and their families. ■ *The Lancet*

For **World Report 2016** see <https://www.hrw.org/world-report/2016>

For the **report to the Australian Human Rights Commission** see <https://humanrights.gov.au/sites/default/files/document/publication/Health%20and%20well-being%20of%20children%20in%20immigration%20detention%20report.pdf>