

Disability, including prevention, management and rehabilitation

The Fifty-eighth World Health Assembly,

Having considered the report on disability, including management and rehabilitation;¹

Noting that about 600 million people live with disabilities of various types;

Aware of the global magnitude of the health and rehabilitation needs of persons with disabilities and the cost of their exclusion from society;

Concerned by the rapid increase in the number of persons with disabilities as a result of population growth, growth of the ageing population, chronic conditions, malnutrition, those injured by land mines, war, violence, especially domestic violence, AIDS, environmental degradation, road-traffic, domestic injuries, injuries caused by games and occupational injuries, and other causes often related to poverty;

Stressing that 80% of people with disabilities, particularly in the child population, live in low-income countries and that poverty further limits access to basic health services, including rehabilitation services;

Recognizing that people with disabilities are important contributors to society and that allocating resources to their rehabilitation is an investment;

Recognizing the importance of reliable information on various aspects of disability prevention, rehabilitation and care, and the need to invest in health and rehabilitation services required to ensure equality of opportunities and good quality of life for persons with disabilities;

Recalling the United Nations' Standard Rules on the Equalization of Opportunities for Persons with Disabilities;²

Recalling the International Classification of Functioning, Disability, and Health (ICF) officially endorsed at the Fifty-fourth World Health Assembly in 2001;

¹ Document A58/17.

² Adopted by United Nations General Assembly resolution 48/96.

Recalling also the United Nations World Programme of Action concerning Disabled Persons,¹ indicating inter alia that the sphere of responsibility of WHO includes disability prevention and medical rehabilitation;

Noting the African Decade of Disabled Persons (2000-2009), the Asian and Pacific Decade of Disabled Persons (1993-2002), the New Asian Pacific Decade of Disabled Persons (2003-2012) and the European Year of People with Disabilities (2003);

Recalling the United Nations General Assembly resolutions 56/168 of 19 December 2001, 57/229 of 18 December 2002, and 58/246 of 23 December 2003;

Mindful that the internationally agreed upon development goals as contained in the United Nations Millennium Declaration would not be achieved without addressing issues related to the health and rehabilitation of persons with disabilities;

Recognizing the importance of the early conclusion of the United Nations comprehensive and integral international convention on protection and promotion of the rights and dignity of persons with disabilities;²

1. URGES Member States:

- (1) to strengthen national programmes, policies and strategies for the implementation of the United Nations' Standard Rules on the Equalization of Opportunities for Persons with Disabilities;
- (2) to increase awareness of the public at large of the importance of the issue of disability and to coordinate efforts of all sectors of society to participate in disability prevention activities;
- (3) to develop their knowledge base with a view to promoting and protecting the rights and dignity of persons with disabilities and ensure their full inclusion in society, particularly by encouraging training and protecting employment;
- (4) to take all necessary steps for the reduction of risk factors contributing to disabilities during pregnancy and childhood;
- (5) to promote early intervention and identification of disability, especially during pregnancy and for children, and full physical, informational, and economic accessibility in all spheres of life, including to health and rehabilitation services, in order to ensure full participation and equality of persons with disabilities;
- (6) to implement, as appropriate, family counselling programmes including premarital confidential testing for diseases such as anaemia and thalassaemia along with prevention counselling for intra-family marriages;
- (7) to promote and strengthen community-based rehabilitation programmes linked to primary health care and integrated in the health system;

¹ United Nations General Assembly resolution 37/52.

² United Nations General Assembly resolution 56/168.

(8) to facilitate access to appropriate assistive technology and to promote its development and other means that encourage the inclusion of persons with disabilities in society;

(9) to include a disability component in their health policies and programmes, in particular in the areas of child and adolescent health, sexual and reproductive health, mental health, ageing, HIV/AIDS, and chronic conditions such as diabetes mellitus, cardiovascular diseases and cancer;

(10) to coordinate policies and programmes on disability with those on ageing where appropriate;

(11) to ensure gender equality in all measures, with special attention to women and girls with disabilities, often subject to social, cultural and economic disadvantages;

(12) to participate actively and constructively in the preparatory work for the United Nations comprehensive and integral international convention to promote and protect the rights and dignity of persons with disabilities,¹ in order that it may be adopted by the General Assembly as a matter of priority;

(13) to investigate and put into practice, under their specific conditions, the most effective actions to prevent disabilities, with the participation of other sectors of the community;

(14) to ensure provision of adequate and effective medical care to people with special needs and to facilitate their access to such care including to prostheses, wheelchairs, driving aids and other devices;

(15) to research and implement the most effective measures to prevent disabilities in collaboration with communities and other sectors;

2. REQUESTS the Director-General:

(1) to intensify collaboration within the Organization in order to work towards enhancing quality of life and promoting the rights and dignity of persons with disabilities inter alia by including gender-disaggregated statistical analysis and information on disability in all areas of work;

(2) to provide support to Member States in strengthening national rehabilitation programmes and implementing the United Nations' Standard Rules on the Equalization of Opportunities for Persons with Disabilities;

(3) to support Member States in collecting more reliable data on all relevant aspects, including cost-effectiveness of interventions for disability prevention, rehabilitation and care, and in assessing potential use of available national and international resources for disability prevention, rehabilitation and care;

(4) to further strengthen collaborative work within the United Nations system and with Member States, academia, private sector, and nongovernmental organizations, including organizations of people with disabilities;

¹ United Nations General Assembly resolution 56/168.

- (5) to contribute appropriately to the work of the Ad Hoc Committee responsible for preparing a United Nations comprehensive and integral international convention to promote and protect the rights and dignity of persons with disabilities;
- (6) to organize a meeting of experts to review the health and rehabilitation requirements of persons with disabilities;
- (7) to promote studies of incidence and prevalence of disabilities as a basis for the formulation of strategies for prevention, treatment and rehabilitation;
- (8) to produce a world report on disability and rehabilitation based on the best available scientific evidence;
- (9) to promote a clear understanding of the contributions that people with disabilities can make to society;
- (10) to support Member States in taking the necessary steps to reduce the risk factors that lead to disabilities;
- (11) to report on progress in implementation of this resolution to the Sixtieth World Health Assembly, through the Executive Board.

Ninth plenary meeting, 25 May 2005
A58/VR/9

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