Rwanda is exploring ways to strengthen community-based palliative care for people living with serious and chronic illnesses, as health authorities and partners assess how more patients can receive pain management and other support closer to home.

The Rwanda Biomedical Centre (RBC) is working with the University of Global Health Equity (UGHE) and EMMS International on the effort, which focuses on a model that allows patients to receive palliative care in their communities rather than relying mainly on hospitals.

The initiative was discussed during a training for journalists from the Rwanda Journalists Association for Health and Development (JAHD-Rwanda), where health experts explained palliative care and the role of the media in helping the public understand the service.

Dr. François Uwinkindi, head of RBC's noncommunicable diseases division, said palliative care goes beyond treating a patient's illness and considers the person's overall wellbeing.

Dr. François Uwinkindi, head of RBC's noncommunicable diseases division

It addresses physical pain and other symptoms, as well as psychological and emotional wellbeing, social relationships and spiritual needs.

Community-based palliative care allows patients to receive support closer to where they live, while families can take a greater role in their day-to-day care.

The approach is not limited to cancer. The World Health Organization says palliative care may be needed by people living with cardiovascular disease, cancer, chronic respiratory disease, diabetes, kidney disease, neurological conditions and other serious illnesses. Globally, about 56.8 million people need palliative care each year, but only about 14% receive it.

Rwanda has been developing palliative care for more than a decade through hospitals, health centers and home-based services. Community health workers have also been involved in identifying patients who need support and linking them with health facilities.

The effort builds on Rwanda's earlier experience. The Ministry of Health's 2024-25

noncommunicable diseases report says RBC, EMMS International, UGHE, ACREOL Global and other palliative-care partners met on Feb. 17, 2025, to discuss how a new Scottish government-funded community-based palliative-care initiative could best serve the Rwandan community. From June 25-27, an awareness activity in Nyarugenge focused on home-based palliative care, with officials and community members discussing pain management and psychosocial support for patients with life-limiting conditions.

The same report recorded 1,747 patients receiving palliative care during the 2024-25 financial year. Of those, 1,300 had severe pain and 1,282 received morphine.

The approach is also gaining ground elsewhere in East Africa. Rwanda, Kenya, Uganda and Zambia have previously taken part in efforts to strengthen palliative care through public health facilities and community services.

Across Africa, demand for palliative care continues to outpace available services. The African Palliative Care Association estimates that about 17.5 million people across 50 African countries need palliative care each year, highlighting continued gaps in access to services and essential medicines.

But expanding care in communities will require more than trained health workers. Reliable access to pain medicines, clear referral systems, financing and support for family caregivers will be important if patients are to receive consistent care at home.

Rwandan journalists undergoing a training on healthcare

Health officials and partners also see journalists as part of the effort. Better reporting, they say, can help challenge the perception that palliative care is only for cancer patients or people nearing the end of life.

The aim is to help patients manage pain and other symptoms at home while giving families the support they need to care for them.