

Rehabilitation in health systems: the time is now

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World Health Organization

World Health Assembly Resolution



SEVENTY-SIXTH WORLD HEALTH ASSEMBLY
Agenda item 13.4

WHA76.6
30 May 2023

Strengthening rehabilitation in health systems

The Seventy-sixth World Health Assembly,

https://apps.who.int/gb/ebwha/pdf_files/WHA76/A76_R6-en.pdf

Why is the resolution a big deal?

**For the 1st time in 75 years,
rehabilitation was part of the agenda**



Moral value

Normative weight

Political mandate

What brought us here?

1

Conceptual clarity

Conceptual clarity about

What rehabilitation is

What do we strive for

How we achieve it

Rehabilitation is about functioning

Communication



Mobility



Self-care



Functioning

Sleeping

Relationships

Working

Breathing

Seeing

Mobility

Playing

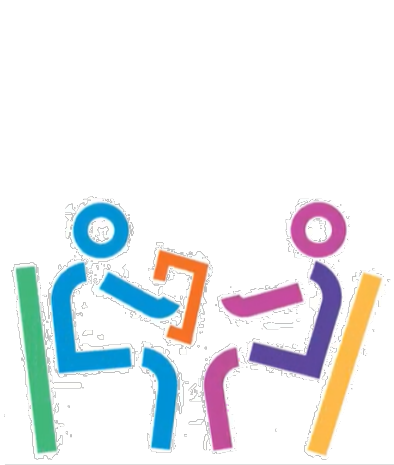
Managing stress

Dressing

Hearing

Self-care

Communication



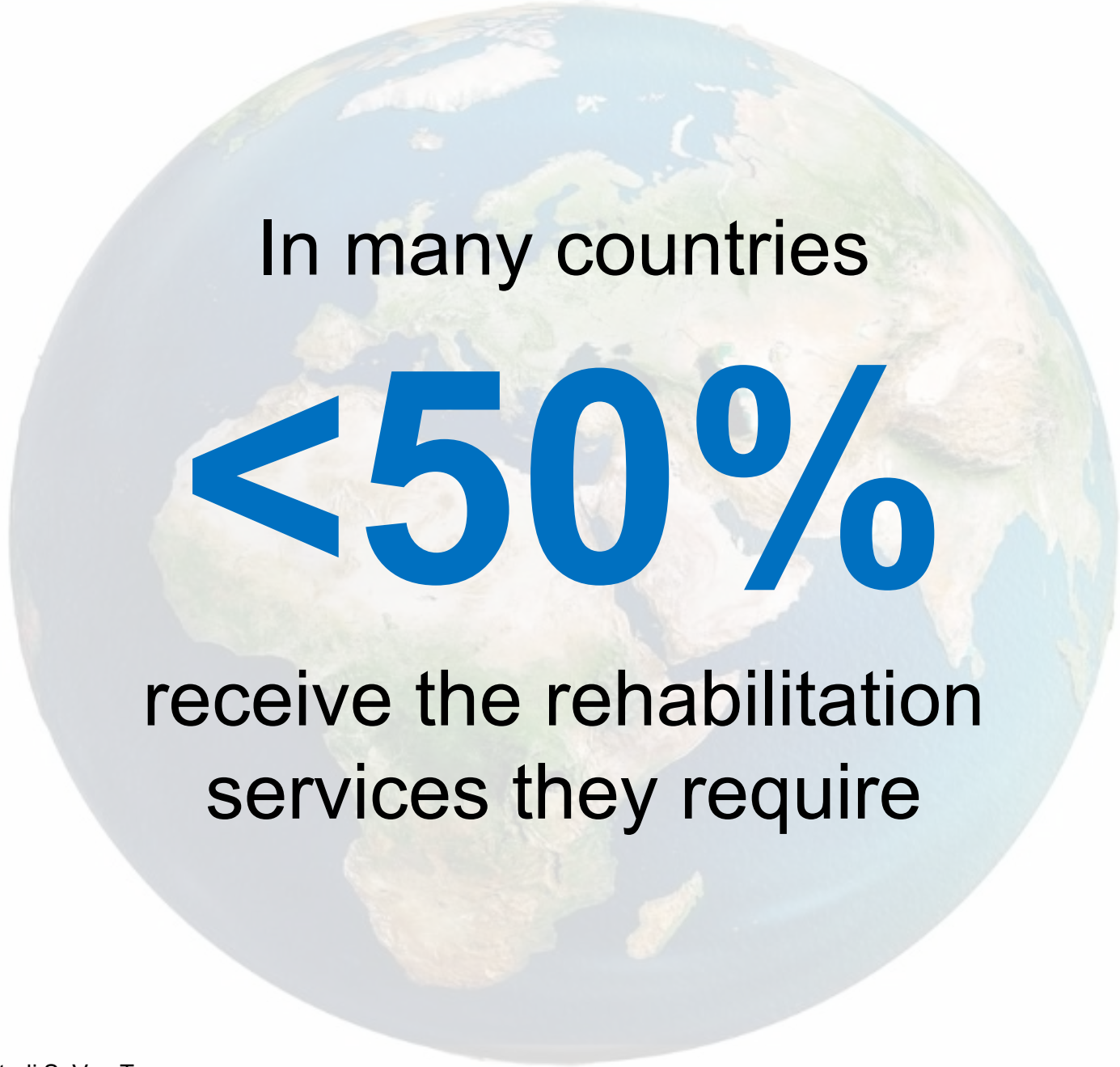


WHO's definition

Rehabilitation is defined as “***a set of **interventions** designed to optimize functioning and reduce disability in individuals with **health conditions** in interaction with their environment***”.

Equity

Everyone who needs rehabilitation receives quality services to optimize and maintain their functioning in everyday life

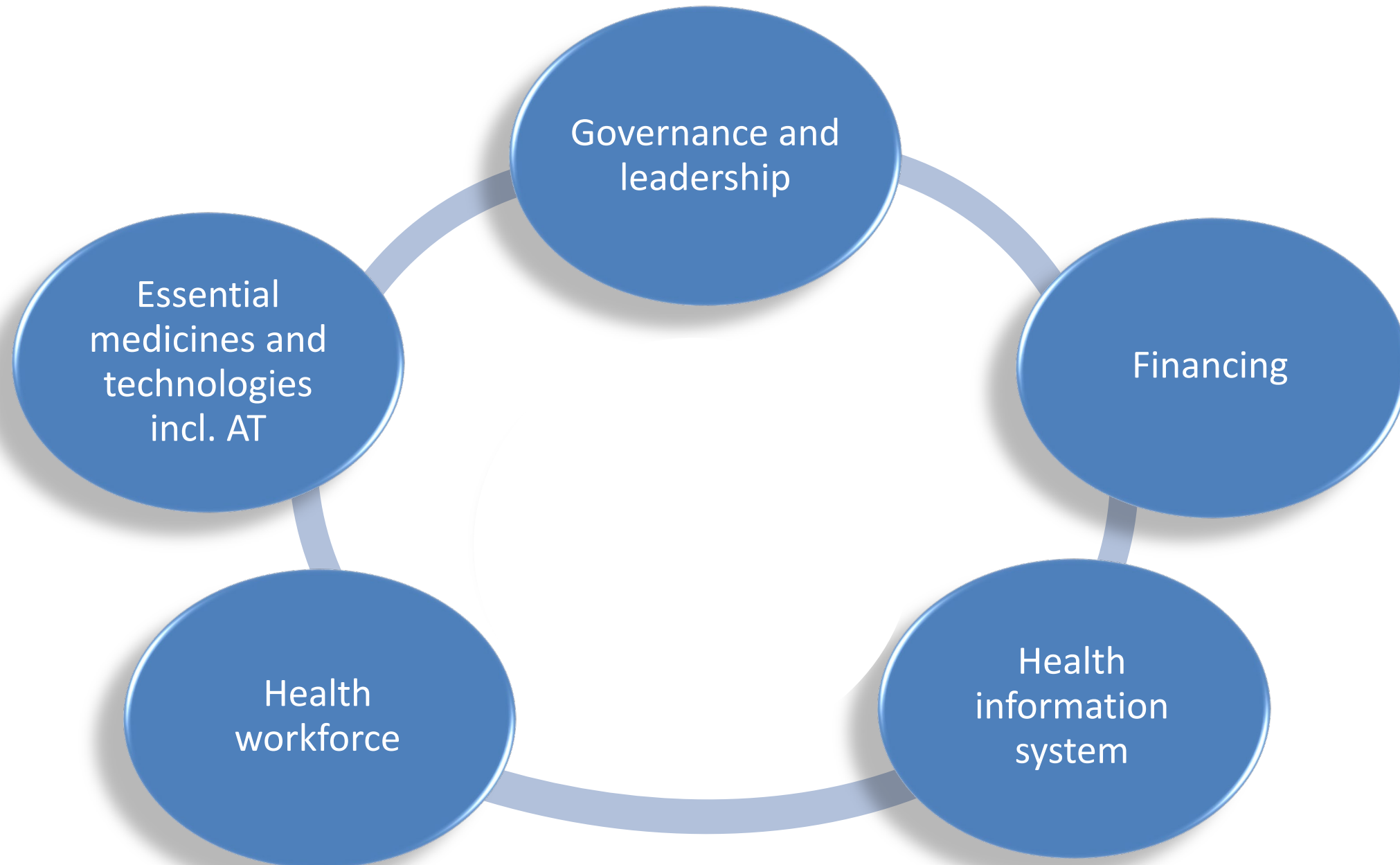


In many countries
<50%
receive the rehabilitation
services they require

Universal Health Coverage

- Provision of **high-quality**, essential services for
 - Health promotion,
 - Prevention,
 - Treatment,
 - **Rehabilitation** and
 - palliation**according to need**
- Protection from **financial hardship**

Strengthening the Health System



SPECIALIZED, HIGH-INTENSITY REHABILITATION

Predominantly tertiary care for people with complex rehabilitation needs during the acute and sub-acute phase of care. Commonly occurs in longer-stay rehabilitation hospitals, centres, units and departments.



2

Stakeholders' cohesion

2017

Rehabilitation
2030

Call for action

<https://www.who.int/initiatives/rehabilitation-2030>



Rehabilitation 2030 Stakeholders' cohesion by ...

- Producing evidence
- Developing normative tools for health system strengthening
- Supporting countries

Rehabilitation relevant for PUBLIC HEALTH

Global estimates of the need for rehabilitation based on the Global Burden of Disease study 2019: a systematic analysis for the Global Burden of Disease Study 2019

www.thelancet.com Published online December 1, 2020 [https://doi.org/10.1016/S0140-6736\(20\)32340-0](https://doi.org/10.1016/S0140-6736(20)32340-0)

Summary

Background Rehabilitation has often been seen as a disability-specific service needed by only few of the population. Despite its individual and societal benefits, rehabilitation has not been prioritised in countries and is under-resourced. We present global, regional, and country data for the number of people who would benefit from rehabilitation at least once during the course of their disabling illness or injury.

Methods To estimate the need for rehabilitation, data from the Global Burden of Diseases, Injuries, and Risk Factors Study 2019 were used to calculate the prevalence and years of life lived with disability (YLDs) of 25 diseases, impairments, or bespoke aggregations of sequelae that were selected as amenable to rehabilitation. All analyses were done at the country level and then aggregated to seven regions: World Bank high-income countries and the six WHO regions (ie, Africa, the Americas, Southeast Asia, Europe, Eastern Mediterranean, and Western Pacific).

Findings Globally, in 2019, 2·41 billion (95% uncertainty interval 2·34–2·50) individuals had conditions that would benefit from rehabilitation, contributing to 310 million [235–392] YLDs. This number had increased by 63% from 1990 to 2019. Regionally, the Western Pacific had the highest need of rehabilitation services (610 million people [588–636] and 83 million YLDs [62–106]). The disease area that contributed most to prevalence was musculoskeletal disorders (1·71 billion people [1·68–1·80]), with low back pain being the most prevalent condition in 134 of the 204 countries analysed.

Interpretation To our knowledge, this is the first study to produce a global estimate of the need for rehabilitation services and to show that at least one in every three people in the world needs rehabilitation at some point in the course of their illness or injury. This number counters the common view of rehabilitation as a service required by only few people. We argue that rehabilitation needs to be brought close to communities as an integral part of primary health care to reach more people in need.

Funding Bill & Melinda Gates Foundation.

Published Online

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See Online/Comment

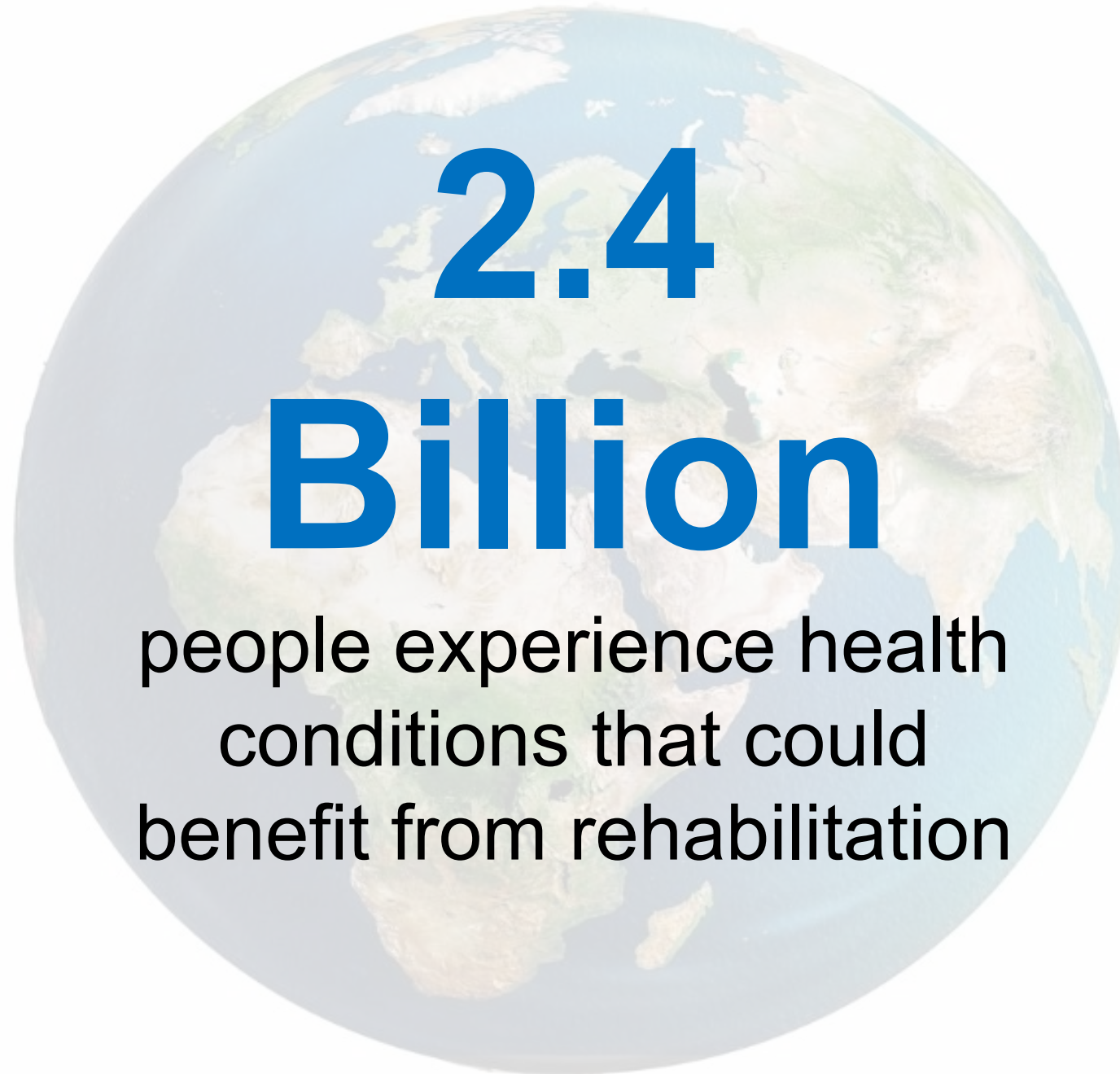
[https://doi.org/10.1016/S0140-6736\(20\)32533-2](https://doi.org/10.1016/S0140-6736(20)32533-2)

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1 in 3



2.4

Billion

people experience health
conditions that could
benefit from rehabilitation



63%

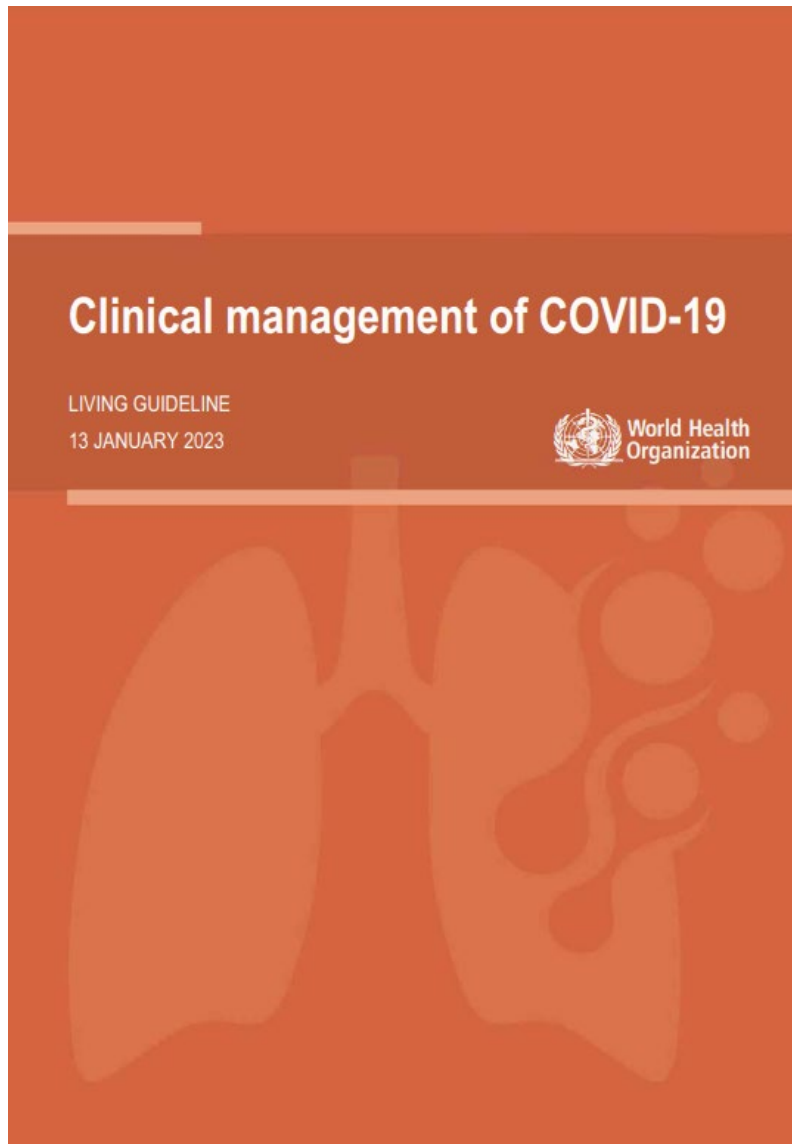
Since 1990

Rehabilitation relevant for STRENGTHENING HEALTH SYSTEMS



Theme issue: advancing rehabilitation through health policy and systems research

Rehabilitation relevant for CLINICAL MANAGEMENT

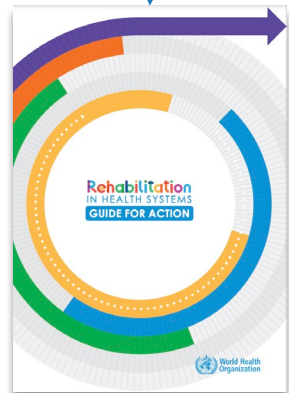


Rehabilitation 2030 Stakeholders' cohesion by ...

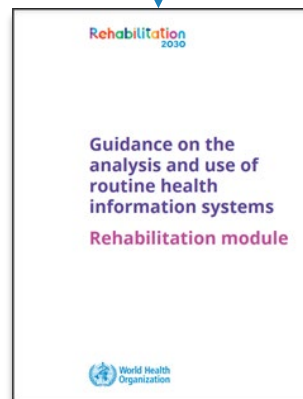
- Producing evidence
- Developing normative tools for health systems strengthening
- Supporting countries

WHO technical tools for health system strengthening

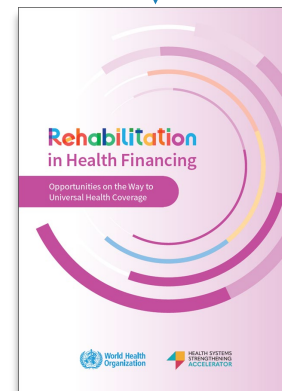
Leadership and governance



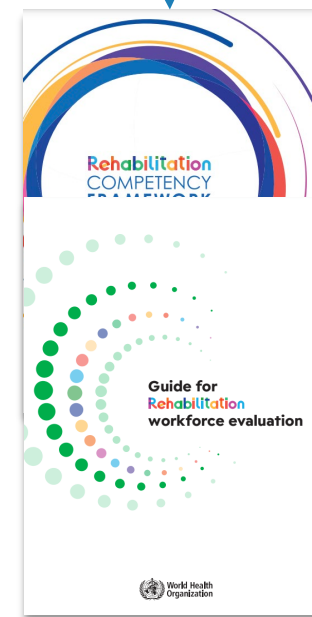
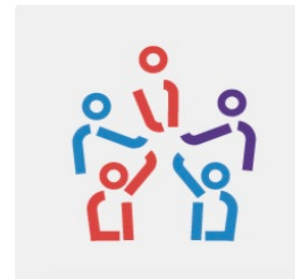
Information systems



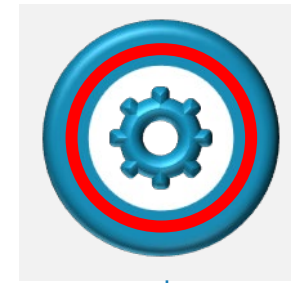
Financing



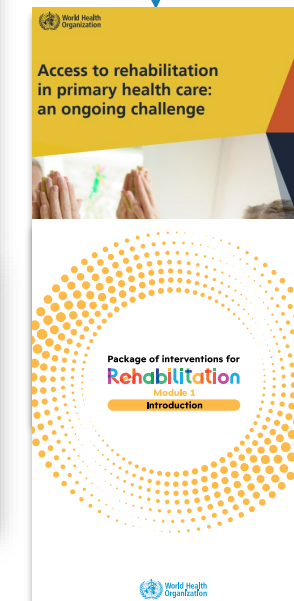
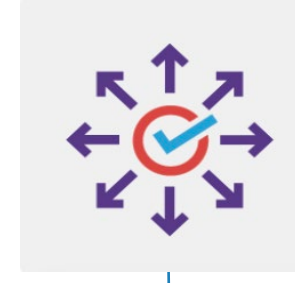
Workforce



Assistive Technology



Service delivery



HEALTH EMERGENCIES programme





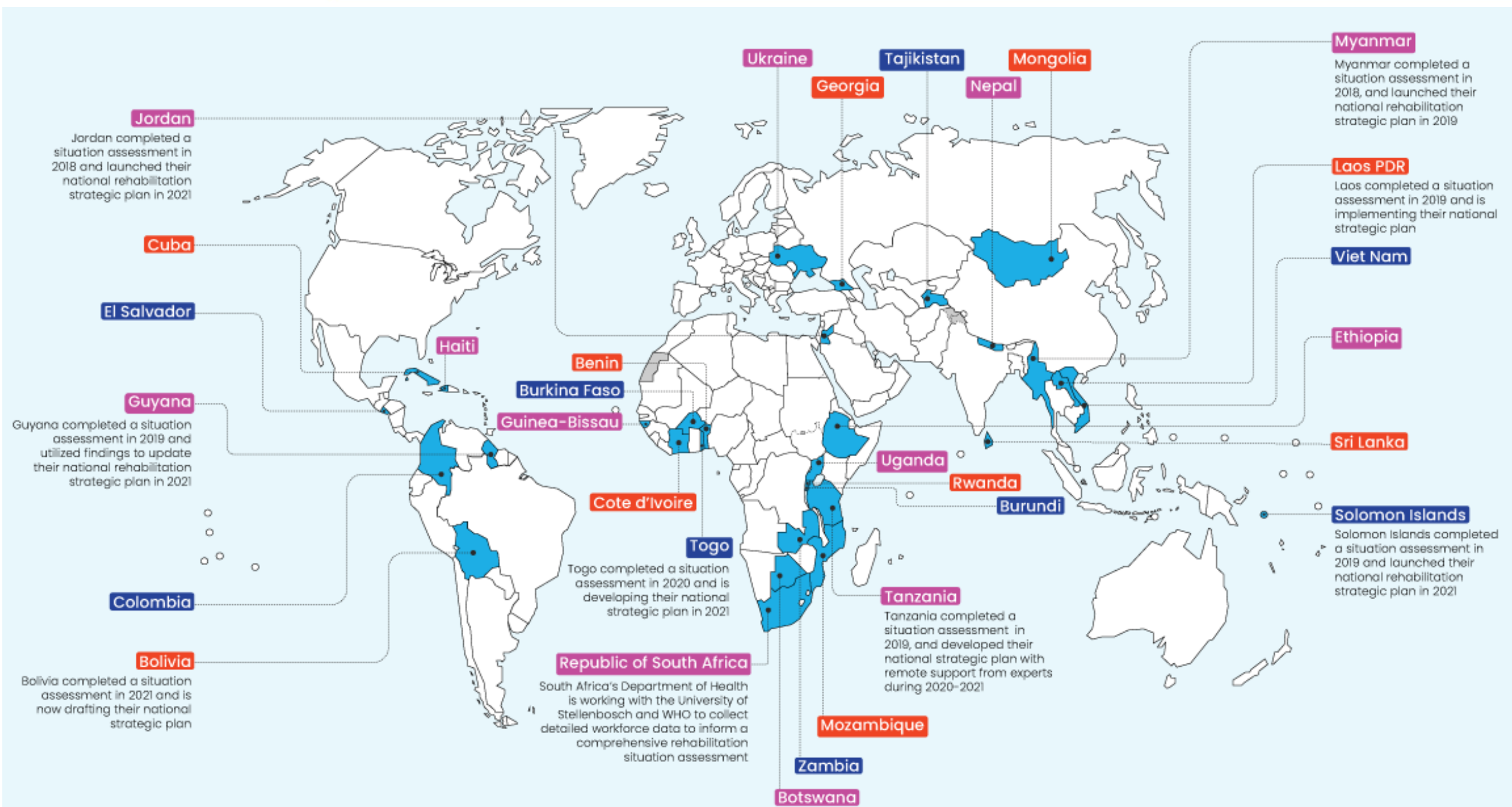
PACKAGE OF INTERVENTIONS FOR

Rehabilitation



Stakeholders' cohesion by ...

- Producing evidence
- Developing normative tools for health systems strengthening
- Supporting countries



3

Champions

Champions

- Individuals (including users)
- Institutions
- Organizations
- Member states



Argentina
Australia
Brazil
China
Colombia
Croatia
Ecuador
Eswatini
Ethiopia
Hungary
Ireland
Israel
Japan
Kenya
Morocco
Paraguay
Peru
Romania
Rwanda
Slovakia
USA

1. Conceptual Clarity
2. Stakeholder's cohesion
3. Champions



World Health
Organization

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Strengthening rehabilitation in health systems

The Seventy-sixth World Health Assembly,

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WHA 176.6

Urges...

Invites...

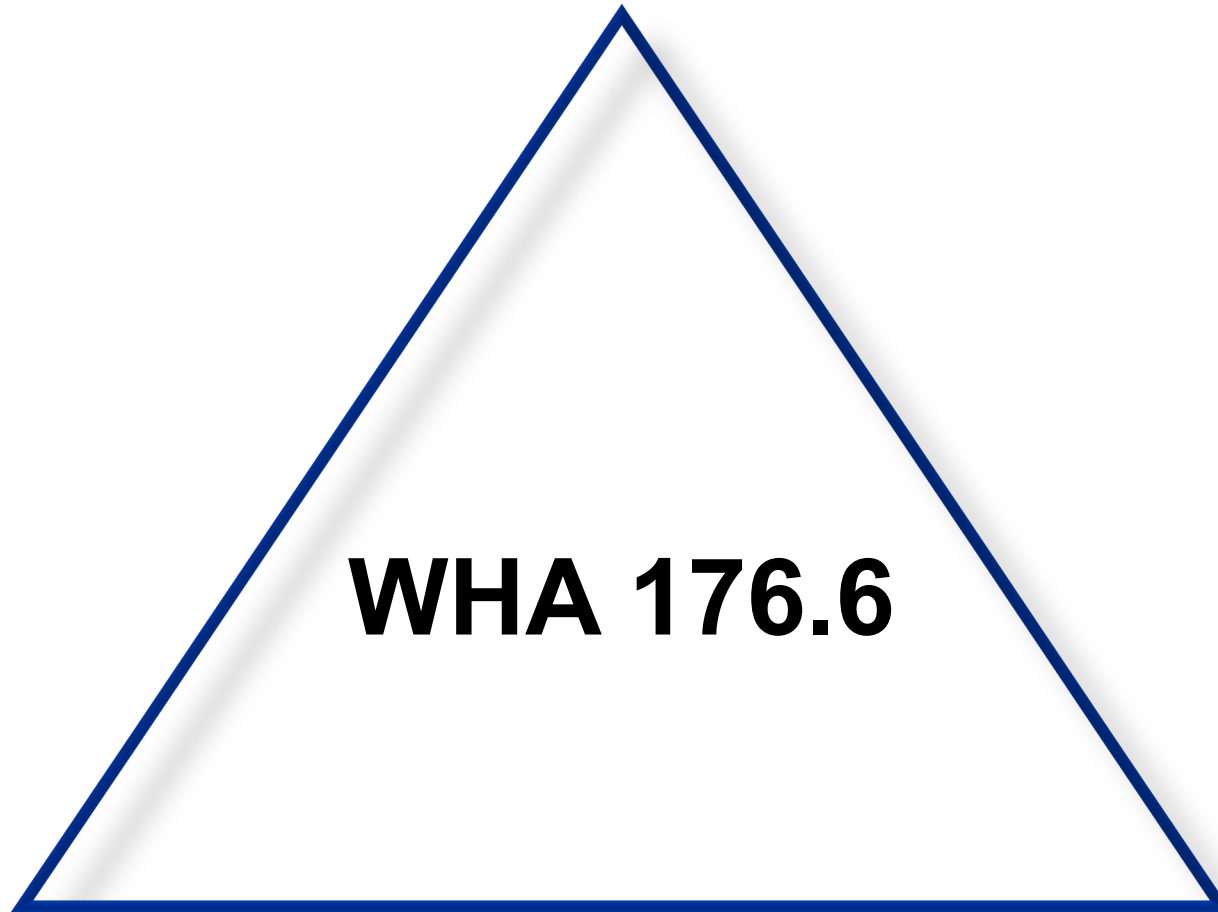
Requests...

WHO
Director-General

WHA 176.6

Member states

**Civil
society**



Noting the Rehabilitation 2030 Initiative, which acknowledges the profound unmet need of rehabilitation, emphasizes the need for equitable access to quality rehabilitation and identifies priority actions to strengthen rehabilitation in health systems,

1. URGES Member States:¹

(1) to raise awareness of and build national commitment for rehabilitation, including for assistive technology, and strengthen planning for rehabilitation, including its integration into national health plans and policies, as appropriate, while promoting interministerial and intersectoral work and meaningful participation of rehabilitation users, particularly persons with disabilities, older persons, persons in need of long-term care, community members, and community-based and civil society organizations at all stages of planning and delivery;

Financing

Expansion of services at all levels of care

Provision of high-quality interventions

Multidisciplinary rehabilitation skills

- (2) to incorporate appropriate ways to strengthen financing mechanisms for rehabilitation services and the provision of technical assistance, including by incorporating rehabilitation into packages of essential care where necessary;
- (3) to expand rehabilitation to all levels of health, from primary to tertiary, and to ensure the availability and affordability of quality and timely rehabilitation services, accessible and usable for persons with disabilities, and to develop community-based rehabilitation strategies, which will allow rehabilitation to reach underserved rural, remote and hard-to-reach areas, while implementing person centred strategies and participatory, specialized and differentiated intensive rehabilitation services to meet the requirements of persons with complex rehabilitation needs;
- (4) to ensure the integrated and coordinated provision of high-quality, affordable, accessible, gender-sensitive, appropriate and evidence-based interventions for rehabilitation along the continuum of care, including strengthening referral systems and the adaptation, provision and servicing of assistive technology related to rehabilitation, including after rehabilitation, and promoting inclusive, barrier-free environments;
- (5) to develop strong multidisciplinary rehabilitation skills suitable to the country context, including in all relevant health workers; to strengthen capacity for analysis and prognosis of workforce shortages as well as to promote the development of initial and continuous training for professionals and staff working in rehabilitation services; and to recognize and respond to different types of rehabilitation needs, such as needs related to physical, mental, social and vocational functioning, including the integration of rehabilitation in early training of health professionals, so that rehabilitation needs can be identified at all levels of care;

Information systems

(6) to enhance health information systems to collect information relevant to rehabilitation, including system-level rehabilitation data, and information on functioning, utilizing the International Classification of Functioning, Disability and Health, ensuring data disaggregation by sex, age, disability and any other context-relevant factor, and compliance with data protection legislation, for a robust monitoring of rehabilitation outcomes and coverage;

Quality research

(7) to promote high-quality rehabilitation research, including health policy and systems research;

Rehabilitation in emergencies

(8) to ensure timely integration of rehabilitation into emergency preparedness and response, including emergency medical teams;

Assistive technology

(9) to urge public and private stakeholders to stimulate investment in the development of available, affordable and usable assistive technology and support for implementation research and innovation for efficient delivery and equitable access with a view to maximizing impact and cost effectiveness;

2. INVITES international organizations and other relevant stakeholders, including intergovernmental and nongovernmental organizations and organizations of persons with disabilities, private sector companies and academia:

(1) to support Member States,¹ as appropriate, in their national efforts to implement the actions in the Rehabilitation 2030 Initiative and to strengthen advocacy for rehabilitation, as well as support and contribute to the WHO-hosted World Rehabilitation Alliance, a multistakeholder initiative to advocate for health system strengthening for rehabilitation;

(2) to harness and invest in research and innovation in relation to rehabilitation, inclusive of available, affordable and usable assistive technology, including the development of new technologies, and support Member States, as appropriate, in collecting health policy and system research to ensure future evidence-based rehabilitation policies and practices;

Invitation

Study it

https://apps.who.int/gb/ebwha/pdf_files/WHA76/A76_R6-en.pdf

- Functioning
- Economics
- Health services
- Research
- Advocacy

Challenge

**Let it inform your deliberations and
outcome document**

*The National
Academies of* | SCIENCES
ENGINEERING
MEDICINE

***“To provide independent, objective advice to inform policy with evidence,
spark progress and innovation, and confront challenging issues for the benefit of society.”***

Impactful



Thank you

