

**12th session of the Conference of States Parties to the  
Convention on the Rights of Persons with Disabilities  
WHO statement**

Excellencies, distinguished delegates, ladies and gentlemen,

I would like to start by reiterating WHO's commitment towards implementation of the Convention on the Rights of Persons with Disabilities.

There simply is no universal health coverage without ensuring access to health services for all, including people with disabilities.

Today, over a billion people – about 15% of the world's population – have some form of disability.

In general half of people with disabilities cannot afford health care.

WHO's stated vision is that all individuals, irrespective of their health condition, impairment or disability status, receive the health services they need without suffering financial hardship.

WHO's work on disability is undertaken in accordance with the *WHO Global disability action plan 2014–2021* which was adopted by the World Health Assembly in 2014.

As such WHO is working to ensure that people with disability benefit from universal health coverage to achieve implementation of the Convention's Article 25 on Health.

Many efforts led by WHO aim to remove barriers to health services.

Firstly, WHO has developed and is rolling out guidance on strengthening the health system to provide rehabilitation services. In addition, work is also underway to develop a package of rehabilitation interventions to facilitate the inclusion of

rehabilitation in Universal Health Coverage. WHO is currently supporting 14 Member States to implement the package.

Secondly, following the publication of the first WHO List of priority assistive products in 2016, WHO is developing technical tools to support Member States to implement national priority lists. This includes, specifications to guide procurement of priority assistive products (in collaboration with UNICEF), financing options, and training modules to support access to basic assistive products at a community-level.

WHO is looking at how to tackle discrimination in health care settings and developing organization-wide standards of care for the provision of non-discriminatory health care based on the best available evidence. Work is also underway to provide tools and promote access to health services for persons with disabilities within several regional offices.

In addition, WHO, together with the World Bank, is helping countries to implement the Model Disability Survey, with the aim of strengthening statistical systems to ensure quality data on disability are collected and used effectively to inform policy and practice.

Finally, WHO also leads QualityRights, an initiative to translate the CRPD into practice by reforming mental health services and improving the quality of care available for people with mental and psychosocial disabilities. This initiative is ongoing and already demonstrating impact in more than 25 countries. WHO is developing best practice guidance that provides evidence for community-based mental health services that operate without coercion, respond to people's needs, support recovery and promote autonomy and inclusion, in line with the Convention.

In closing, there is much work to be done, but much progress continues to be made. It is an honour and a privilege to work with all of you towards full implementation of the Convention to ensure that we leave no one behind.

Thank you.