

DISABILITY AND REHABILITATION WHO ACTION PLAN 2006-2011

An estimated 10% of the world's population experience some form of disability or impairment¹. The number of people with disabilities is increasing due to population growth, ageing, emergence of chronic diseases and medical advances that preserve and prolong life. The most common causes of impairment and disability include chronic diseases such as diabetes, cardiovascular disease and cancer; injuries such as those due to road traffic crashes, conflicts, falls, landmines, mental impairments, birth defects, malnutrition, HIV/AIDS and other communicable diseases. These trends are creating overwhelming demands for health and rehabilitation services.

This document provides the overview of WHO's future plan of activities, which will be carried out or coordinated by the Disability and Rehabilitation team (DAR) located in the Department of Injuries and Violence Prevention, in the Noncommunicable Diseases and Mental Health (NMH) Cluster.

VISION: All persons with disabilities live in dignity, with equal rights and opportunities

MISSION: To enhance the quality of life for persons with disabilities through national, regional and global efforts to:

- Raise awareness about the magnitude and consequences of disability
- Facilitate data collection and analyse or disseminate disability-related data and information
- Support, promote and strengthen health and rehabilitation services for persons with disabilities and their families
- Promote community based rehabilitation (CBR)
- Promote development, production, distribution and servicing of assistive technology
- Support the development, implementation, measuring and monitoring of policies to improve the rights and opportunities for people with disabilities
- Build capacity among health and rehabilitation policy makers and service providers
- Foster multisectoral networks and partnerships

GUIDING DOCUMENTS:

WHO activities are mostly based on two guiding documents: the UN Standard Rules on the Equalization of Opportunities for Persons with Disabilities and the World Health Assembly (WHA) Resolution on "Disability, including prevention, management and rehabilitation".

- i). **United Nations Standard Rules:** The UN General Assembly adopted the *Standard Rules on the Equalization of Opportunities for Persons with Disabilities* in 1993. The rules represent a strong moral and political commitment from governments to take action to attain equalization of opportunities for persons with disabilities. The rules that serve as direct

¹ ICF definition of disability and impairment. Disability is defined as "the outcome or result of a complex relationship between an individual's health condition and personal factors, and of the external factors that represent the circumstances in which the individual lives". Impairments are defined as "problems in body function or structure such as significant deviation or loss", <http://www3.who.int/icf/intros/ICF-Eng-Intro.pdf>

foundation for WHO's work are, Rule 1. (awareness-raising), Rule 2. (medical care), Rule 3. (rehabilitation), Rule 4.(support services as preconditions for equal participation) and Rule 19 (which addresses in part issues related to training of personnel providing health and rehabilitation services).

- ii). **WHA Resolution (WHA58.23) "*Disability, including prevention, management and rehabilitation*"**: WHO's work is based on the mandate it receives through resolutions from its governing bodies. In May 2005, the 58th World Health Assembly approved a Resolution on "Disability, including prevention, management and rehabilitation" that calls upon Member States to strengthen implementation of the United Nations Standard Rules on the Equalization of Opportunities for Persons with Disabilities; promote the rights and dignity of people with disabilities to ensure their full inclusion in society; promote and strengthen community-based rehabilitation programs; and include a disability component in their health policies and programs. Through the Resolution, the WHO Director-General is requested to intensify collaboration within WHO by including gender-disaggregated statistical analysis and information on disability in all areas of work and provide support to Member States in strengthening national rehabilitation programs and collecting more reliable data on all relevant aspects. The draft resolution also requests the WHO Director-General to produce a world report on disability and rehabilitation based on the best available scientific evidence.

KEY ACTIVITIES: (Those with *are identified as priorities)

1. To produce a world report on disability and rehabilitation *

The WHO Resolution on "Disability, including prevention, management and rehabilitation", requests the WHO Director General to produce a world report on disability and rehabilitation based on the best available scientific evidence. The world report will contribute to raise the profile of disability and rehabilitation issues globally by providing up to date information and propose a number of concrete recommendations. WHO will:

- 1.1. Identify the partners and resources needed for developing it.
- 1.2. Collect data and evidences of good practices
- 1.3. Identify a core group to produce it
- 1.4. Draft the World Report and conduct review by the experts
- 1.5. Finalize and publish the world report in different languages

Product:

- World report on disability and rehabilitation

2. Advocacy - to raise awareness about the magnitude and consequences of disability:

The general public and decision makers are often unaware of the great number of persons living with disabilities and impairments around the world, the challenges they face in participating fully in their societies and their difficulty in accessing healthcare and rehabilitation services and other supports and services necessary for their health and well-being. The additional challenges faced by women with disabilities are also often ignored. DAR's primary target audiences for its advocacy work are Ministries of Health and other government organizations, development organizations, private sectors, the media and the general public. WHO will:

- 2.1. Create a comprehensive website on disability and rehabilitation *
- 2.2. Develop and disseminate advocacy materials, including fact sheets *
- 2.3. Actively influence the media

Products:

- Website on Disability and Rehabilitation
- Fact sheets, newsletters, posters, documentary and other advocacy materials
- Articles on disability and rehabilitation in electronic and print media including scientific journals/publications.

3. To facilitate data collection, analysis, and dissemination of disability-related data and information.

Resolution WHA 58.23 invites WHO to support Member States in collecting more reliable data and to promote studies of incidence and prevalence of disabilities as a basis for the formulation of strategies for prevention, treatment and rehabilitation; WHO recognizes the urgent need for collecting disaggregated gender specific data on disability. One of its departments, Measurements and Health information Systems (MHI) is actively engaged in collection of some data related to disability. The UN Statistics Division and the Washington Group on Disability Statistics are also collecting data on disability.

WHO will complement the work of both groups by carrying out the following activities:

- 3.1. Prepare a glossary of terminology related to disability and rehabilitation*
- 3.2. Issue Guidelines on appropriate data collection methods in collaboration with other relevant UN agencies and partners.
- 3.3. Support collection of country-level data on disability and implementation of the UN Standard Rules related to health, rehabilitation and support services.*

Products:

- Glossary of terminology on disability and rehabilitation *
- Guidelines on appropriate data collection methods
- A web-based country by country profile on disability and rehabilitation

4. To support national, regional and global efforts to promote health and rehabilitation services for persons with disabilities and their families

WHA 58,23 invites WHO 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. UN Standard Rule 2 on Medical Care describes that "*States should ensure the provision of effective medical care to persons with disabilities*". Similarly, Rule 3 mentions that, "*States should ensure the provision of rehabilitation services to persons with disabilities in order for them to reach and sustain their optimum level of independence and functioning*". WHO will work towards strengthening health care and rehabilitation services for people with impairments and disabilities. WHO will:

- 4.1. Support Member States to promote access to rehabilitation services by integrating rehabilitation into Primary Health Care, strengthening specialized rehabilitation centres, linking these services with Community Based Rehabilitation (CBR)
- 4.2. Develop the guidelines to strengthen medical rehabilitation services *
- 4.3. Develop "Multi-country Action-Learning Research Initiative - A new Paradigm of Medical Care for Disabled Persons" to promote opportunities for persons with disabilities to become more knowledgeable and empowered

Products:

- Guidelines on strengthening medical rehabilitation services
- Report on "Multi-country Action-Learning Research Initiative - A new Paradigm of Medical Care for Disabled Persons"
- Programmes in countries

5. Promoting Community Based Rehabilitation (CBR):

25 years ago, considering the great need and limited resources, WHO introduced a new approach in providing rehabilitation services known as Community Based Rehabilitation (CBR). Today, CBR is being implemented in more than 90 countries and has evolved into an effective comprehensive multi-sectoral strategy in creating access to health care, education, livelihood opportunities and participation/ inclusion. After 25 years of use, it is the time to take stock and update the strategies where needed. WHO will work in the following areas:

- 5.1. Develop CBR Guidelines*
- 5.2. Conduct regional/country workshops for promotion of CBR and Guidelines
- 5.3. Support Member States to initiate CBR and/or strengthen existing CBR*

Products:

- Guidelines on CBR
- CBR country/regional progress report and database of national and international resource organizations working in the field of CBR
- Programmes in countries

6. Promoting development, production, distribution and servicing of assistive technology

Even today, in many developing countries only 5% - 15% population can access assistive technology. This technology is highly needed among people with impairments and disabilities, especially for mobility, hearing and low vision. Considering the huge need, UN Standard Rule 4 stated that "*States should ensure the development and supply of support services, including assistive technology for persons with disabilities, to assist them to increase their level of independence in their daily living and to exercise their rights*". To contribute to the implementation of UN Standard Rules 4 and part of 19, WHO will:

- 6.1. Support Member States to develop national policies on assistive technology
- 6.2. Support member states to train personnel at various levels in the field of assistive technology especially in prosthetics and orthotics.
- 6.3. Promote research on assistive technology and facilitate transfer of technology

Products:

- Guidelines to develop national policies on assistive technology such as wheelchairs and prosthetics/orthotics*
- Distant learning package in prosthetics and orthotics and other assistive technology for different level of personnel in different languages

7. Build capacity among health/rehabilitation policy makers and service providers

Rehabilitation is rarely included in the curriculum of public health, medical schools or other parts of the education system. This hampers the strengthening of disability and rehabilitation projects and activities. Considering this, WHO needs to support capacity development programmes for personnel whose work will affect the health and well-being of people with disabilities. WHO will:

- 7.1. Include a chapter on disability and Rehabilitation in the existing TEACH.VIP package.
- 7.2. Support Member States to develop training on disability and rehabilitation

Products:

- Updated TEACH-VIP that includes a chapter on disability and rehabilitation
- Curriculum on disability and rehabilitation for schools of public health, medical schools, and other institutions training personnel for work in broader public services.

8. Contribute to the development of local, national and international public health policies on disabilities and rehabilitation

In many countries plans of action and legislation addressing issues related to disability and rehabilitation already exist. However these documents are often fragmented and inadequate and their implementation is often incomplete.. A UN “Comprehensive and integral international convention on promotion and protection of the rights and dignity of persons with disabilities” currently discussed, will provide impetus for improving the situation. WHO will:

- 8.1. Participate in the preparatory work for the United Nations "Comprehensive and integral international convention on promotion and protection of the rights and dignity of persons with disabilities".*
- 8.2. Support Member States to develop multisectoral and multidisciplinary policies at local, regional and national levels

Products.

- "Comprehensive and integral international convention on promotion and protection of the rights and dignity of persons with disabilities" with adequate mention about need for greater access to all supports services and assistive technology required the health and well-being of people with disabilities.
- Collection of best practices in policy development and implementation in the field of disabilities and rehabilitation
- Country projects on policies on Disability and Rehabilitation

9. To foster multisectoral networks and partnerships

Considering the limitation of resources available and the value of collaboration with other stakeholders, WHO has always carried out its activities in close collaboration with its partners, which include: Collaborating Centres, Organizations of professionals, NGOs/civil society, Disabled People's Organizations (DPOs) and many others. This strategy proved a very useful one in the past and needs to be nurtured further to achieve greater success. WHO will:

- 9.1. Organize a meeting of partners every alternate year to report on DAR activities and discuss DAR's future plan of activities
- 9.2. Organize regular meetings with other UN Agencies, Member States, academia, private sector, organizations of people with disabilities (DPO) and non governmental organizations (NGO), to strengthen collaborative work and to promote WHO's objectives on disability and rehabilitation
- 9.3. Develop a network of a dozen of active Collaborating Centres

Products:

- Network of partners
- Network of Collaborating Centres

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