

# The Palliative Care Community in Uganda Mourns The Death of the Pioneering Champion, DR. ANNE MERRIMAN

Kampala, Uganda - Tuesday 20th May, 2025



The Palliative Care Association of Uganda (PCAU), together with the broader palliative care community in Uganda and globally mourns the passing of Dr. Anne Merriman, a visionary physician, advocate, and compassionate leader. Her pioneering work laid the foundation for modern but culturally appropriate palliative care in Africa. She passed away peacefully at her home on *Sunday May 18, 2025* a few days after celebrating her 90th birthday.

Dr. Merriman, affectionately known as the "grandmother of palliative care" in Uganda, dedicated her life to delivering compassionate healthcare and building sustainable systems to serve patients facing life-threatening illnesses, especially cancer and HIV/AIDS. Dr. Merriman, a British-born physician, founded Hospice Africa Uganda (HAU) in **1993** which has since provided care to over **35,000 patients** and become a regional center of excellence for training palliative care professionals.

Together with other likeminded people, she **founded PCAU in 1999** and has been a beneficial owner of the same. PCAU is the National Association for all palliative care providers and well-wishers in Uganda composed of **30 Member Organizations and over 1600 individuals.** PCAU works closely with the Ministry of Health to integrate palliative care in Uganda's health care system through capacity building, advocacy, research and resource mobilization.

She also was a founding member of the African Palliative Care Association in 2004, a regional body for palliative care in Africa that plays a central role in coordinating and advocating for the integration of palliative care into health systems across the continent.

Dr. Merriman's vision was not merely clinical care, it was deeply human, to relieve the pain and suffering of patients with life-limiting illnesses who were too often left without care or dignity at the end of life. She embodied the ethos of hospitality, compassion and care for one another. Her life and work echoed the African philosophy of Ubuntu, *"I am because we are"* through her belief in the dignity of every person and the communal responsibility to care for one another. In every patient she saw a mother, a father, a sister, a brother and often said, "Ubuntu means treating our patients as our guests, whole persons, and not as their illness".

## Dr. Anne Merriman's Legacy Aligned with the World Health Organization Conceptual Model of Palliative Care Development.

### **Empowering People and Communities:**

From inception, Dr. Merriman's work was community rooted, and she advocated to have empowered patients, families, and communities as well as promoting involvement of community-based volunteers. She promoted home-based palliative care and other modes of palliative care service provision like roadside clinics and engaged different people to ensure that the palliative care services could reach the most rural and underserved populations. At the time of her passing, there are 13 hospices and home care programs spread across the country. Yet, despite this progress, only 11% of the population in Uganda has access to these services. Her legacy is an urgent reminder that the work she began must be carried forward.

### Health Policies, Standards and Guidelines:

Dr. Merriman was instrumental in advocating for palliative care to be integrated into the national health structures and not as a parallel health service. She emphasized the critical role of nurses as the backbone of the palliative care delivery. Together with other stakeholders, she advocated to ensure that the right caliber of people are trained, recruited and retained in hospitals and health care institutions. Currently, there are Positions for palliative care providers at major institutions like the Uganda Cancer Institute, Uganda Heart Institute, Mulago National Specialized Hospital, and at Health Centre III and IV levels. This integration has ensured that palliative care is a recognized and essential component of the national healthcare system however only a few positions have been filled due to limited public sector funding and competing health priorities. The Ministry of Health working with the Palliative Care Association of Uganda and other stakeholders are drafting a National Palliative Care Policy that will guide the framework for palliative care service delivery. There is need for continued support from the government, and developmental partners in Uganda and globally to promote this work.

### **Research and Information:**

Dr, Merriman valued evidence informed practice as foundational to advancing palliative care. She has authored 2 books and has contributed to many academic publications. With her leadership, several palliative care organizations in Uganda and beyond have contributed to research and evidence-based practice, advancing palliative care knowledge and innovation. Presently, some palliative care data is being collected through the District Health Information System 2 (DHIS2) however, significant research gaps causing limited locally generated data occur. There is a pressing need for increased investment in research infrastructure, collaboration between academic institutions and service providers.

### **Capacity Building, Education and Training:**

Dr. Merriman recognized that sustainable and quality palliative care could only be achieved through a well-trained interdisciplinary workforce. She founded the Institute of Hospice and Palliative Care in Africa (IHPCA) affiliated to Makerere University and it is a continental center of excellence for palliative care education. IHPCA offers certificate, diploma, bachelor's, and master's degree programs that are tailored to the African context. These programs target a wide spectrum of professionals including doctors, nurses, pharmacists, social workers, clinical officers, and community health workers. Hundreds of healthcare and allied professionals from over 37 African countries have been trained. Palliative care in incorporated in all medical curricula in Uganda with other institutions like Mulago School of Nursing and Midwifery teaching the Advanced Diploma in Palliative Care Nursing and Mildmay Institute of Health Sciences training Health workers in Pediatric Palliative Care. Despite these milestones the knowledge gaps remain and many healthcare workers in Uganda lack basic training in palliative care. There is a need for increased integration of palliative care into pre-service training curricula, national Continuous Medical Education programs, scholarships for specialist palliative care programs and professional licensure requirements.

### A champion to Pain Control:

Dr. Merriman was an advocate for pain relief as a fundamental human right. "You can not holistically assess a person's pain without first controlling their physical pain" said Dr. Merriman. She was a strong advocate for availability of essential palliative care medicines and pioneered the use and local manufacture of affordable oral liquid morphine in Uganda making it accessible and available to thousands. This model has been replicated in many African countries. She was instrumental in regulatory reforms that would allow broader access to pain relief. She advocated for to have specially trained Nurses and Clinical Officers to prescribe oral liquid morphine through the Statutory Instrument No. 24 of 2004, titled The National Drug Authority (Prescription and Supply of Certain Narcotic Analgesic Drugs) Regulations, 2004. To date over 232 hospitals and health facilities across 107 districts in Uganda have been accredited to order and stock oral liquid morphine. Despite these achievements, many facilities still lack trained prescribers and consistent supply chains. There is a need for continued investment in training, procurement and budget allocation for essential palliative care medicines and medical devices.

### Provision of Palliative Care as an Integrated Service and Working together for the Common Good:

Dr. Merriman's vision was that palliative care should not be vertical service, but an integral part of every health system. She appealed to working together not only among organizations but also among individuals. She was key in strengthening partnerships between government and private and never wanted institutions to compete but to work together for the common good.

*"Working together strengthens our efforts"* she always said. She usually quoted an African adage that says, *"If you want to go fast, go alone and if you want to far, go together".* Palliative Care is interdisciplinary that requires joint efforts and contributions from all members of the team as each brings a special skill set.

### In her contribution to different organizations:

Dr. Merriman was recognized for her work and awarded by PCAU in *2019* for her exemplary leadership in Palliative Care. She also received numerous international accolades, including being named a Nobel Peace Prize nominee in 2014, and was awarded the Order of the British Empire (OBE) in *2003* for her services to health in Africa.

Her life's work resonates with the spirit of equity, compassion, and human dignity. She demonstrated that pain relief is not a luxury, but a human right. As we celebrate her life and mourn her passing, the Palliative Care Association of Uganda commits to work with all its members, stakeholders and the government to carry forward Dr. Merriman's vision and her Legacy.

We call upon the government, healthcare providers, partners, and the global health community and the public to honour her legacy and support hospice and palliative care work. Her death has come at a time when funding for palliative care in Uganda is lean and some hospices and palliative care organizations have reduced their operations. In her own words, *"We may not be able to add days to life, but we can add life to the days."* 

May her soul rest in eternal peace, and may her spirit continue to inspire our collective efforts to ensure no one suffers needlessly in pain.

To know more about PCAU Contact:

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