1. Background

More than 1 billion people around the world experience disability (about 15% of the global population), with this number expected to increase. People with disabilities face many health inequities. These inequities in health outcomes are unjust and cannot be explained by the underlying health condition or impairment. They are linked to inequitable service delivery models, inaccessible public health interventions, and to the little consideration given to persons with disabilities during health emergency planning.

At the 74th World Health Assembly in 2021, Member States recognized those inequities and the urgent need to act for a disability inclusive health sector. They adopted for that purpose the resolution WHA74.8 on the highest attainable standard of health for persons with disabilities.

In response to that request, the WHO Secretariat has developed the WHO Global Report on Health Equity for Persons with Disabilities.

2. Aims

1. Provide updated WHO estimates of the global disability prevalence.
2. Summarise the evidence of the complex and cumulative health inequities that persons with disabilities experience.
3. Propose actionable recommendations.

“Achieving health and well-being for all must include addressing the barriers that prevent people with disabilities from accessing the health services they need. Removing these barriers benefits everyone.”

Tedros Adhanom Ghebreyesus, WHO Director-General

3. Reasons why we must act now

1. The highest attainable standard of health is one of the fundamental human rights of every human being without distinction of ethnicity, religion, political belief, economic or social condition and disability status.
2. The number of persons with disabilities is growing driven by increased number of people with noncommunicable diseases, who are also living longer and ageing with limitations in functioning.
3. Investing in health equity for persons with disabilities is investing in health for all and is cost-effective.
4. Acting to achieve health equity for persons with disabilities means ‘doing things differently in the health sector but not doing different things’. Existing and future health system strengthening efforts can be more impactful if they are disability inclusive.
5. Health equity is at the core of achieving SDG 3 and the global health priorities of pursuing universal health coverage, preventing, and responding to health emergencies, and promoting healthier populations.
4. Development process

The WHO Global Report on Health Equity for Persons with Disabilities is based on the best available evidence and was developed in close consultation with Member States, civil societies, persons with disabilities and their representative organizations, UN and WHO agencies in all regions, and health sector stakeholders.

Evidence

Over 20,000 documents were reviewed. The report is substantiated by more than 700 papers representing the best available evidence.

Consultations

31 consultations were conducted, and over 1,300 people participated. Accessibility features were provided, such as sign language interpretation, captioning, and easy-read documents, and UN language translation.

6. Moving forward

The World Health Organization will pilot a Guide for Action in close collaboration with a few Member States in 2023. This Guide for Action will support countries to implement the recommendations developed in this report, and ultimately build a stronger, more sustainable and inclusive health sector.

Contact us: disability@who.int

5. Launch event

Friday 2 December 2022

Join us for the global launch of the WHO Global Report on Health Equity for Persons with Disabilities. It will be a hybrid event: a face-to-face session will be livestreamed from WHO’s Headquarters (Geneva, Switzerland). Find out more information and register here.

Overall, the process that the WHO team has gone through and the way they have engaged with different stakeholder groups has been a really good example of how to do it, and I hope that learning spreads.

Dom Haslam, Chair of the International Disability and Development Consortium