



Health equity for persons with disabilities: Guide for action

Information sheet

Persons with disabilities have the right to the highest attainable standard of health, as enshrined in international law such as the United Nations Convention on the Rights of Persons with Disabilities, as well as in domestic legal frameworks. However, the [Global report on health equity for persons with disabilities](#), launched in December 2022, demonstrates that persons with disabilities still experience health inequities, due to avoidable, unjust and unfair conditions. The Global report calls on government leadership and for decision-makers at all levels of the health sector, to include disability in health systems strengthening efforts at country level.

What is disability inclusion?

“Disability inclusion” refers to the meaningful participation of persons with disabilities in all their diversity and the promotion and mainstreaming of their rights into the work of the health sector. Disability is not the same as a health condition. It results from the interaction between health conditions and impairments that a person experiences, and a range of contextual factors related to different environmental and personal factors.

The **Health equity for persons with disabilities: Guide for action** (or Disability inclusion guide for action) provides practical guidance to enable ministries of health to implement the recommendations in the Global report, and supports Member States to meet commitments on the highest attainable standard of health for all people, as outlined in the [Sustainable Development Goals](#) (SDGs), the [Convention on the Rights of Persons with Disabilities](#) (CRPD) and [World Health Assembly resolution 74.8](#).

The Disability inclusion guide for action is a planning tool to advance health equity for persons with disabilities. It supports ministries of health to identify entry points and plan appropriate actions to strengthen disability inclusion across the health system. These actions are aligned with primary care approaches and can be integrated into the health systems strengthening efforts of countries.

The Disability inclusion guide for action process should be led by ministries of health. However, the process engages a wide range of government departments, health service providers, research institutes and civil society, including organizations of persons with disabilities, in decision-making and the implementation of inter-sectoral actions to address health inequities.

The process is organized in a cycle of four overlapping and continuous phases:



1. Prepare (3–6 months)

- 1.1. Confirm roles, responsibilities and resources
- 1.2. Identify, engage and dialogue with stakeholders
- 1.3. Establish a Disability inclusion guide for action working group

2. Assess (3–6 months)

- 2.1. Collect data and information
- 2.2. Assess status of disability inclusion in the health sector
- 2.3. Document and validate findings

3. Design (3–6 months)

- 3.1. Prioritize entry points and actions with costing
- 3.2. Develop a monitoring and evaluation framework
- 3.3. Validate, finalize and endorse the plan

4. Implement and monitor (ongoing in line with health sector strategic planning cycle)

- 4.1. Disseminate and integrate the action plan
- 4.2. Facilitate inter-sectoral coordination and shared learning
- 4.3. Evaluate and report on the results to contribute to future strategic planning

It is designed for use at national levels, but the process and tools could also be adapted for use in local, district or regional level planning.

Health equity for persons with disabilities will only be achieved if disability-inclusive strategies are integrated into mainstream health actions. The actions developed through the Disability inclusion guide for action are aligned with and can be integrated into other strategic and operational plans in the health and other sectors. For example, actions on strengthening disability inclusion competency of the health care workforce can be integrated into wider workforce development operational plans. Similarly, actions to address social determinants of health, such as access to social protection, education, and employment, can feed into the implementation of national disability strategies.

The Disability inclusion guide for action, accompanying practice examples, tools and resources are available on this webpage: www.who.int/activities/supporting-countries-to-advance-health-equity-for-persons-with-disabilities

WHO can provide technical support to ministries of health to implement the Disability inclusion guide for action process, and facilitate regional sharing and learning between countries.

For further information, contact disability@who.int