

Review Article

Palliative Care Research in a Developing Country: A Scoping Review

Alexander Lloyd Sy Ng¹, Elaine Louise Lavilles Fernandez²

¹Department of Pediatrics, Ospital ng Makati, ²Department of Internal Medicine, Makati Medical Center, Makati City, Philippines.

ABSTRACT

Among the many barriers to universal access to palliative care is the lack of research. This is most prominent in low-to-middle-income countries such as the Philippines. The objective of this study is to examine the literature undertaken in the Philippines regarding palliative care and identify the characteristics of the studies and gaps in the literature. A scoping review methodology was utilised to identify and examine publications regarding palliative care in the Philippines from January 1994 to November 2024. Data were charted with respect to year of publication, research methodologies used, study population demographics, area of palliative care focused on and author characteristics. This review identified 46 publications in the Philippines regarding palliative care. Approximately 32% of the studies were cross-sectional studies involving questionnaires, while the rest were literature reviews, editorials and retrospective analyses. Half of the identified studies were conducted in collaboration with authors from other countries. The majority of the Filipino authors were affiliated with institutions in the National Capital Region where training programs are held. Most of the studies focused on the domains of pain management and end-of-life care. Eighty-eight percent of the publications were about adult patients. This study identified factors that could empower research development as well as barriers that hinder the growth of palliative care in the Philippines. This highlights the impact of global initiatives on the progress of the country in terms of palliative care. The data show the positive impact of established training programs and the development of standardised tools for assessing quality of life in the production of research and delivery of palliative care services. This study also identified gaps in knowledge, especially regarding the holistic role of palliative care.

Keywords: Palliative care, Philippines, Research output, Research publications, Scoping review

INTRODUCTION

The World Health Organization (WHO) describes palliative care as a field that aims to relieve suffering and improve the quality of life of patients and families dealing with any type of life-threatening illness.^[1] Although it has been established as part of essential care, palliative care is still inaccessible to many patients. Annually, approximately 56.8 million people require palliative care, but only approximately 14% receive it.^[2] This is expected to be worse in low-to-middle-income countries (LMICs) such as the Philippines. The palliative care workforce, out-of-pocket costs and low opioid availability are the main factors hindering palliative care in the country.^[3] Among the many efforts to reduce this gap is research. A collaborative study regarding the implementation of paediatric palliative care programs highlighted the lack of research capacity in terms of palliative care in LMICs.^[4] This poses a significant barrier to improving palliative care delivery in the country. This study conducted a scoping review to answer the

following questions:

1. How many Filipino research papers regarding palliative care were published between January 1994 and November 2024?
2. What research methodologies were utilised?
3. What are the common factors among published papers?
4. What domains of palliative care were focused on by the research publications?
5. What are the gaps in the current status of research output in the Philippines?

MATERIALS AND METHODS

The authors conducted a scoping review using the methodology proposed by Khalil *et al.*^[5] and following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses guidelines.

Inclusion criteria (must fulfil both)

- All research papers with publication status of 'published' and are available to the public between January 1994 and

*Corresponding author: Alexander Lloyd Sy Ng, Department of Pediatrics, Ospital ng Makati, Makati City, Philippines. alexanderlloydng@gmail.com

Received: 26 November 2024 Accepted: 20 April 2025 Epub Ahead of Print: 11 June 2025 Published: XXXXXX DOI: 10.25259/IJPC_337_2024

This is an open-access article distributed under the terms of the Creative Commons Attribution-Non Commercial-Share Alike 4.0 License, which allows others to remix, transform, and build upon the work non-commercially, as long as the author is credited and the new creations are licensed under the identical terms.

©2025 Published by Scientific Scholar on behalf of Indian Journal of Palliative Care

November 2024

- All publications focused on palliative care as the main topic
- Publications written in English or Filipino
- At least one author is affiliated with any of the institutions in the Philippines.

Exclusion criteria

- Publications not in English or Filipino
- Studies focused on other subspecialties instead of palliative care.

Search strategy

A three-step strategy was utilised to exhaust all sources of publications related to palliative care in the Philippines. First, a systematic review specialist developed the search terms and strategy. Second, a string search was used to identify publications from the following databases: MEDLINE (PubMed), Embase, EBSCO and CABI. Acta Medica, a local database, was also included. The search strategy can be found in Appendix I. Last, hand-searching bibliographies were also performed.

Study selection

The identified publications were screened for duplicates. To reduce the risk of bias in the study, inclusion reviewers were instructed to adhere to a well-defined set of inclusion and exclusion criteria. To further reduce the risk, dual review was employed on all of the publications identified. Two reviewers screened the titles and abstracts of the articles independently. Studies were classified into 'included', 'excluded' and 'maybe'. All studies identified under 'Maybe' were subjected to evaluation by both reviewers through the full text. All studies classified under 'included' also underwent full-text review.

Data collection

A Google Form was used to manually extract the following data:

- Title
- Institution in the Philippines the author(s) is affiliated with
- Year of publication
- Article type
- The presence or absence of collaboration with other countries
- Study population demographics
- Domains of competency in palliative care focused on
- Study objectives and findings.

A formal risk of bias assessment was not performed due to the descriptive nature of the included publications.

RESULTS

The utilised search strategy identified 289 records. A manual search of the bibliographies identified 11 records. All

identified records were screened by two reviewers at the title/abstract level. After screening and removing duplicates, 66 articles remained. These articles were assessed for scoping review eligibility using the inclusion and exclusion criteria. Of these, 20 articles were excluded because they (1) did not focus on palliative care or (2) did not have an author affiliated with an institution in the Philippines. The selection process is summarised in Figure 1.

Number of Philippine palliative care publications

The review identified 46 Philippine palliative care research published between January 1994 and November 2024. The 40 publications in the past decade (2015–2024) were significantly greater than the nine publications from the previous two decades (1994–2014). This signifies an increasing publishing trend in the field. Figure 2 shows the increasing trend.

Article types

Approximately 32% of the records identified were cross-sectional studies involving surveys and questionnaires. Thirteen per cent were correspondences, editorials or opinion pieces. Another 10% were literature reviews. Only 8% were retro/prospective analyses. Two articles were case series/reports. There was one clinical practice guideline released by the American Society of Clinical Oncology. There were no randomised clinical trials identified. Figure 3 shows the distribution of records according to type.

Collaboration

Among the 46 identified records, 23 (50%) were conducted in collaboration with authors from other countries. The United States of America was involved in 12 of the identified publications. This was followed by Singapore and India, with seven and six studies conducted, respectively.

Affiliated institutions

The majority of the authors were affiliated with the main training institutions in the country. The institution with the most publications is the University of the Philippines, with 13 (28%) studies published. This was followed by the Medical City, with 6 (13%) publications. Two correspondences were published from Verbum Dei, a Catholic missionary fraternity. Most authors came from the National Capital Region, accounting for 87% of the publications. The remaining 13% is distributed across other regions. Figure 4 shows the distribution of publications according to geographic location.

Study population

Only 25 out of the 46 publications identified their study population. Sixty per cent (15) of the studies were conducted among patients, whereas the remaining 40% (10) were performed among healthcare workers. Among the patients included in the studies, ten out of the 15 were

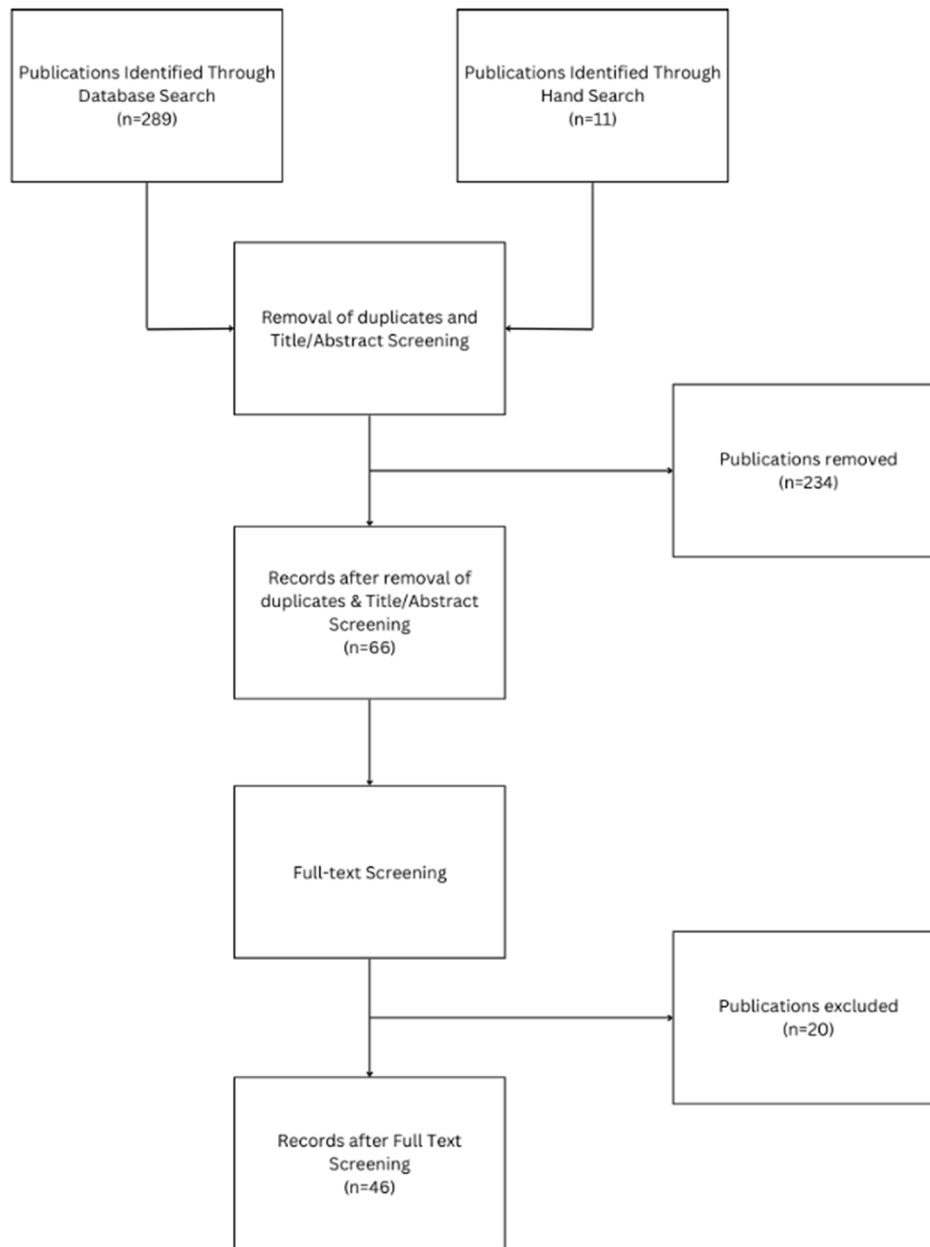


Figure 1: Study selection and screening.

cancer patients, whereas the remaining five were distributed among end-stage heart failure, parkinsonism and chronic obstructive pulmonary disease. Among the ten studies concerning healthcare workers, seven involved physicians, whereas the remaining three involved nurses. Only 17 publications specified the age group of the study population. The remainder either did not specify or had an article type in which population age was not applicable. Among the 17 studies, 15 (88%) targeted the adult population. Only two studies dealt with the paediatric age group. Both studies were systematic reviews regarding program implementation and research.

Domain of competence in palliative care

The focuses of the identified publications were classified according to the seven General Domains of Competency in Palliative Care as defined by the WHO.^[6] These are (1) principles of palliative care; (2) communication; (3) optimising comfort and quality of life; (4) advanced care planning and collaborative practice; (5) loss, grief and bereavement; (6) professional and ethical practice in the context of palliative care and (6) professional resilience. Table 1 shows the distribution of the studies. Two correspondences were not included in the analysis. Among

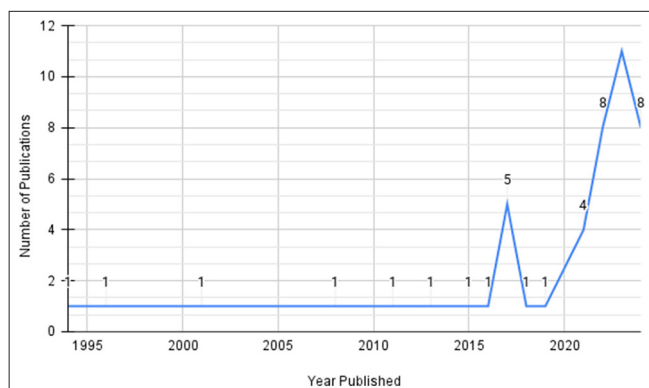


Figure 2: Philippine palliative care research publications (1994–2024).

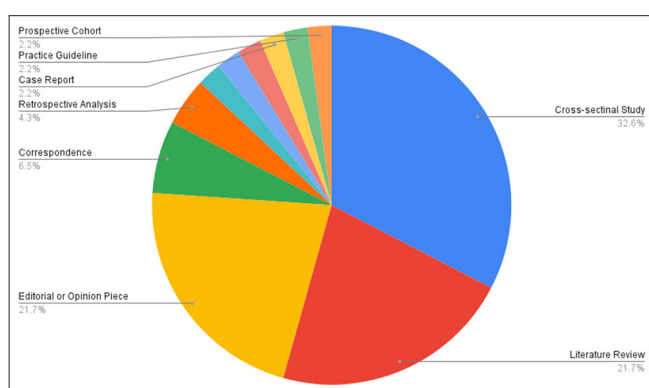


Figure 3: Distribution of publications according to research methodology.

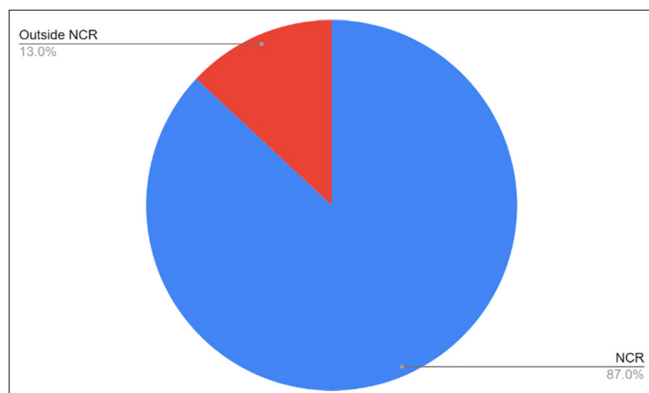


Figure 4: Distribution of publications according to geographic location.

the 44 publications, 10 (22.7%) focused on optimising comfort, specifically pain management. Eight (18%) studies dealt with advanced care planning and end-of-life care. Seven (15%) discussed the ethical aspects of advanced care planning, withdrawal of treatment and end-of-life decision-making. Fifteen publications did not focus on a specific domain or address implementation and policy. There were

Table 1: Distribution of publication according to the domain of competency in palliative care.

Domain	(n=44)	%
Optimizing comfort and quality of life	10	22.72
Care planning and collaborative practice	8	18.18
Professional and ethical practice in the context of palliative care	7	15.90
Principles of palliative care	3	6.81
Communication	1	2.27
Loss, grief and bereavement	0	0
Professional resilience	0	0
No specific domain	15	34.09

no publications about the domains of professional resilience and bereavement.

DISCUSSION

This review revealed an increasing publication trend in terms of Palliative Care in the Philippines. The increasing number of publications may correlate with the establishment of training programs for palliative care in the country. Training programs abroad also opened up to Filipinos, further contributing to this progress. This trend may also be due to the first global resolution of palliative care by the World Health Assembly, which was released in 2014. The resolution calls on the member states to improve access to palliative care, leading to increased awareness. This trend is similar to that reported in reviews in Australia^[7] and Malawi.^[8] However, the magnitude of the increase in the trend is significantly smaller. Compared with global research, progress in Philippine research is still severely lacking. The majority of the studies utilised surveys and questionnaires. This is most likely related to the more qualitative nature of palliative services. This finding highlights the importance of standardised and validated questionnaires. The Tagalog version of the Functional Assessment of Chronic Illness Therapy-Palliative-14 is a good example of a quality of life measuring tool that was successfully translated into the Filipino language. A study by Bagcivan *et al.* emphasised that adequate measurement of quality of life is essential for evaluating illness effects and the impact of treatment.^[9] Since the main goal of palliative care is to improve quality of life, the need for proper tools and questionnaires for measurement should be addressed. One of the publications reviewed in this study dealt with the reliability of a validated questionnaire translated into the local language.

Another finding of this review is that a significant portion of the publications were published in collaboration with other countries. This could be due to the initiatives of higher income countries to make palliative care universally accessible. This may also correlate with the availability of

research grants in other countries. A study performed by Alotaibi revealed that one of the most common barriers to research publication is the lack of financial support.^[10] Collaboration with a country with more access to research grants allows Filipinos to produce more publications.

The majority of publications identified came from academic or training institutions. This reflects the role of having formal training programs for palliative care in promoting research publications. Among the institutions identified, the University of the Philippines had the most papers produced. This institution is one of the main hospitals in the country and has a fellowship program for palliative care. Another finding was the unequal geographical distribution of the publications. Most of the publications were from the National Capital Region. This reflects the impact of training programs since the majority of the established training institutions are in this region.

An analysis of the study population revealed that knowledge regarding Palliative Care in the Philippines is still mostly limited to cancer patients. In addition, most studies have focused primarily on pain management and advanced care planning. These findings correlate with the findings from the study of Hidalgo-Andrade *et al.*, which highlighted the lack of knowledge regarding palliative care.^[11] The study revealed that most have a misconception that palliative care should be given only when a cure is no longer possible and that palliative care is synonymous with pain management. None of the included publications dealt with loss, grief, bereavement or professional resilience, which highlights the gap in knowledge in the holistic services of palliative care. Only two studies focused on the paediatric age group. This correlates with the current status of the training programs in the country. At present, the Philippines does not have a formal fellowship training program for paediatric palliative care.

A limitation of this review is that it does not include papers that were not published. Most of the research outputs in the country are not published due to the lack of funding and misaligned goals regarding research output. The majority are conducted as a requirement for the completion of training programs; hence, publication as a goal lacks incentives. Further studies should attempt to include unpublished research outputs. This would provide data for analysing the barriers to research publications in the Philippines.

CONCLUSION

This scoping review revealed the status of Philippine publications regarding palliative care. In doing so, it highlights the impact of global initiatives on palliative care in the Philippines. Research collaborations allow LMICs to have access to resources that are only available in more developed countries. This review also emphasised the importance of developing standardised and validated tools for measuring quality of life. Bridging this gap would result in further improvement in the research output of the country as well as improvement in the delivery of palliative care services.

The distribution of publications in terms of geography and institutions highlights the importance of establishing formal training programs for palliative care in empowering research development. At present, the country does not have a fellowship program for paediatric palliative care, which is reflected in the lack of research in this age group. Finally, the data from this review further highlight the gaps in knowledge regarding the holistic role of palliative care. It identified neglected domains of palliative care, such as dealing with grief and professional resilience. There is vast potential for future research in these domains.

Ethical approval: The Institutional Review Board approval is not required.

Declaration of patient consent: Patient consent was not required as there are no patients in this study.

Financial support and sponsorship: Nil.

Conflicts of interest: There are no conflicts of interest.

Use of artificial intelligence (AI)-assisted technology for manuscript preparation: The authors confirm that there was no use of artificial intelligence (AI)-assisted technology for assisting in the writing or editing of the manuscript and no images were manipulated using AI.

REFERENCES

1. Palliative Care: The Essential Facts. World Health Organization; (n.d.-a). Available from: [https://cdn.who.int/media/docs/default/source/integrated/health/services/\(ihs\)/palliative-care/palliative-care-essential-facts.pdf?sfvrsn=c5fed6dc_1](https://cdn.who.int/media/docs/default/source/integrated/health/services/(ihs)/palliative-care/palliative-care-essential-facts.pdf?sfvrsn=c5fed6dc_1) [Last accessed on 2024 Nov 19].
2. World Health Organization. Palliative Care. World Health Organization; (n.d.-b). Available from: <https://www.who.int/news-room/fact-sheets/detail/palliative-care> [Last accessed on 2024 Nov 19].
3. Ho FD, De Luna DV, Cubarrubias DL, Ong EP, Abello RM, Ansay MF, *et al.* Palliative and Supportive Care in the Philippines: Systems, Barriers, and Steps Forward. *J Palliat Care* 2023;39:87-91.
4. Kenneson SA, Hughes-Visentin A, Wrigley J, Gujral P, Lodhi S, Phadke S, *et al.* Pediatric Palliative Care Program Implementation in LMICs: A Systematic Review Using SWOT Analysis. *J Pain Symptom Manage* 2023;66:338-50.e11.
5. Khalil H, Peters M, Godfrey CM, McInerney P, Soares CB, Parker D. An Evidence-Based Approach to Scoping Reviews. *Worldviews Evid Based Nurs* 2016;13:118-23.
6. World Health Organization. Integrating Palliative Care and Symptom Relief into Paediatrics: A WHO Guide for Health Care Planners, Implementers and Managers. Geneva: World Health Organization; 2018. p.41.
7. Khalil H, Downie A, Ristevski E. Mapping Palliative and end of Care Research in Australia (2000-2018). *Palliat Support Care* 2020;18:713-21.
8. Palumbo N, Tilly A, Namisango E, Ntizimira C, Thambo L, Chikasema M, *et al.* Palliative Care in Malawi: A Scoping Review. *BMC Palliat Care* 2023;22:146.
9. Bagcivan G, Bredle J, Bakitas M, Guciz Dogan B. Reliability and Validity of the Turkish Version of the Facit-Pal Quality of Life Instrument. *J Pain Symptom Manage* 2019;58:297-305.e4.
10. Alotaibi K. Barriers to Conducting and Publishing Research among Nursing Faculty Members at Shaqra University, Saudi Arabia: A Qualitative Study. *Nurs Open* 2023;10:7048-57.
11. Hidalgo-Andrade P, Mascialino G, Miño D, Mendoza M, Marcillo AB. Knowledge of Palliative Care in Ecuador. *Int J Environ Res Public Health* 2021;18:4840.

How to cite this article: Ng AS, Fernandez EL. Palliative Care Research in the Philippines: A Scoping Review. *Indian J Palliat Care*. doi: 10.25259/IJPC_337_2024

APPENDIX

Appendix I: Search strategy.	
1	'Palliative Care' [Mesh] OR 'Hospice and Palliative Care' [Mesh] OR 'Hospice' [Mesh] OR 'Palliative Medicine' [Mesh] OR 'Terminal Care' [Mesh] OR Terminally Ill' [Mesh] OR terminal*[tiab] OR 'end of life' [tiab] OR 'EOL' [tiab] OR 'end stage'*[tiab] OR bereavement*[tiab] OR respite*[tiab]
2	Philippines[Affiliation]
3	#1 AND #2