

Palliative care needs of people and/or their families with serious and/or chronic health conditions in low- and middle-income country (LMIC) humanitarian settings – a systematic scoping review protocol

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Background

- An estimated 274 million people needed humanitarian protection and assistance in 2022¹.
- Whilst palliative care has rarely been undertaken in these situations² since 2016 a recognition of the need for palliative care integration into humanitarian settings has been growing³.
- There are context-specific palliative care patient and family needs^{2,4,5}.

Methods

Aim: to systematically explore the evidence to provide a current depiction of the palliative care needs of patients and /or their families in LMIC humanitarian settings.

Research questions:

- What are the palliative care needs of people with serious and/or chronic conditions in LMIC Humanitarian contexts?'
- What are the palliative care needs of the families of people with serious and/or chronic conditions in LMIC Humanitarian contexts?'

Inclusion criteria	Exclusion criteria
<ul style="list-style-type: none"> Literature reporting individual palliative care needs for patient and/or family which have the capacity to benefit from palliative care as reported by themselves, their relatives, or a health professional. Literature relating to serious and/or chronic health conditions, diseases, and injuries, which demonstrate palliative care needs. January 2012-October 2022 Language: English and Arabic Population: adults and children with serious and/or chronic health conditions which have the capacity to benefit from palliative care as reported by themselves, their relatives or a health professional and/or their families Literature from any LMIC Humanitarian setting (including, but not limited to, public health emergency, acute refugee context (including refugee and forced migration), acute (ongoing) conflict, protracted refugee context, natural disaster and internally displaced people. 	<ul style="list-style-type: none"> Studies/literature relating solely to palliative care in high-income country humanitarian contexts. Literature relating to palliative care in LMIC settings which are not classified as humanitarian settings (as identified in inclusion criteria). Literature in languages other than English and Arabic will be reported/cited but not included in data analysis due to translation issues. Papers that only include opinion – editorials and letters

Searches

The comprehensive search comprises both published research and grey literature.

Database searches: included CINAHL, Medline, Embase, Global Health, Scopus, Applied Social Science Index and Abstracts (ASSIA), Web of Science, Policy Commons, JSTOR, Library Network International Monetary Fund and World Bank, Google Advanced Search and Google Scholar, plus relevant prep-print websites.

Website searches: included Médecins Sans Frontières (MSF) International, United Nations High Commissioner for Refugees (UNHCR), World Health Organisation (WHO), Palliative Care in Humanitarian Aid Settings and Emergencies (PaCHASE) and ehospice international edition.

Contacting experts: to identify further unpublished reports/studies/data.

Data selection

The data will be reviewed at each stage by two researchers, with a third to resolve any conflicts.

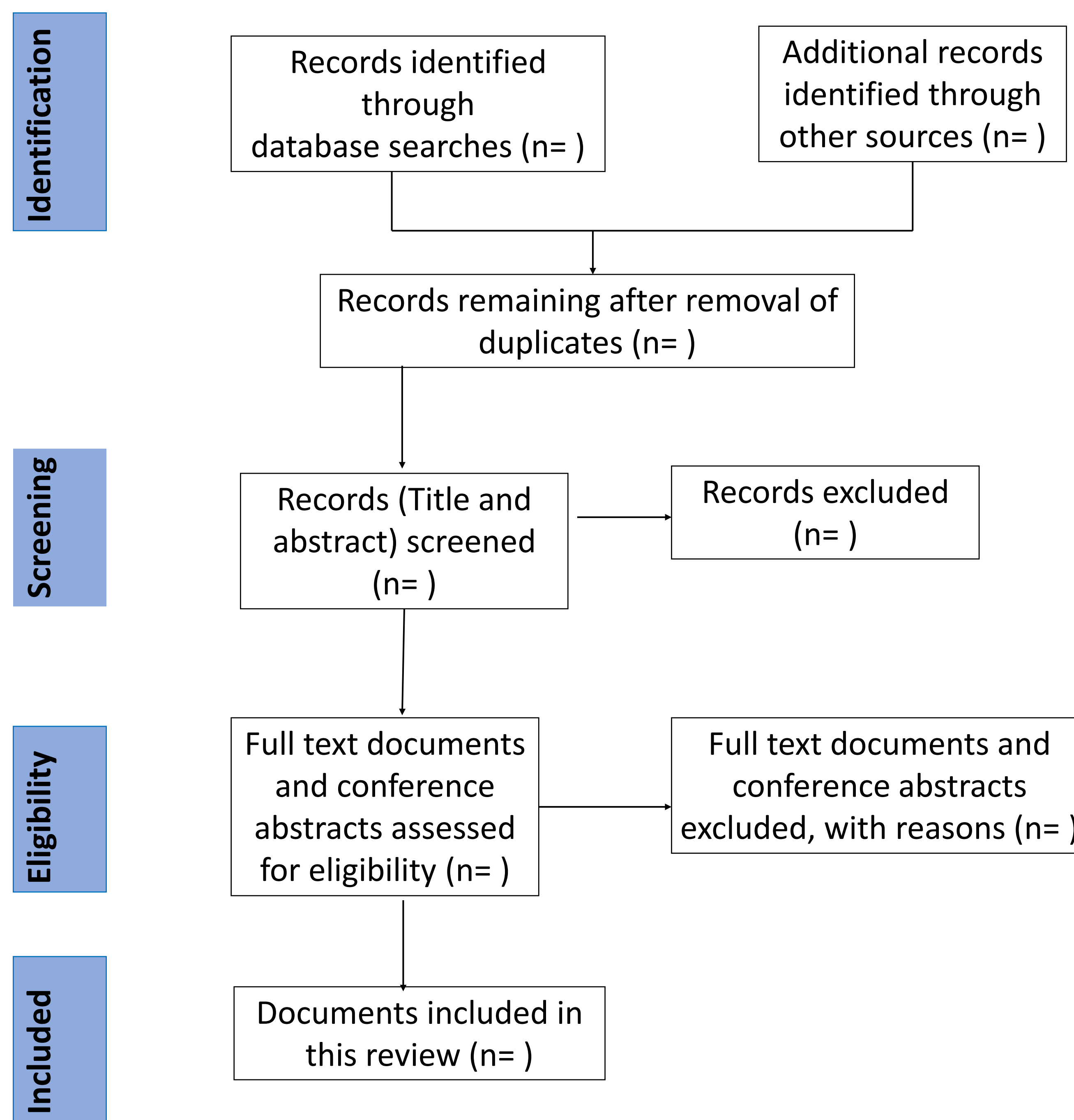


Figure One - Scoping review flow diagram, showing phases for data extraction and selection (Adapted PRISMA ScR reporting flow diagram⁶)

Results

- Findings will be presented in tables and diagrams/charts⁷.
- A narrative description will follow the tables and charts, to describe how the results relate to the research question(s)⁷.
- The review is currently underway.

Discussion

- This format aims to ensure a broad scope is undertaken, enabling the inclusion of literature from disparate sources.
- The review will contribute to the rapidly growing body of knowledge and highlight research gaps.
- The findings will be submitted for publication.
- Research ethics approval is not required for this scoping review.

Potential limitations

- Inclusion of conference abstracts and posters - justified due to the limited full-text peer-reviewed research in this area.
- Literature may be unintentionally omitted as patient and family palliative care needs in humanitarian contexts may be difficult to identify from article titles and abstracts; a broad search strategy will reduce this risk.

Conclusion

- This is the first systematic scoping review to specifically explore the palliative care needs of the patient and/or their family, in LMIC humanitarian settings.
- This review will form part of a wider research project, exploring palliative care learning needs of humanitarian health workers and will contribute to the rapidly growing body of knowledge in this area.

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