

Berita Hospis



A Social Commentary on Palliative Care in Malaysia

Palliative care supports society's most vulnerable - those whose lives are profoundly altered by serious illnesses like cancer, heart disease, Parkinson's, or dementia. These individuals and their families often face shattered expectations and must regularly interact with healthcare providers, who may not always bring positive news.

Policymakers often equate vulnerability with poverty (the B40 group), as limited funds restrict access when resources are abundant. However, in times of scarcity, even wealth cannot guarantee appropriate care.

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LATEST HIGHLIGHTS



A New Look

Advancing care, training, and awareness nationwide as Malaysia's Center of Palliative Care Excellence.



Voices for Hospices Gala Dinner 2025

A Promise of Dignity, United in Care - An evening of hope, remembrance, and shared purpose.

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Hospis Malaysia at KLSCM 2025

12 years strong in Run For A Reason, with every RFAR stride championing dignity, comfort, and care.

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The "Festival"

Advancing excellence through annual clinical competency assessments.

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A Social Commentary on Palliative Care in Malaysia

Reflecting on living in Malaysia is often an exercise in experiencing attitudinal shifts, from being a perpetual optimist that things will get better or a hopeless pessimist that things are never going to improve and we just have to be grateful for the tiny morsels of resources that we have.

Palliative Care deals with amongst the most vulnerable people in our society, where illness has irrevocably altered the planned journey of the affected person and their family. What happens when a once healthy life is changed with the discovery of a life changing illness, perhaps cancer, heart disease or many other ailments. At times, the change is more gradual such as Parkinson's disease or dementia. Persons, often with shattered dreams, may now have to include healthcare workers as people that they now have to meet regularly and often. They do not always bear 'good news'.

Policy makers often equate 'vulnerable' to the poor, typically labelled the B40. That might be the case when resources are plenty. The poor have limited access due mainly to funding issues. But when resources are scarce, wealth does not guarantee access or that private services may not provide care that is appropriate, and might be worse.

The reality might well be as quoted by **Dr Sankha Mitra**: **'The poor die in agony in neglect, the middle class die in agony of ignorance and the rich die in agony on a ventilator. No one gets a dignified and pain free death'**

RISING CHALLENGES: AGEING AND NON COMMUNICABLE DISEASES

The rise of non-communicable diseases and ageing is a proverbial time bomb for the country. The modest Malaysian health expenditure of about 4% of its Gross Domestic Product (GDP) is inadequate to meet the growing health needs of the nation. The recent Lancet Commission on the Human Crisis in Cancer highlighted the growing imbalance between scientific and clinical advances and the lived experiences of people with cancer. It highlights the neglect of core practices that support psychosocial wellbeing, uphold dignity, alleviate suffering and build trust. These are all areas that are the focus of palliative care. The gap in care provision is more likely to increase rather than reduce without adequate investment, not just in monetary terms but also in human capital.

This year's theme for World Hospice and Palliative Care Day is 'Achieving the Promise: Universal Access to Palliative Care'. In October, the Minister of Health announced that Malaysia hopes to increase the number of palliative care specialists to 50 from the current 34. Malaysia has made strides in mapping a plan to develop services. Recently, Tripodoro et al published the Global Ranking of Palliative Care: 2025 world map under the new WHO framework (J Pain and Symptom Manage Nov 25), and we rank 41st globally out of 198 countries and hold a commendable 9th position in the Asia-Pacific region. There is a policy for development, and more recently, the national standards for palliative care was drafted. The challenge moving ahead will be to measure our progress in implementation, with regular assessment on its impact and effectiveness. For only when policies trickle down to benefit those it was designed to provide for, can one really say that it has been effective. Measuring outcomes will therefore be paramount.

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Some may have heard about the Golden rule which implores that you treat others as you would want to be treated but perhaps what we should really consider is the Platinum rule which is to treat others the way they want to be treated. So, in the context of palliative care, how would Malaysians needing palliative care want to be treated? Increasingly with scarce resources, implementation of health interventions should be both data driven and co-designed with the participation of the patients / families of affected communities.



With early palliative care, Mr. Thiakarajah and his family shared almost a whole meaningful year together at home where he preferred to be cared for, despite an initial prognosis of short months. His story demonstrates the impact of effective palliative care delivery where and when it is needed.

What do we really know about the suffering and needs of those requiring palliative care in Malaysia? Have they been consulted in planning policies and interventions? And when there are interventions, do they work and what is the outcome? Do some interventions merely do things for convenience or could they be task-shifting and creating further issues and burden further down the line? Effective intervention in palliative care should not simply look at measuring data such as number of people treated but should include whether their care has improved quality of life. Ultimately it should change the behaviour of the community to reach out for palliative care at a much earlier point of their illness trajectory where palliative care integration could make a more significant improvement.

As Malaysia seeks to improve its position on the global ranking in palliative care, we do need to reflect on the

lived lives of those who are truly affected, whether they are in hospitals, at home or perhaps even homeless and without caregivers. Give a thought to the marginalised communities, those incarcerated, migrant communities and those with limited rights.

Having 50 palliative care specialists in Malaysia two years from now would be an admirable achievement. But 34 million Malaysians co-designing palliative care may deliver the care they really want. There are millions more Malaysians in this country than those working in the Ministry of Health. Corporate agencies, non-government organisations, volunteer groups, faith based and other community groups and individuals that make up this country can bring about a transformative change if given the opportunity.

Perhaps a consultative plan with all relevant stakeholders may result in better outcomes for all?

USING A SUGGESTED INDICATOR HIERARCHY TO STRENGTHEN PALLIATIVE CARE IN MALAYSIA

| Indicator Hierarchy | Description |
|---------------------|------------------------------------|
| Input | Resources put into the project |
| Process | Activities/services delivered |
| Outcome | Changes in behaviour or skills |
| Impact | Change in health or disease trends |

The table above, outlining the Indicator Hierarchy with Input, Process, Outcome, and Impact, provides a useful framework for looking at how palliative care can be improved. In healthcare systems where resources are limited and needs are growing, such as palliative care in many countries, it is important to have a structured way of measuring progress.

This approach promotes planning that is both data-driven and patient-centred. It shifts the conversation away from quantitative measures, and instead asks some more relevant questions about effectiveness – outcomes for patients, and for the nation. Are these efforts really improving the lives of patients and their families? Are they changing the health trend or disease trends of the country?

Hospis Malaysia: A New Look, Same Mission, Amplified Vision



Old logo

Transition Phase



New logo

A NEW CHAPTER FOR HOSPIS MALAYSIA

Since 1991, we have provided palliative care grounded in clinical expertise and compassion. As healthcare evolves and expectations shift, we continue to listen and learn to remain effective and relevant.

After 34 years of service, Hospis Malaysia is entering a new chapter with the unveiling of our refreshed brand identity and logo at the Voices for Hospices 2025 Charity Gala Dinner. This milestone reflects constant growth and a renewed promise to ensure no one faces serious illness alone.

THE BRAND REFRESH JOURNEY

Our year-long brand refresh, shaped by insights from staff, patients, families, and partners, revealed persistent misconceptions about palliative care. Many still view it solely as end-of-life care or believe it serves only specific groups. While we continue training healthcare professionals and medical students in evidence-guided practices, there is an equally urgent need to help the public better understand the value of quality palliative care.

To address this, we are strengthening our core services and expanding our role in teaching and training. For only with good care that is backed by evidence, and practised by a wide fraternity

of practitioners, will patients and families truly experience its benefits. With this clarity, we set out to redefine how Hospis Malaysia presents itself to a broader and more diverse audience.

EVOLVING WITH PURPOSE

Our refreshed identity is more than a new logo – it reflects who we are today and who we aspire to be: a Center of Palliative Care Excellence, advancing care, training, and awareness nationwide. The new blue and grey palette symbolises

trust, hope, and the balance of expertise and compassion that guides our work.

As we move into the future, our mission remains unchanged: to provide comfort, care, and dignity to all facing serious illness. We invite our supporters and partners to continue this journey with us as we strengthen the palliative care ecosystem.

Stay tuned for the launch of our revamped website, coming soon!

Our Foundation | Three Pillars of Impact



Our mission is anchored by these core pillars



Education & Training

Equipping healthcare professionals and students with essential palliative care knowledge and skills.



Patient Services

Providing home and community-based palliative care.



Public Advocacy

Building awareness of palliative care's vital role in improving quality of life.

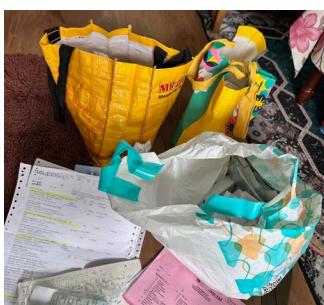
Improving Medication Safety in the Community

When someone is living with a serious illness, home becomes more than just a place of comfort - it becomes a place of care. Family members often find themselves thrust into a role they never expected, suddenly responsible for managing a complex array of medications - each meant for a different purpose, each with its own set of instructions. Keeping track of what each medicine is for, how to give it, and when to stop can quickly become overwhelming.

A recent initiative by Hospis Malaysia that involves pharmacists during home visits explored what really happens when patients receive palliative care at home. The findings revealed the many unseen challenges families face in managing medicines safely — and the importance of coordinated support from the care team.

One of the most common and concerning issues identified was polypharmacy i.e., the concurrent use of multiple medications. It is generally defined as taking five or more medicines, but a study by McNeil (2017) found that patients near the end of life take an average of 11.5. In fact, the highest we have encountered was 27 different medications for one person!

Patients with multiple health conditions are often under the care of several specialists across different facilities e.g., community clinics, government hospitals, and private facility, each prescribing their own medications. When communication breaks down between these facilities, overlaps and duplications can occur, sometimes under different brand names or strengths. Even a simple change in packaging or tablet appearance can cause confusion.



Patients' own medication supplies at home — often unused due to multiple providers, packaging changes, or side effects. By visiting patients in their home environment, our clinical team can identify these issues and provide safer, more coordinated care that hospital teams may not always see.



Medication aids for caregivers (left to right): pill crusher, pill cutter, and pill organizer. These simple tools make medicine management safer and easier, especially for those with dexterity challenges.

Expired or discontinued medicines were often in drawers, with many unsure how to dispose of them. Few realised that throwing them away or flushing them can harm the environment by contaminating water and wildlife. What this study uncovered was not neglect, but a clear need for reassurance and guidance. Families want to do the right thing; they simply need to feel informed, supported, and confident in their care.

Another common finding was families often hesitate to use prescribed medicines like morphine, fearing addiction or that it signals “the end,” even when patients are in pain.

Practical challenges also surfaced. Some families, unsure about the correct way to give medicines used measuring cups for liquid medications, leading to inaccurate dosing. Others struggled to keep track of multiple tablets or different times of administration. During home visits, the team provided practical tools such as oral syringes and pill organisers to help families manage their medicines more safely and confidently.

That's where a coordinated approach from the care team makes all the difference. During home visits, the Hospis Malaysia team - doctors, nurses, pharmacists - work together to review medication lists, simplify regimens, and ensure medicines were used safely. Pharmacists help identify duplicates, explain instructions, and provide education on correct administration. Nurses reinforced these messages during follow-up visits, observing how medicines were being given and offering hands-on support. Doctors adjusted prescriptions as needed and ensured consistency across care settings.

Each member of the team plays a part in one shared goal: helping patients remain comfortable and safe at home, while easing the burden on families. Medicines should not be a source of stress, but rather a means to ease symptoms and bring comfort to patients.

A Promise of Dignity, United in Care: Voices for Hospices 2025

This year's Voices for Hospices 2025 Charity Gala Dinner marked a milestone for Hospis Malaysia – celebrating the 10th edition of this biennial event and over three decades of commitment to supporting patients living with life-limiting illnesses.

Organised to raise vital funds for our work in palliative care, the dinner also reaffirmed Hospis Malaysia's commitment to provide compassionate, person-centred care and to strengthen awareness and support for this very crucial area of healthcare across Malaysia.

The theme, "A Promise of Dignity, United in Care," reminds us that palliative care is not just about managing symptoms, but about honouring each person and their family as they journey through serious illness with dignity, comfort, and respect.

The evening also marked a meaningful milestone with the unveiling of Hospis Malaysia's refreshed brand identity and new logo, symbolising its evolution and aspiration to become a Centre of Palliative Care Excellence.

The speeches throughout the night echoed these values. YBhg. Dato' Kathleen Chew, Chairperson of Hospis Malaysia, highlighted the urgent need for accessible palliative care amid Malaysia's ageing population, reaffirming the organisation's mission to ensure that no one is left behind in their time of need. Y.A.M. Tengku Datin Paduka Zatashah binti Sultan Sharafuddin Idris Shah, Guest of Honour, reminded

guests that palliative care is not about the end of life, but the dignity of life itself.

Guest Speaker Puan Norra Ismail shared a deeply personal story about her late daughter, Tijani, reminding everyone of the strength and humanity found in care, compassion, and connection – the very heart of Hospis Malaysia's work in helping patients live fully and meaningfully.

A particularly moving moment was the Luminaria ceremony, where guests joined VIPs in raising their phone lights in honour of those who have faced or are facing life-limiting illnesses. The quiet glow across the ballroom symbolised love, remembrance, and resilience – a powerful reminder that while death is part of life, connection gives it meaning.

The atmosphere soon lifted with energy and excitement as guests took part in the raffle draw and live auction. It was heartening to see everyone fully engaged – laughing, cheering, and generously contributing in the spirit of giving. The room came alive with warmth and camaraderie as supporters raised funds through raffle book purchases and spirited auction participation – all for a meaningful cause.

The night was filled with memorable performances that added warmth and joy. Martin Looi opened with a soulful violin medley, setting a reflective tone, while Atilia Haron closed with inspiring renditions of evergreen songs, leaving the audience deeply moved.

As the evening drew to a close, it was clear that Voices for Hospices 2025 was more than just a gala – it was a celebration of compassion, a reaffirmation of purpose, and a collective promise to uphold quality care for all. Hospis Malaysia extends its deepest appreciation to all partners, donors, and supporters for their unwavering belief in its mission.

Reflections by Guest Speaker Puan Norra Ismail, Mother of the Late Tijani Batrisyia

“

Nurse Nisha and Dr Wai Fong spoke to Tijani like she was a person, not just a patient. It wasn't always "here's your condition and here's your medication." With that, they gained Tijani's trust. Tijani opened up to them and talked about a lot of things like her favourite TV shows, favourite food – and that was how we found out that all four of us were foodies.

The thing is, Hospis Malaysia did not provide us with just medical support; they also gave us emotional support. These were tough times that we were going through and we knew things were going to get harder – and they helped us out by preparing us for what was to come as the end-of-life stage began.

For the times we did not have to spend at the hospital, we spent it together at home. And for the worry we did not have to bear, we used it to be happy. Tijani had a good quality of life despite her circumstances. Her journey of illness was very dignified. Even though she was very young and her life was short, I learned a lot from her. I learned about strength, humour, grace... and the best lesson I learned from her was to live with dignity and peace.

Even though she never made it to 23, I think she had left a lasting impact and I am very happy to be here tonight to share about our experience with Hospis Malaysia. To everyone who is here tonight, your support makes a difference. It means that families like mine can have that same promise of dignity and unity in care.

”

Listen to Puan Norra Ismail's full speech on her Instagram @norraismail or reach out to us at pr@hospismalaysia.org to learn more.





KLSCM 2025 Pally the plush at flag-off (Photo Credit: Lim Zee Nee)



Pally through the years - a journey of compassion and commitment (Photo Credit: Dragon Pang)

Celebrating 12 Years of Compassion: Hospis Malaysia at KLSCM 2025

Kuala Lumpur was still cloaked in pre-dawn quiet when the first runners gathered on Saturday - Day One of the Kuala Lumpur Standard Chartered Marathon (KLSCM) 2025. The 10K, 5K and Kids' Dash were about to begin. The air was already warm, hinting at the sweltering heat to come, but spirits were high. For Hospis Malaysia, this wasn't just another race - it marked our 12th year as a charity beneficiary of the "Run for a Reason" (RFAR) initiative.

Over 400 runners chose to run for Hospis Malaysia this year, each carrying a story, a memory, a reason. They ran not just for fitness or fun, but for dignity, care, and the belief that no one should face serious illness alone. Sunday brought the half and full marathoners - seasoned athletes and first-timers alike - charging through the city, pushing past fatigue, united by purpose.

This year's finish line shifted to the historic Stadium Merdeka, beneath the towering silhouette of Merdeka



Members of the public pledging to support compassionate and dignified palliative care for all



Showing up year after year, standing strong for palliative care





We couldn't have done it without these amazing volunteers!



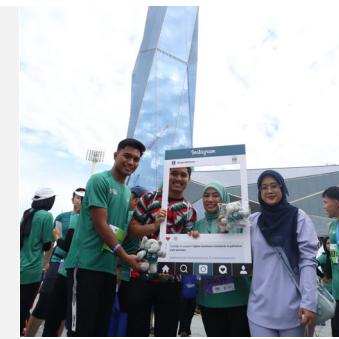
Hospis Malaysia's top RFAR fundraisers for KLSCM 2025

118 Tower. Runners crossed into a thunderous welcome of cheers, drums, and noisemakers. The energy was electric, the emotion palpable.

To our RFAR runners who truly understood the assignment — RFAR isn't a shortcut to KLSCM; it's a platform to give back. You registered, raised funds, shared our message, and helped amplify awareness. The monies raised is a lifeline to our work. It means more home visits, better symptom relief, and greater comfort for patients and families facing life's toughest moments. You are superheroes in running shoes. Your dedication powers our mission and brings hope where it's needed most. Bravo!

Among the crowd were nearly 30 Hospis Malaysia volunteers on both days, whose energy and dedication helped power the day. They stood under the same sweltering sun as the runners, sharing messages about palliative care and encouraging online pledges, despite patchy reception and mixed responses. Still, they stayed. Because compassion is quiet persistence. To our volunteers: your presence and belief in our mission made all the difference. You are the heartbeat behind the banner.

As we celebrate this milestone, we look ahead with renewed commitment to our mission, and we hope you'll continue running beside us.



The highlight of the year — runners capturing memories in front of the iconic Merdeka 118



Annual Clinical Competency Assessment (The “Festival”): Elevating Standards in Palliative Care

At Hospis Malaysia, excellence in patient-centred care is not just a goal—it's a steadfast commitment. Each year, our clinical team engages in a structured assessment initiative fondly known as “The Festival.” More than a routine evaluation, The Festival is a celebration of compassionate practice and professional growth.

The “Festival” is designed to:

- Assess core competencies across the clinical team which include nurses, junior doctors, pharmacists, and rehabilitation teams.
- Strengthen vital skills in communication, clinical decision-making, teamwork, and ethical care.
- Identify opportunities for development and provide targeted support to enhance everyday practice.

Subject matter experts—senior doctors, pharmacist and rehabilitation therapist—serve as assessors as well, evaluating participants across key domains:

- **Clinical and Practical Skills**
 - Clinical examination skills are evaluated
 - Multiple-choice questions and short answer questions based on different clinical scenarios to evaluate knowledge on symptom assessment and management.
- **Communication Skills**
 - Empathetic listening, clarity in goal-of-care discussions, and navigating sensitive conversations.
 - Role-play scenarios simulate real-life bedside interactions to test responsiveness and empathy.

To ensure a rigorous and meaningful review, The Festival incorporates:

- Realistic scenarios such as family meetings and clinical examination of different systems
- Structured evaluation frameworks: Rubrics aligned with competency framework for the clinical team

The “Festival” marks the beginning of a continuous journey towards excellence:

- Personalized performance reviews with tailored development plans.
- Targeted training modules and mentorship to bridge gaps and reinforce strengths.
- Reflective practice through journaling and group debriefs to deepen learning and self-awareness.

This annual tradition reaffirms our collective dedication to delivering the highest standards of palliative care - anchored in compassion, competence, and collaboration.



Clinical team members demonstrating competence — clinical and practical skills under careful evaluation at The “Festival”.



We extend our heartfelt thanks to all our partners, donors, and supporters who have helped our efforts to provide quality palliative care to patients and families in need.



Canon Medical Systems Malaysia for their contribution.



Family and friends of the late John Voo for their fundraiser honouring his memory.



Harlow's & MGI Sdn Bhd for its continued support.



HotWheels (Mattel) and Art of Speed for selecting Hospis Malaysia as the beneficiary of the 3rd Annual Hot Wheels Collectors Convention's charity auction, held during the Art of Speed custom culture festival.



The SOULed OUT Group for having us as part of their 30th Anniversary celebration.



For their support towards medical and comfort items:



Abio Marketing Sdn Bhd



ASNB Wakalah



Pembinaan Mitrajaya Sdn Bhd



Ngan Kee Hong Realty Sdn Bhd



We thank **YB Lim Lip Eng, Member of Parliament for Kepong** for his generous contribution to Hospis Malaysia, witnessed by **YB Dato' Seri Dr Wan Azizah**. His support underscores the vital role of palliative care and strengthens our mission to expand access and enhance quality for those in need.





UPCOMING EVENTS 2026

JANUARY
10-11

Workshop: Clinical
Ethics In Palliative
Care

APRIL
25-26

25th Annual Charity
Motor Treasure Hunt
2026



Ng Wymin



View his work

Supporting Palliative Care Through Wildlife Photography

The Kuala Lumpur-based lawyer captures the quiet yet powerful moments where nature meets the lens. Ng Wymin has pledged all proceeds from his photography to support charitable causes, and in honour of the care his late father received, he has chosen **Hospis Malaysia** as the beneficiary for 2026.

Explore his work at aboringman.com/prints/ and purchase your favourite pieces – proceeds will make a meaningful difference in the lives of patients and families in our care.



HM Center of
Palliative
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25th Annual Charity Motor Treasure Hunt 2026

25-26 APRIL 2026
TAIPEI

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