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I. PLAN OF ACTION ON DISABILITIES AND REHABILITATION: MIDTERM REVIEW

Background

1. The purpose of this document is to inform the Governing Bodies of the Pan American Health Organization (PAHO) about progress in the implementation of the *Plan of Action on Disabilities and Rehabilitation*, approved in October 2014 (Document CD53/7, Rev. 1 and Resolution CD53.R12) (1, 2). This Plan lays the foundation for technical cooperation in the Region to address the issue of disabilities and rehabilitation, in line with the *WHO Global Disability Action Plan 2014-2021: Better health for all people with disabilities* and the United Nations Convention on the Rights of Persons with Disabilities (3, 4). Other supporting instruments include the resolutions and technical reports of PAHO/WHO, as well as the Inter-American Convention on the Elimination of all Forms of Discrimination against Persons with Disabilities (5).

Update on Progress Achieved

2. The countries of the Region have made great progress toward meeting the objectives of Strategic Lines of Action 1 and 2, strengthening the rehabilitation component of the health care model and its linkage with primary care. Moreover, they have promoted the development of inclusive health programs to facilitate the access of persons with disabilities to all health services and improve their quality of life. In Strategic Line 3, great strides have been made in including disability data in health information systems, especially through the use of the International Classification of Functioning, Disability, and Health, which facilitates decision-making to address the real life conditions and health needs of persons with disabilities.

3. The data on the Member States (see Table below) were obtained from survey reports, epidemiological yearbooks, and ministry of health websites. These instruments, together with reports from the technical missions of the Pan American Sanitary Bureau (PASB) staff in charge are the main references used in the preparation of this report.

<i>Strategic Line of Action 1: Promote equity within the framework of the health policies, plans, and legislation on disability to improve governance</i>		
Objective	Indicator, baseline, and target	Status
1.1	1.1.1 Number of countries that have implemented national disability and rehabilitation plans consistent with regional and global plans and the Convention on the Rights of Persons with Disabilities (CRPD) and other related international standards. Baseline 2013: 6 Target 2019: 14	As of 2016, 13 countries in the Region had specific national plans on disability and rehabilitation in the health sector that were consistent with the PAHO and WHO plans of action and other international standards such as the CRPD (6, 7).
1.2	1.2.1 Number of countries with specific legislation on disability consistent with international human rights instruments and the technical guidelines of PAHO/WHO. Baseline 2013: 6 Target 2019: 16	As of 2016, 22 countries in the Region had specific legislation on disability consistent with international human rights instruments (6, 7).
1.3	1.3.1 Number of countries with the disability component in their disaster and emergency risk management plans. Baseline 2013: 1 Target 2019: 9	As of 2016, eight countries in the Region had specific disaster and emergency risk management plans that address the needs of persons with disabilities. Furthermore, six countries mention care for persons with disabilities in the activities of their disaster and emergency risk management programs (8).

<i>Strategic Line of Action 2: Strengthen the health sector's habilitation and rehabilitation services network, which includes the provision of assistive technology and community-based rehabilitation</i>		
Objective	Indicator, baseline, and target	Status
2.1	2.1.1 Number of countries that have attained at least 12% access to habilitation and rehabilitation services and social services for persons with disabilities. Baseline 2013: 0 Target 2019: 16	As of 2016, only one country had reported attaining this indicator. Work is currently under way with five more countries to evaluate access to habilitation and rehabilitation services (9, 10).

Strategic Line of Action 2: Strengthen the health sector's habilitation and rehabilitation services network, which includes the provision of assistive technology and community-based rehabilitation		
Objective	Indicator, baseline, and target	Status
	<p>2.1.2 Percentage of countries that include the Community-based Rehabilitation Strategy (CBR) in national rehabilitation programs in accordance with the PAHO/WHO matrix.</p> <p>Baseline 2013: 3 Target 2019: 19</p>	<p>As of 2016, CBR had been included in the national rehabilitation plans of 12 countries in the Region (23% of the total 52 countries and territories). Three more countries had begun planning to include this strategy in their national rehabilitation programs (10-14).</p>
	<p>2.1.3 Percentage of countries that include assistive technology devices for persons with disabilities as part of their service delivery systems.</p> <p>Baseline 2013: 6 Target 2019: 20</p>	<p>As of 2016, 14 countries in the Region (26% of the total 52 countries and territories) had explicitly included assistive technology devices for persons with disabilities who need them under their national programs for care to persons with disabilities (10-14).</p>
2.2	<p>2.2.1 Number of countries that have formulated or updated habilitation and rehabilitation regulations.</p> <p>Baseline 2013: 3 Target 2019: 16</p>	<p>As of 2016, 14 countries in the Region had formulated or updated their regulations and habilitation/rehabilitation service networks in the health sector. Three more countries are in the process of planning their rehabilitation service network (10-14).</p>

Strategic Line of Action 3: Promote the production and analysis of data on disabilities and support research		
Objective	Indicator, baseline, and target	Status
3.1	<p>3.1.1 Percentage of countries that have included the International Classification of Functioning, Disability, and Health (ICF) in their disability certification systems.</p> <p>Baseline 2013: 6 Target 2019: 19</p>	<p>As of 2016, 11 countries (21% of the total 52 countries and territories) had included use of the ICF in disability certification (10, 15, 16).</p>

<i>Strategic Line of Action 3: Promote the production and analysis of data on disabilities and support research</i>		
Objective	Indicator, baseline, and target	Status
	<p>3.1.2 Number of countries whose national surveillance systems incorporate the set of indicators used by the International Classification of Functioning, Disability, and Health (ICF).</p> <p>Baseline 2013: 6 Target 2019: 18</p>	<p>As of 2016, 11 countries had incorporated use of indicators used by the ICF in their national surveillance systems (10, 15, 16).</p>
3.2	<p>3.2.1 Number of countries that systematically include disability data in the health information system, disaggregated by age, sex, and ethnic origin (type of disability, degree of severity, origin, or cause).</p> <p>Baseline 2013: 2 Target 2019: 16</p>	<p>As of 2016, 10 countries in the Region had included disability data in their health information systems. (10, 15, 16).</p>
3.3	<p>3.3.1 Number of countries that subsidize, at least two research projects per year on disability, habilitation, and rehabilitation.</p> <p>Baseline 2013: 0 Target 2019: 14</p>	<p>As of 2016, 6 countries in the Region had financing programs that prioritized the issue of disability and rehabilitation (10.)</p>

Action Necessary to Improve the Situation

- a) Encourage joint efforts between the PASB and the Member States to develop and strengthen habilitation and rehabilitation services, human resources, and the services necessary for bridging access gaps and improving the quality of care.
- b) Expand decentralized habilitation and rehabilitation services to ensure geographic coverage linked to the health services network, especially their coordination with primary health care.
- c) Support the adoption and use of the International Classification of Functioning, Disability, and Health (ICF) as a tool for strengthening information and surveillance systems, including functioning and disability data in health information systems, improving epidemiological information, and promoting research.
- d) Promote resource allocation consistent with needs identified and the targets set.

Action by the Pan American Sanitary Conference

4. The Conference is requested to take note of this report and formulate the recommendations it deems pertinent.

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