ENHANCING THE QUALITY OF PAEDIATRIC ONCOLOGY CARE IN SRI LANKA THROUGH A SUSTAINABLE, LONG-TERM PARTNERSHIP GROUNDED IN MUTUAL LEARNING AND SHARED EXPERTISE

Upeka Senanayake [1], Denise Williams [1], Sanjeeva Gunasekara [3] & Gemma Barnard [1&2]
1 Department of Paediatric Haematology, Oncology and BMT, Addenbrooke's Hospital, Cambridge, UK
2 Department of Paediatrics, University of Cambridge, UK
3 The National Cancer Institute, Maharagama, Sri Lanka

Background

Sri Lanka is a middle-income South Asian country with a population of approximately 22 million and has made substantial progress in maternal and child health. The country has received recognition from WHO and is a focus country under the Global Initiative for Childhood Cancer (GICC).
Sri Lanka also participates in the Global Platform for Access to Childhood Cancer Medicines. With generous support from the Sri Lankan community, a new dedicated facility for paediatric cancer care is currently under construction.
Despite these achievements, paediatric oncology remains a significant area of unmet need.

Key challenges within the sector include:

- Shortage of trained paediatric oncology specialists.
- Limited paediatric oncology nursing capacity.
- High clinical workloads for healthcare staff.
- Relatively high sepsis-related mortality.
- Lack of institution-wide chemotherapy treatment protocols.
- Limited access to diagnostics and targeted/precision therapies.
- Palliative care is not yet recognised as a formal medical specialty, although organisations such as Suwa Arana provide essential supportive and end-of-life care services.

Project Goals

- Improve parents' and carers' knowledge and understanding of childhood cancer.
- Empower, motivate and strengthen the capacity of the healthcare workforce at the National Cancer Institute, Sri Lanka.
- Establish and strengthen effective diagnostic and treatment pathways for children with cancer.



Methods

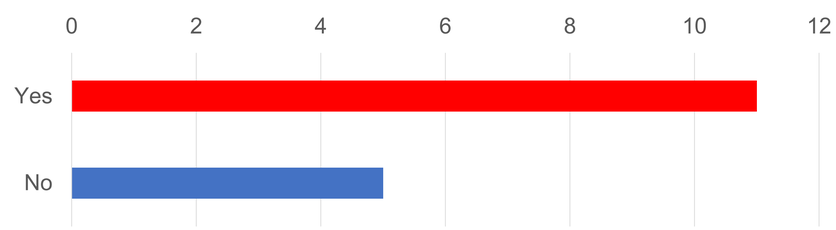
Cambridge Paediatric Oncology, supported by the Cambridge Global Health Partnerships, partnered with the National Cancer Institute of Sri Lanka through a formal Memorandum of Understanding. Activities included joint needs assessments, stakeholder engagement, and pilot projects designed to strengthen workforce capacity and enhance patient-centred care.

Results

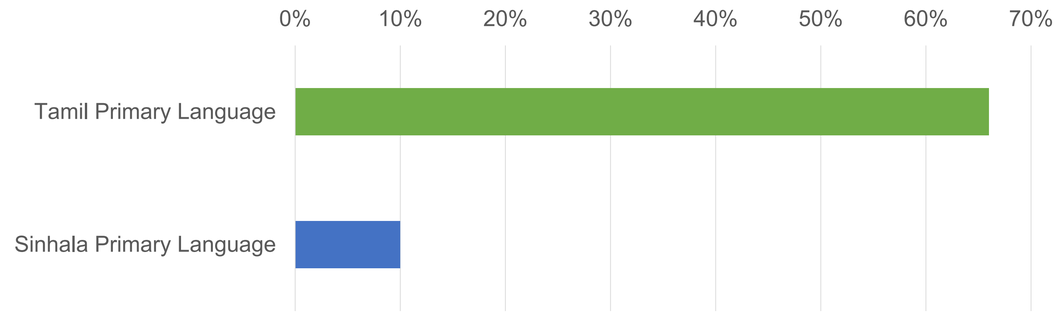
Early collaborative efforts have delivered several positive outcomes.

- A pilot parent education project identified gaps in caregiver knowledge and understanding, and informed future interventions.

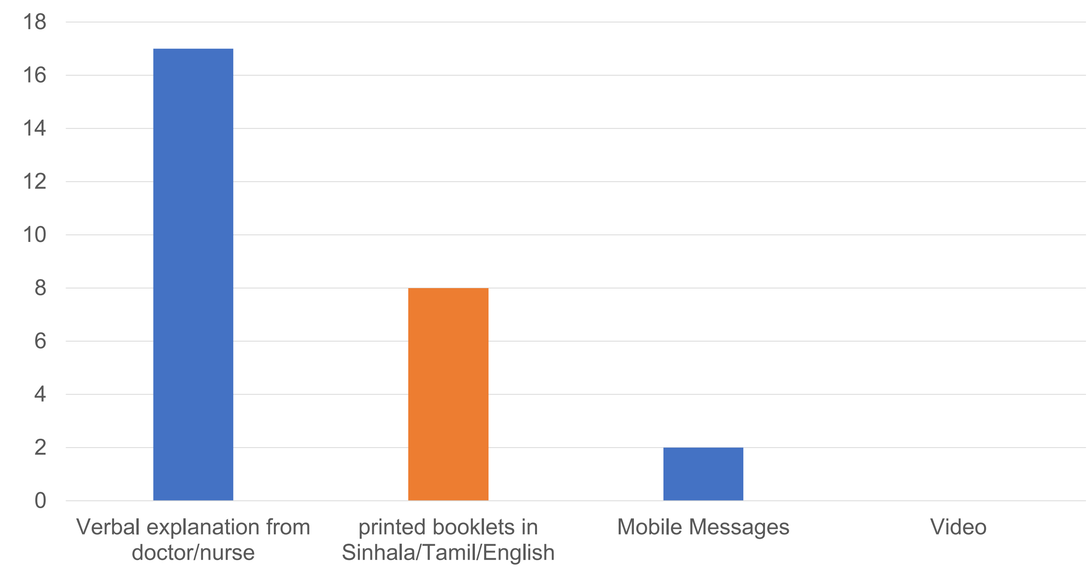
Question: Have you had trouble understanding medical words or instructions? 55% (11/16) of respondents reported difficulty understanding medical words or instructions.



Question: :Is language (Sinhala/Tamil/English) a challenge when receiving information? 66% (4/6) of those who said Tamil was their primary language thought that language was a problem when receiving information. This is compared to 10% (1/10) of the Sinhala speaking sample.



Question: How would you like to receive information? 40% (8/20) of respondents said they would like printed information (e.g. leaflet).



Communication tools are in development.

Conclusions

A sustainable international partnership has been established to support the development of paediatric oncology services in Sri Lanka. Through capacity building, knowledge exchange, and system-wide quality improvement, this collaboration aims to strengthen clinical care, improve patient outcomes, and create lasting benefits for children with cancer and their families.

Acknowledgements

Pilot parent education project

- Data collected by Dr Dilankani Samarakoon , Dr Praveen Kulendran, Dr Pamuditha Kumbukage National cancer institute, Maharagama, Sri Lanka.
- Data analysed by Dr Hugo Hall, University of Cambridge, UK.

NHS Cambridge University Hospitals NHS Foundation Trust

National Cancer Institute Sri Lanka

Cambridge Global Health Partnerships