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# PALLIATIVE CARE SERVICES IN NORTHERN CYPRUS -AWARENESS RESEARCH

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#### Abstract

Palliative care services have not been developed in Northern Cyprus despite the increased incidence of cancer cases in recent years. The aim of this study is to measure the level of knowledge of the people living in country on palliative care services by conducting an awareness research. People who reside in Northern Cyprus have been surveyed via internet. The questionnaire included 10 questions about the palliative care services as well as the demographic information. Of the 150 participants who completed the questionnaire: 39% of the respondents stated that they did not know what palliative care is, and 69% stated that they did not know whether there is a palliative care center. 34% of the participants do not have any idea about the need for this service. These results emphasize that there is lack of palliative care services around country and that awareness should be raised. Increasing life-span in chronic diseases as well as in cancer cases increases the importance of palliative care together with developments in medicine. It is inevitable to create teams / centers working on this issue by adhering to sociocultural, economic and legal procedures.

Keywords: Palliative care, Society, Awareness

#### INTRODUCTION

The World Health Organization describes palliative care as an approach that "improves the quality of life of patients and families who face life problems through early identification, evaluation, prevention and mitigation of physical, psychological, mental pain and other problems". Although palliative care is a new component of modern health services, it is increasingly recognized as an essential part of all health systems. Despite the increase in the elderly population living in severe conditions or dying worldwide, access to hospice and palliative care is still inadequate (World Health Organization, 2018).

Millions of people around the world are affected by life-threatening diseases, such as HIV / AIDS and cancer, creating great pain and economic hardship for them and their families (Sepúlveda, Marlin, et al., 2002). Palliative care requires the collaboration of global societies not only in this case, but also to help prevent early morbidity from infectious and noncommunicable diseases. The majority of the need for palliative care is associated with noncommunicable diseases (Gwyther, & Krakauer, 2011).

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Nearly 20 million people, 6% of whom are children, need vital palliative care every year. These are low-level estimates because approximately 20 million more people require palliative care in the years before death. Because there is an unmet need, the numbers are huge and only a few countries are implementing neutral palliative care programs with a public health approach. Moreover, opioid analgesics are not available or inaccessible for patients suffering from severe to moderate pain in many countries (Alliance, & World Health Organization, 2014).

Worldwide, palliative care is divided into four groups. Group 1: countries without hospice or palliative care activities; Group 2: countries where hospice or palliative care activities have not been performed and are not yet sufficient; 'Group 3a: countries with palliative care activity but not supported; Group 3b: countries where palliative care activities are supported by local/regional activities like Turkey; Group 4a: countries where hospice or palliative care activities are in the process of being widely integrated into the health system; Group 4b: are cited as countries here hospice or palliative care activities are widely integrated into the health system. In 2006, 115 out of 234 countries (49%) had one or more hospice or palliative care services (Lynch, Connor, & Clark, 2013). In 2011, palliative care services were established in more 21 countries. In 2010, Turkey's a total of 10 (7 University Hospital, 2 Ministry of Health, 1 private center) palliative care center were found (Özgül, Olcayto & Tuncer, 2010). In 2016, 194 palliative care units with 2194 beds were established in 72 provinces and rapid development was observed in Turkey (TC Sağlık Bakanlığı., 2017).

Today, in many countries, different palliative care models are seen at different levels. It is unclear how much palliative care services can be defined in Northern Cyprus. The aim of this study is to measure the level of knowledge of the people about palliative care and related services in Northern Cyprus.

## **Materials And Methods**

A questionnaire was administered to the residents of Northern Cyprus via the internet. The survey was created with SurveyMonkey®, a smartphone application. 'SurveyMonkey® is an online survey portal. This portal allows the researcher to create online questionnaires that the researcher can ask for answers to be shared with many people online.

The questionnaire, which consists of 10 questions that we used in our study and which we created for our purpose, was published through this portal. The questionnaire includes questions about palliative care as well as demographic information (Table 1 and 2). For the online shared questionnaire, no extra information was given to the individuals, and they were asked to answer the shared questionnaire only.

## Results

The survey was shared with a total of 286 people. 151 people completed the survey. Descriptive characteristics of the participants are shown in Table 1

**Table1.** Descriptive Characteristics

	n	%	
1.Age			
18-42	129	87	
42>	22	13	
2.Education level			
High school	30	20	
Undergraduate/gradute	121	80	
3.City			
Lefkoşa	71	48	
Girne	12	7,95	
Mağusa	11	7,29	
İskele	7	4,64	
Güzelyurt	13	8,61	
Lefke	37	25	

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.Work Area		
Health sector	39	26
Education sector	29	19
Construction, Real estate	8	5,47
Tourism	13	8,94
University Student	9	6,03
Retired	12	7,56
Other	41	27

79 (52.31%) of the participants answered the question 'What is palliative care?' correctly. 72 people (47.68%) answered the question 'Where can palliative care be given?' as 'All (Hospital, Nursing Home, Home)'. 78 (51.66%) of the participants answered 'All' to the question 'Who is in the palliative care team'. 75 people (50%) answered 'All' to the question 'Which conditions might require palliative care?' . 49 of the participants (32.45%) answered 'Which diseases can require palliative care?' as 'Cancer cases'. 103 participants (68.85%) answered the question 'Is there a palliative care center in Northern Cyprus?' as 'I do not know'.

The survey results of the participants are shown in Table 2.

**Tablo 2.** Survey results

Tubio 2. But vey results		
5. What is 'Palliative care'?	n	%
a. It is the approach of treating the problems in the home environment by working	11	7,25
as a team in case of problems arising from life-threatening disease.		
b. Identifying the problems arising from life-threatening disease; It is an	79	52,31
approach that aims to improve the quality of life and to prevent and alleviate pain		
through meeting physical, psychosocial and spiritual needs.		
c. It is more a drug-based treatment approach to prevent problems related to any	4	2,65
disease, suffering and decreasing the quality of life.		,
d. It is a treatment approach with the help of a team of specialist physicians for	5	3,31
the treatment of secondary complications related to any disease.		,
e. None	52	34,48
f. I do not know	0	0
6. Where can palliative care be given?		
a. At hospital	17	11,26
b. in a nursing home	11	7,29
c. At home	10	6,62
d. All	72	47,68
e. I do not know	41	27,15
7. Who is in the Palliative Care Team?		
a. Doctor	10	6,62
b. Nurse	0	0
c. Physiotherapist	14	9,27
d. Psychologist	14	9,27
	70	51,66
e. All	78	31,00

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2	3,08 2,31 5,38
5	5,38
5	5,38
5	50
3	39,23
3	32,45
	5,23
	2,58
	3,25
5	5,30
	21,19
_	7,38
./	23,77
	1 1 1 5 2

#### Discussion

As a result of the literature review, we did not find any studies that previously investigated the awareness of palliative care in Northern Cyprus. In recent years, the change in the social structure of the society, the increase in the proportion of dependent elderly population increases the need for organized centers. In parallel with the developments in the field of medicine, the chronic process of diseases and consequently the increase in the burden of intensive care increases the importance of palliative care.

Studies have shown that palliative care can improve quality of life not only in oncologic patients, but also in patients and their families who experience problems associated with symptomatic heart failure. These patients do not respond to treatment by alleviating and preventing pain by recognizing and treating physical and psychological symptoms early in cardiovascular failure or by paying attention to social and spiritual needs (Mert & Barutcuç, 2012). Palliative care has been proven in the literature in pediatric patients with cardiovascular failure and untreated cancer and chronic obstructive pulmonary disease as well (Connor, Downing, & Marston, 2017; Mulkerns et al., 2017)

In 2007, a non-governmental organization named as "Kemal Saraçoğlu Children with Leukemia and Cancer Control Foundation" and Northern Cyprus Ministry of Health signed a protocol to establish "Palliative Care Services". The aim of the Foundation was to provide country with the modern service, which is needed in medical, psychological and social terms, including providing all kinds of support without waiting for provision. With this project, a service team was established for oncology patients (doctor, nurse, psychologist), but both the volunteer team could not be enlarged and our people were not aware of this service (KKTC Sağlık Bakanlığı, 2017).

Kahveci and Gökçınar in 2014, conducted a study in Turkey about patients and families who needs palliative care and results showed that 68% of the family have knowledge about palliative care. In our study, 39% of the participants did not know what palliative care was, and 69% stated that they did not know if there is a palliative care center in the country. The lack of awareness of even those who need this service creates a serious obstacle to access to the service (Kahveci, & Gökçınar., 2014).

Carlos et al. (2017) 53 investigated the integrated levels of palliative care in European countries. A total of 48 European countries responded. As a result, they identified the main barriers to the



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integration of palliative care into the health system. These are: (1) the lack of basic training that places special emphasis on palliative care at the undergraduate level; (2) the lack of officially certified training for professionals; (3) lack of coordination / continuity between service users and providers; (4) absence of palliative care integration in non-cancer cases; (5) the absence of palliative care services in the regulatory frameworks / laws of countries; (6) there are unequal laws and regulations concerning palliative care within the country (Centeno et al., 2017).

These results emphasize the lack of palliative care services in Northern Cyprus and raise awareness on this issue. It is inevitable to create teams / centers working on this subject by adhering to sociocultural, economic situation and legal procedures. Knowing the palliative care models in developed countries and integrating these models into our health care system will provide important support to the quality of life of the patients and facilitate the work of the health care team. The development of these services will help to make the public more aware.

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