

# Rehabilitation in the Americas: updates from PAHO/WHO

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# Objectives

- To explore patterns of health in the Region and implications for rehabilitation.
- To share progress on the rehabilitation components of the PAHO Regional Plan of Action on Disability and Rehabilitation.
- To update participants on the implications for the Region of Rehabilitation 2030 and the Global Cooperation on Assistive Technology.
- To identify next steps and opportunities for strengthening rehabilitation in the Region.



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# Regional context and need for rehabilitation

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Globally...

ageing

NCD

Injuries

Infectious  
diseases



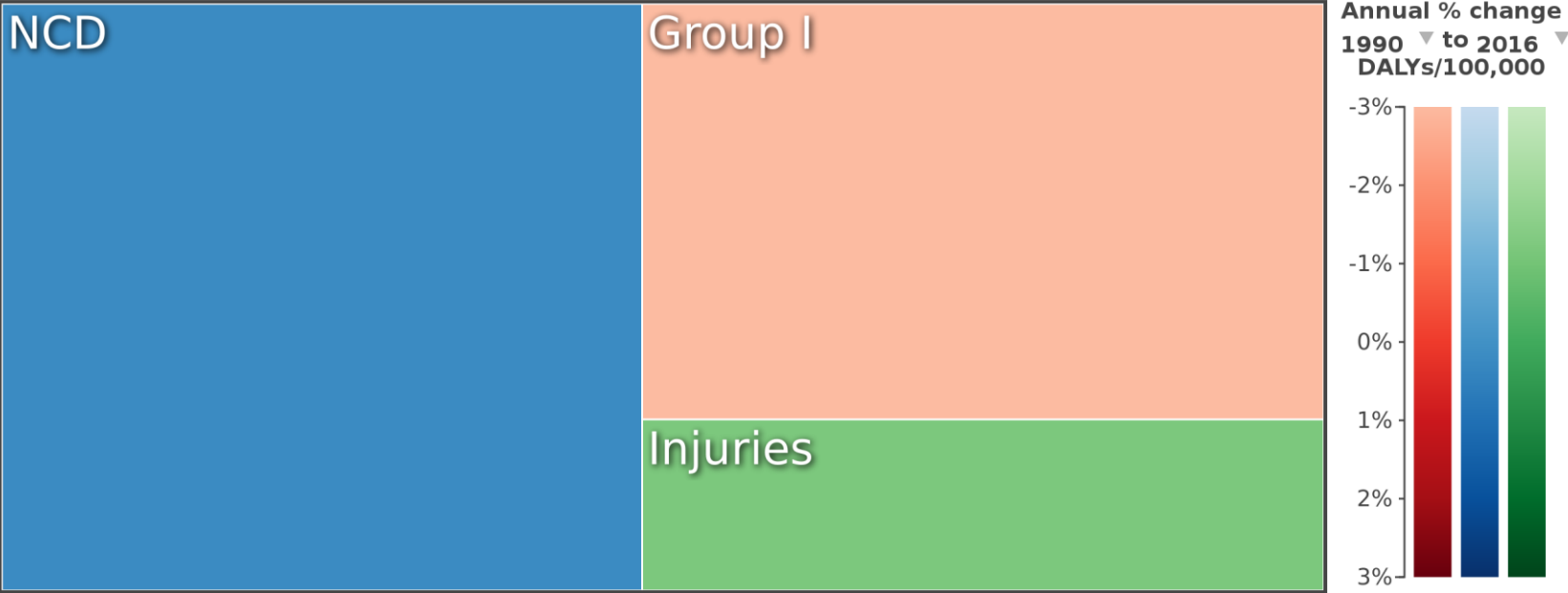
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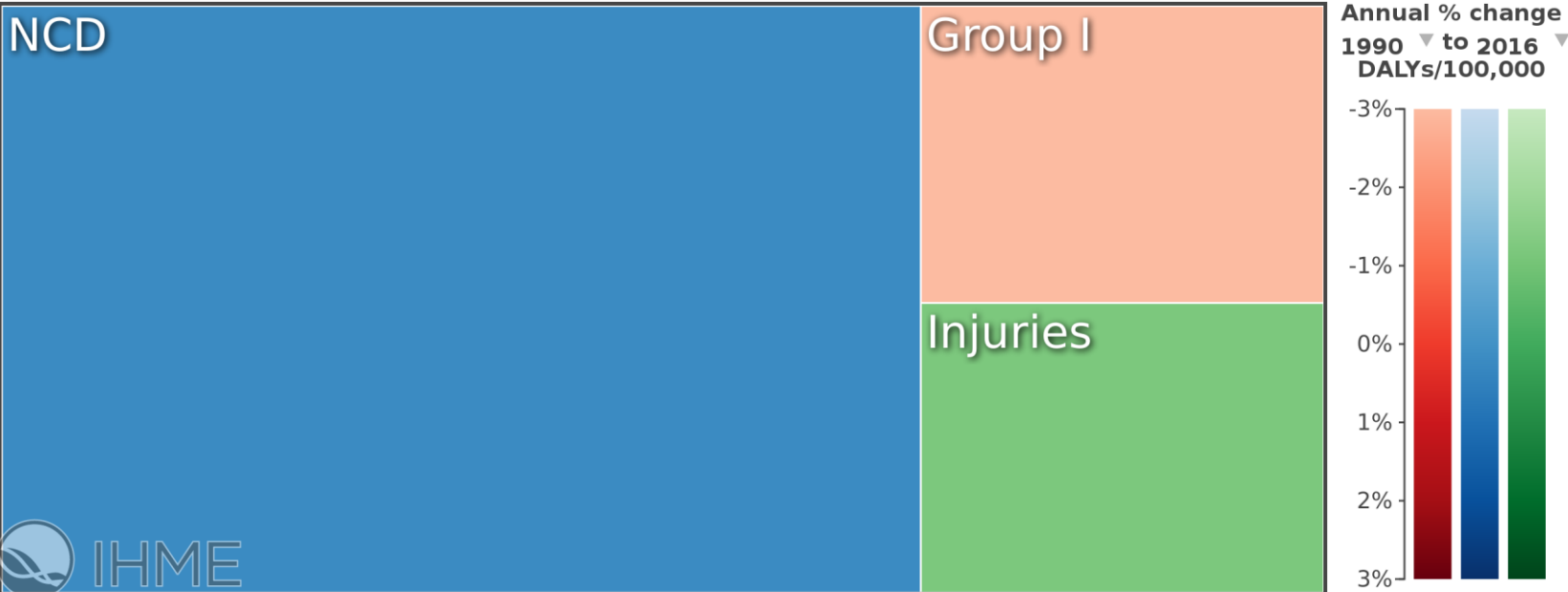
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Latin America and Caribbean  
Both sexes, All ages, 1990, DALYs



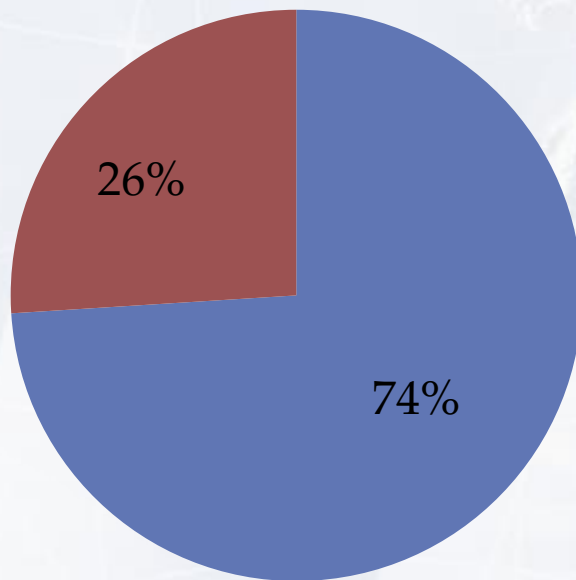
Latin America and Caribbean  
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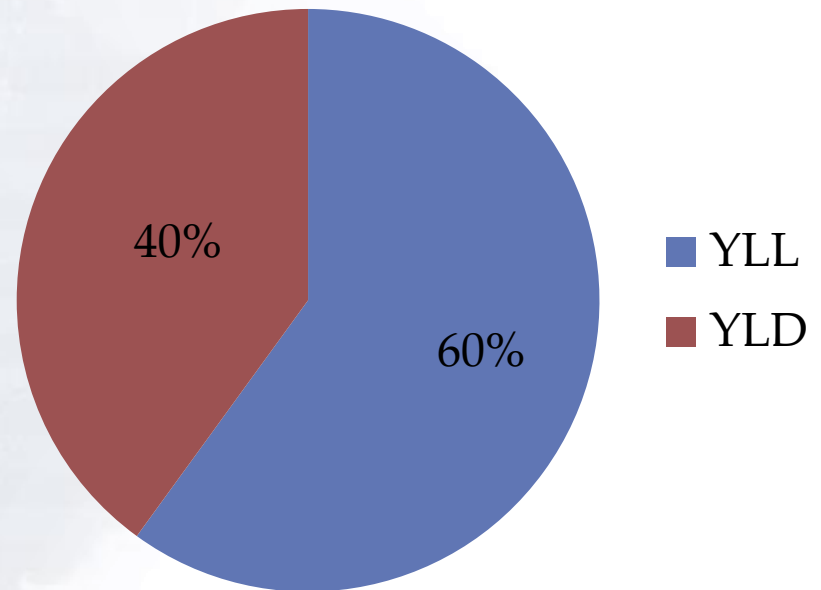
# Shifting health pattern

DALY breakdown in Latin America and the Caribbean

1990



2016



Data taken from <http://ghdx.healthdata.org/gbd-results-tool>



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# Shifting health pattern

DALY breakdown in Latin America and the Caribbean

With an increase in years lived with disability, health services such as rehabilitation will be increasingly needed across the region.

Data taken from <http://ghdx.healthdata.org/gbd-results-tool>



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# PAHO/WHO Strategic Plan 2014-19

1. Communicable Diseases
2. Non-communicable diseases
3. Determinants of health and promoting health across the life course
4. Health Systems
5. Preparedness, surveillance and response
6. Corporate services/enabling functions





# PAHO/WHO Strategic Plan 2014-19

## Rehabilitation relevant:

2.4: “increased access to social and health services for people with disabilities, including prevention”.

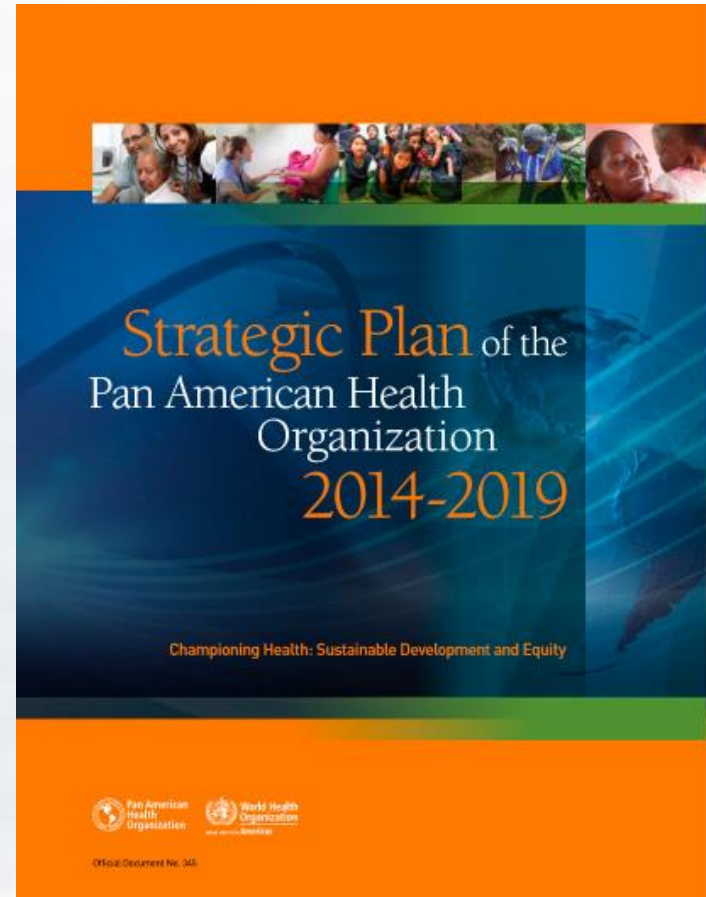
3.2: “increased access to interventions for older adults to maintain an independent life”

4.2: “Increased access to people-centered, integrated, quality health services”

4.3 “Improved access to and rational use of safe, effective and quality medicines, medical products and health technologies”

4.5: “Adequate availability of a competent, culturally appropriate, well regulated, well distributed, and fairly treated health workforce”

5.5: “All countries adequately respond to threats and emergencies with public health consequences”



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# Universal Health Coverage

- Equitable access to comprehensive services:
  - Health promotion,
  - Prevention,
  - Treatment,
  - **Rehabilitation** and
  - palliation

**according to need**

- With protection from **financial hardship**
- Currently, no proposed indicator will represent whether rehabilitation is included in UHC.



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# Regional Plan of Action on Disability and Rehabilitation 2014-19

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Overview, progress and indicators relating to rehabilitation



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# About the plan...

*Objective 1:* Promote equity within the framework of the health policies, plans, and legislation on disability to improve governance

*Objective 2:* Strengthen the health sector's habilitation and rehabilitation services network, which includes the provision of assistive technology and community-based rehabilitation.

*Objective 3:* Promote the production and analysis of data on disabilities and support network.



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# Targets and Indicators

## Objective 2.1. Increase access to social and health services for persons with disabilities.

- 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. Mid-term: 1)
- Percentage of countries that include the Community-based Rehabilitation Strategy (CBR) in national rehabilitation programs in accordance with the PAHO/WHO matrix. (Baseline 2013: 3. Target 2019: 19. Mid-term: 12)
- Percentage of countries that include assistive technology devices for persons with disabilities as part of their service delivery systems. (Baseline 2013: 6. Target 2019: 20. Mid-term: 14)

## Objective 2.2. Formulate habilitation and rehabilitation regulations.

- Number of countries that have formulated or updated habilitation and rehabilitation regulations. \* (Baseline 2013: 3. Target 2019: 16. Mid-term: 14)



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# Rehabilitation situation in the Americas

- Little known and documented. Wide variation across Region
- Legislative:
  - 32 of 35 countries have ratified CRPD
  - Many also have a disability law which includes rehab.
  - Few national action plans on rehabilitation
- Leadership:
  - Often fragmented with various ministries/stakeholders
- Workforce
  - Rehabilitation professionals practicing in most countries
  - Differing regulations.



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# (cont)

- Data and research
  - Rehab data rarely collected by health sector
  - Research capacity varied (though extremely high capacity in some countries)
- Financing
  - Variable. NGO and private sector in many countries.
  - Some countries have insurance schemes
  - Most aiming for UHC



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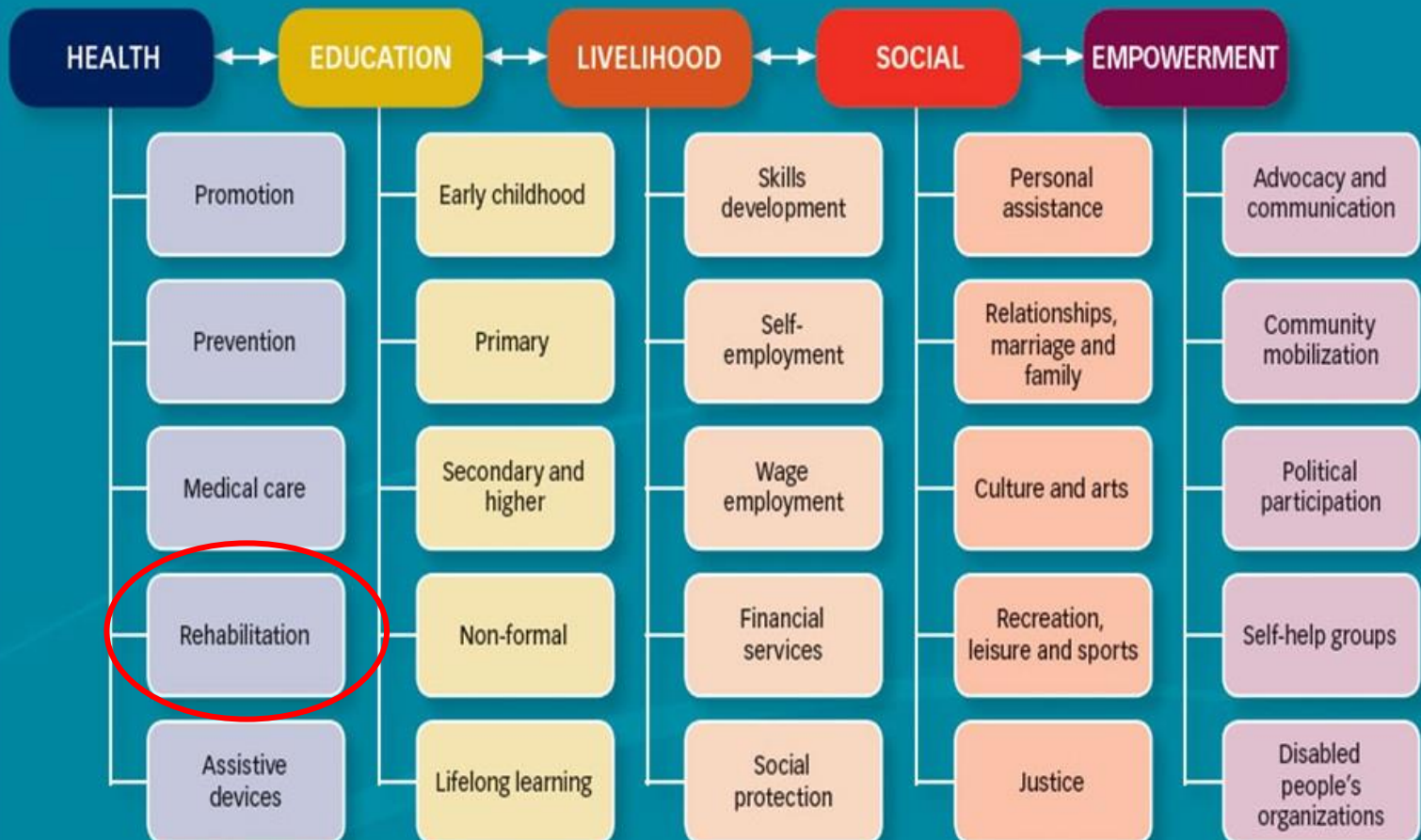


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# Community Based Rehabilitation...

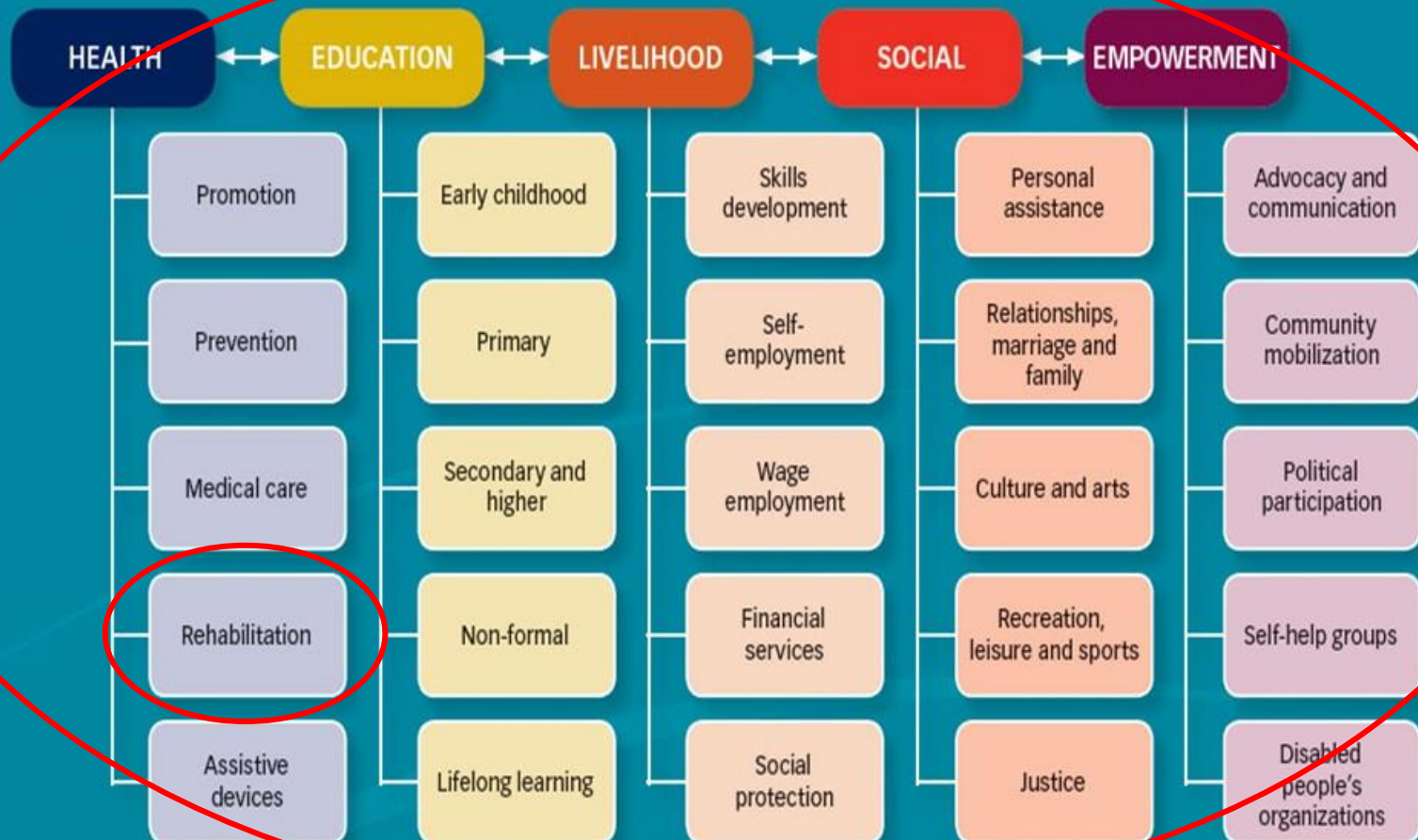
## CBR MATRIX





# To Community Based Inclusive Development.

## CBR MATRIX



# Partnerships and current activities

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# ASHA collaboration

- Strengthening speech therapy and hearing services.
  - Guyana, Honduras, Paraguay, El Salvador
  - To start in: Belize.
  - 2 new countries being explored for 2019.
- Plan for a 2020 regional report on communication disorders and services



**AMERICAN  
SPEECH-LANGUAGE-  
HEARING  
ASSOCIATION**



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# Collaborating Centres

INR, Mexico

IMREA, Sao Paulo



INSTITUTO DE  
MEDICINA FÍSICA E  
REABILITAÇÃO  
HCFMUSP Rede Lucy Montoro



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# Collaborative actions

- PAHO's main partner in countries is with Ministry of health
- Due to multi-sectoral history and nature of rehab, other Ministries also involved (social welfare, CONADIS etc)
- Other UN and international agencies (UNICEF, OAS)
- Non Governmental Organizations (international and local) and disabled people's organizations.



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# Rehabilitation 2030

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# What is Rehabilitation 2030?

- Feb 2017
- Meeting of stakeholders incl member states, international organizations, non governmental orgs and others.



*“Strengthening the health system to provide integrated rehabilitation services”*



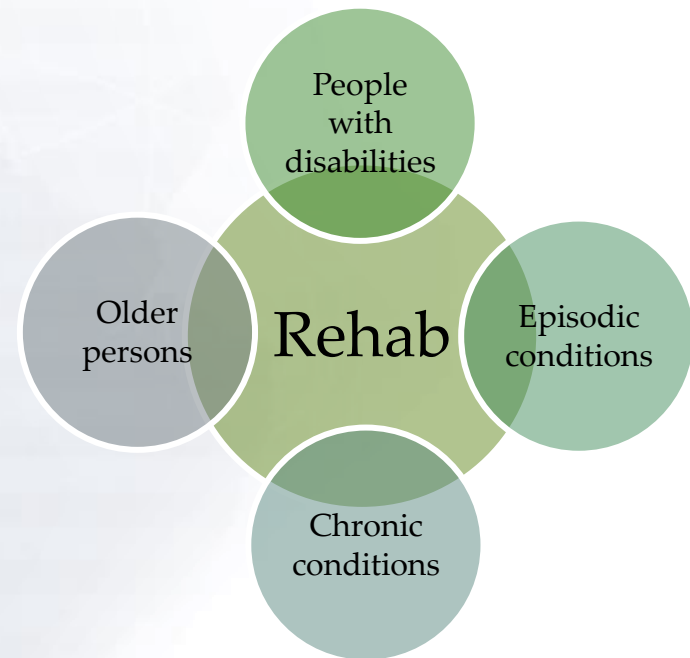
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# Rehabilitation for all



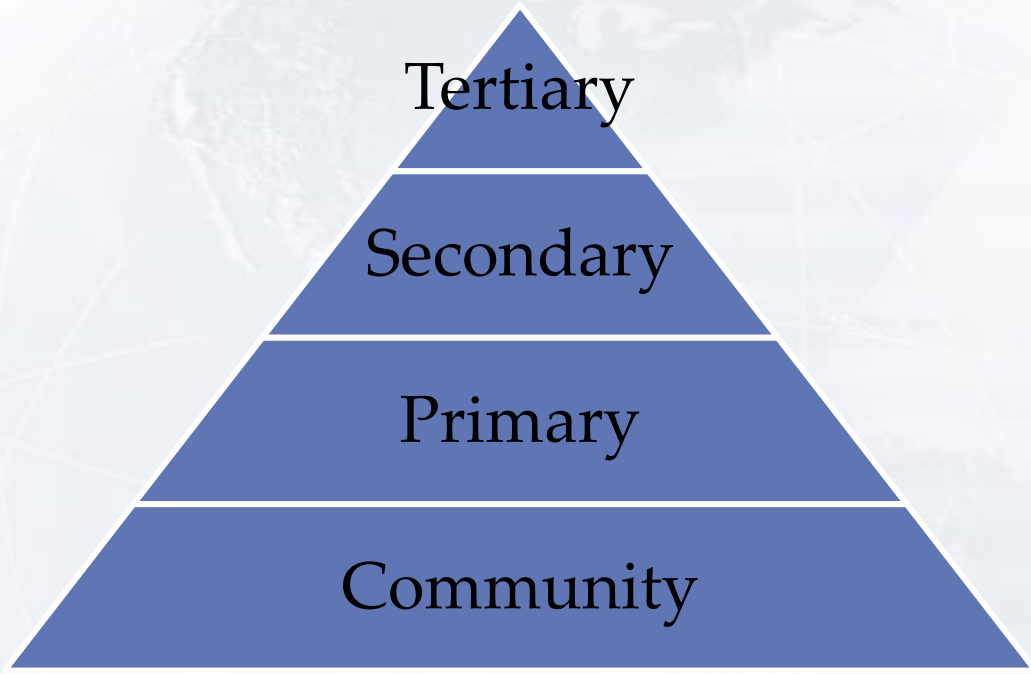
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Ministry of Health

Integrate rehabilitation into the health system

The block features a white icon of a classical building with a flag on top, set against an orange background. Below the icon is the text 'Ministry of Health' and further down, 'Integrate rehabilitation into the health system'.

Along the continuum of care



Acute

Post-acute

Long-term



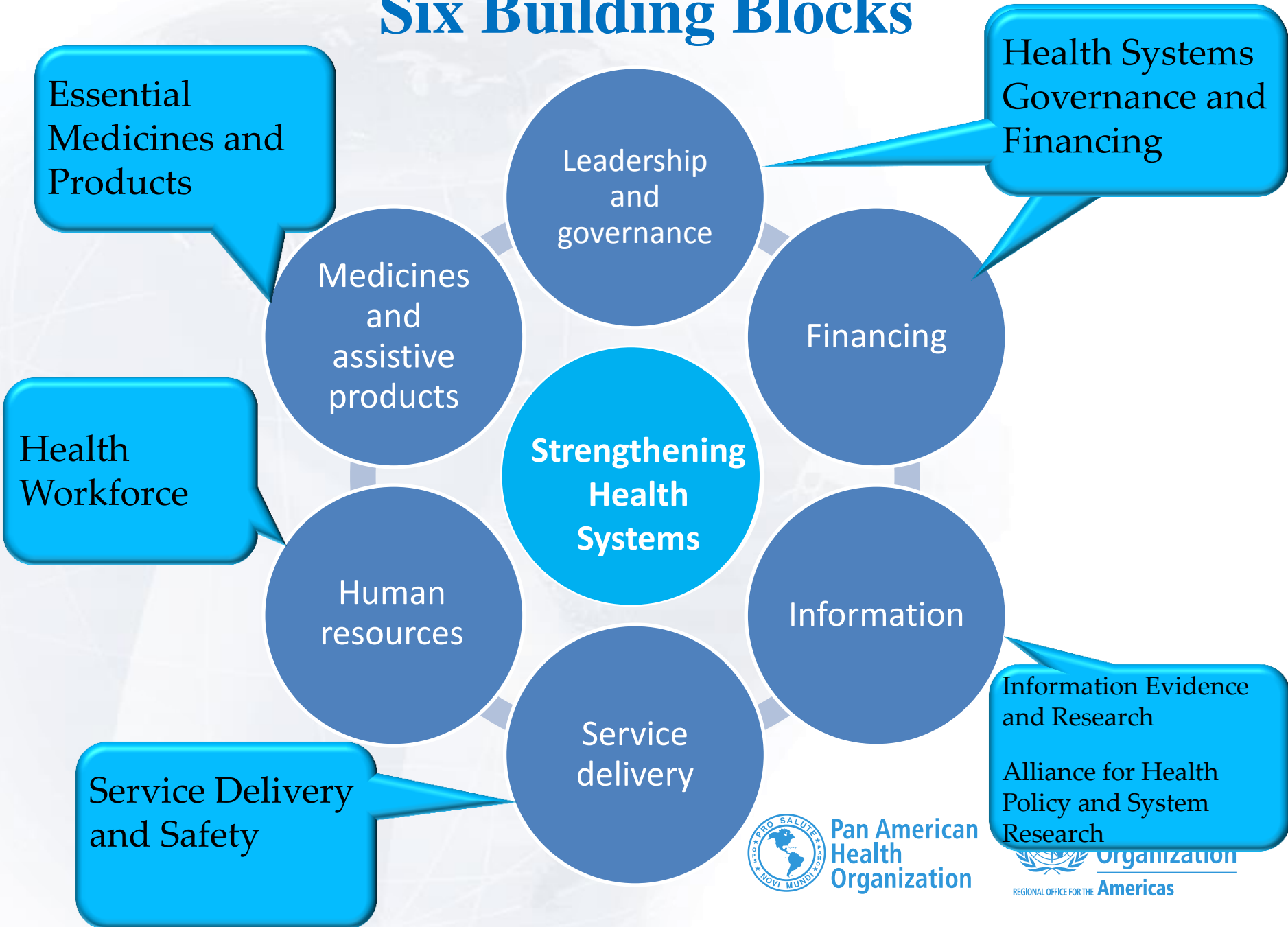
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# Six Building Blocks



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# REHABILITATION in health systems

[http://www.who.int/disabilities/  
rehabilitation\\_health\\_systems/en/](http://www.who.int/disabilities/rehabilitation_health_systems/en/)



Ministry of Health

Integrate rehabilitation into the health system



Integrate rehabilitation services into and between primary, secondary and tertiary levels of health systems



Ensure the availability of a multi-disciplinary rehabilitation workforce



Ensure both community and hospital rehabilitation services are available



Ensure hospitals include specialized rehabilitation units for inpatients with complex needs



Implement financing and procurement policies that ensure assistive products are available to everyone who needs them



Ensure adequate training is offered to users to whom assistive products are provided



Ensure financial resources are allocated to rehabilitation services



Where health insurance exists or is to become available, ensure rehabilitation services are covered



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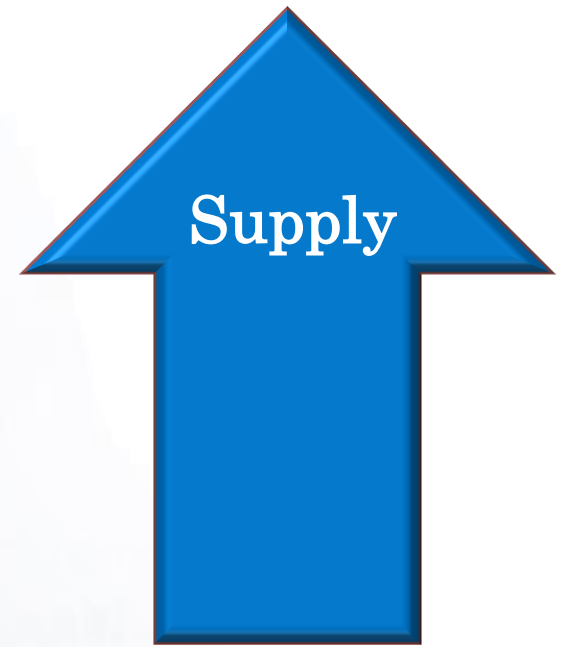
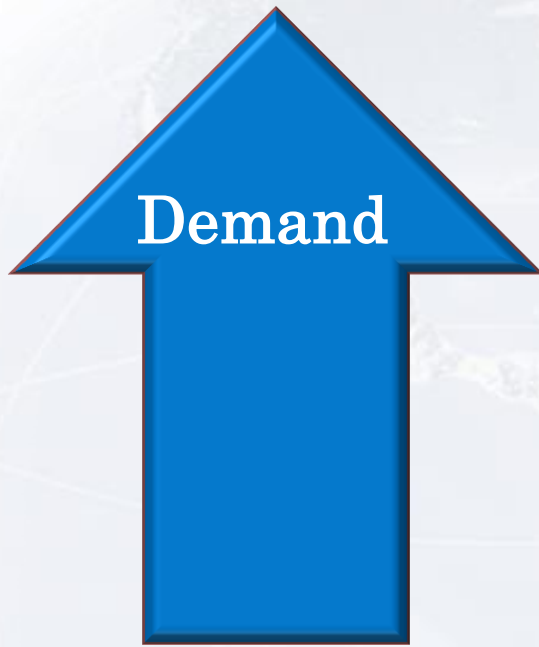
# REHABILITATION

— 2030 —

a call for action

- 1 Creating strong leadership and political support for rehabilitation at sub-national, national and global levels.
- 2 Strengthening rehabilitation planning and implementation at national and sub-national levels, including within emergency preparedness and response.
- 3 Improving integration of rehabilitation into the health sector and strengthening inter-sectoral links to effectively and efficiently meet population needs.
- 4 Incorporating rehabilitation in Universal Health Coverage.
- 5 Building comprehensive rehabilitation service delivery models to progressively achieve equitable access to quality services, including assistive products, for all the population, including those in rural and remote areas.
- 6 Developing a strong multidisciplinary rehabilitation workforce that is suitable for country context, and promoting rehabilitation concepts across all health workforce education.
- 7 Expanding financing for rehabilitation through appropriate mechanisms.
- 8 Collecting information relevant to rehabilitation to enhance health information systems including system level rehabilitation data and information on functioning utilizing the International Classification of Functioning, Disability and Health (ICF).
- 9 Building research capacity and expanding the availability of robust evidence for rehabilitation.
- 10 Establishing and strengthening networks and partnerships in rehabilitation, particularly between low-, middle- and high-income countries.

# Dual Strategy



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# Specific Actions

## Advocacy

- Raising profile of rehabilitation and Rehabilitation 2030
  - Regional launches
- Generating evidence and data on demand and supply.
- Encouraging civil society engagement.
  - Rehabilitation Alliance

## Technical Capacity

- Support package on rehabilitation (see next)
- Core competency framework and minimum standards for health interventions.



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# SUPPORT PACKAGE ON REHABILITATION

## The Support Package on Rehabilitation – MANUAL

### FOUR-STEP PROCESS

1. Determine the situation
2. Develop a rehabilitation strategic plan
3. Develop a rehabilitation performance monitoring framework
4. Implement

### WHO TOOLS

Standard Assessment of Rehabilitation Systems (STARS)

Guidance for Rehabilitation Strategic Planning (GRASP)

Framework for Rehabilitation Monitoring and Evaluation (FRAME)

Action on Rehabilitation (ACTOR)



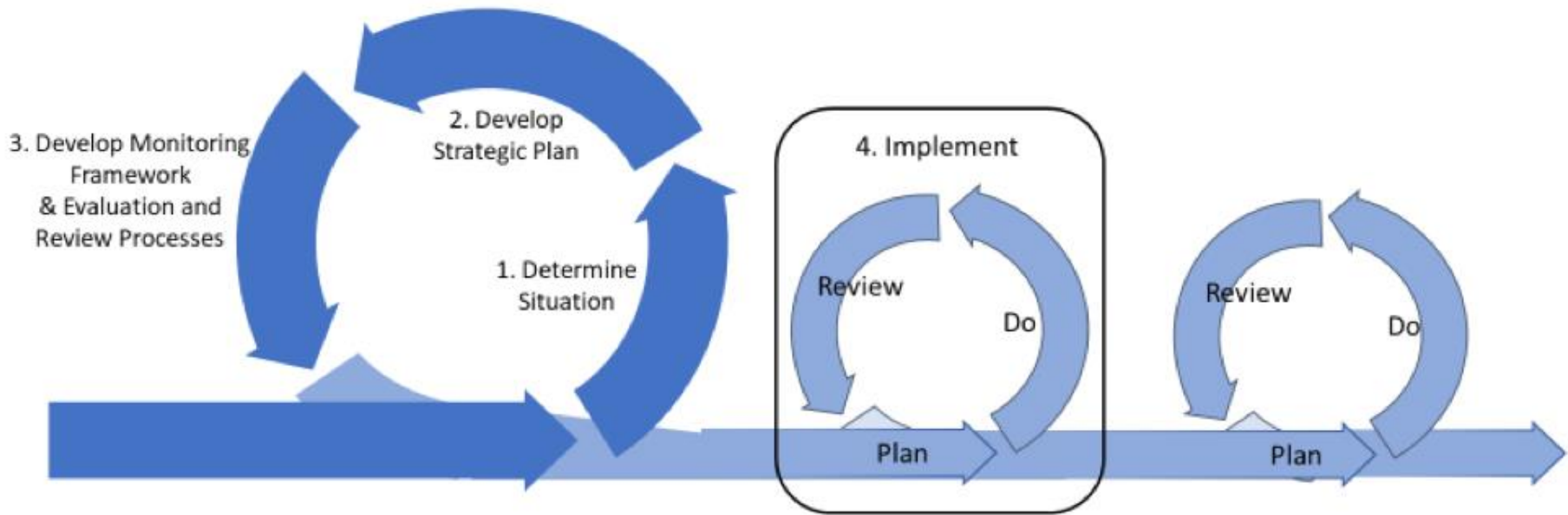
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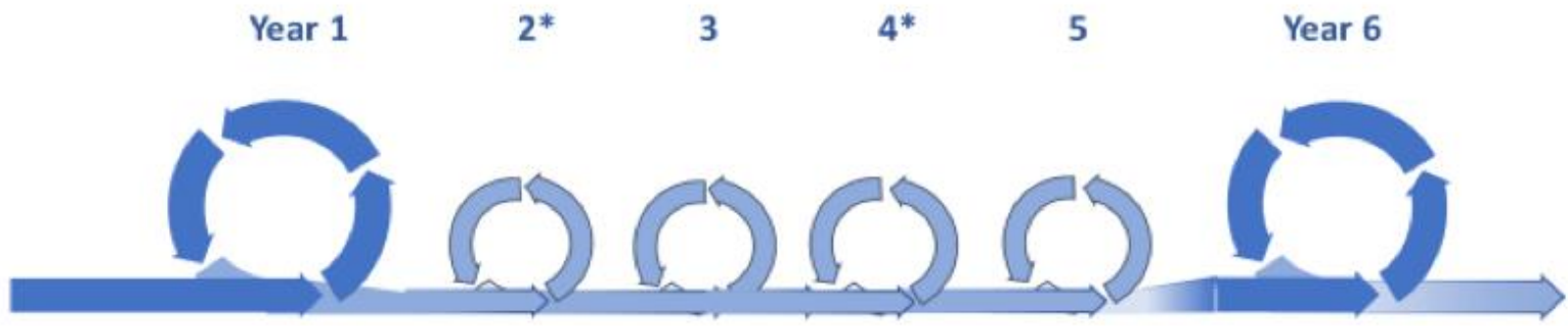




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\* Countries may operate on a 1 or 2 year planning cycle and the review process could be annual or bi-ennial.

# Rehabilitation 2030 in the Americas

## Meetings and expert workshops

- Leadership and governance
  - Nov 2017
- Research
  - Nov 2017
- Data and health information
  - Jan 2019, D.C.
- Assistive Tech
  - 2019
- Workforce, Service Delivery, Financing
  - TBD

## Support Package:

*Confirmed:*

Guyana – Now

Haiti - Nov

*Exploring:*

Bolivia

The Bahamas

Dominican Republic

Brazil



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# Assistive Technology

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# GATE

“To assist Member States to improve access to assistive technology as a part of Universal Health Coverage.”



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# 2018

- WHO Resolution
  - Countries commit to improving access to quality, affordable AT
  - Plan for a Global Status Report on AT
- Launch of AT Scale
  - DFID, USAID, WHO, UNICEF, CHAI and others
- Development of needs tools
- Development of training packages.



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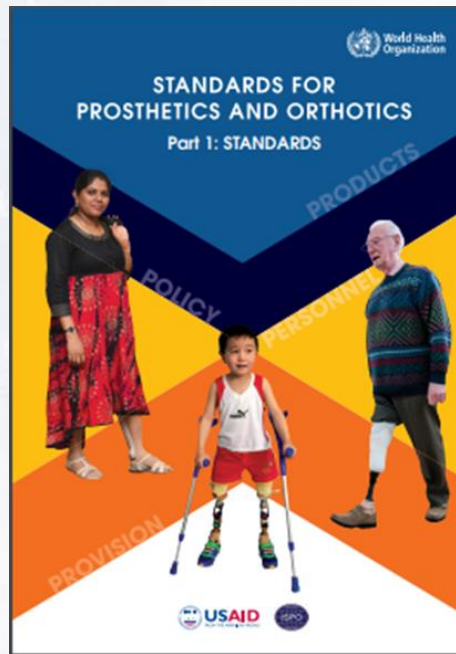
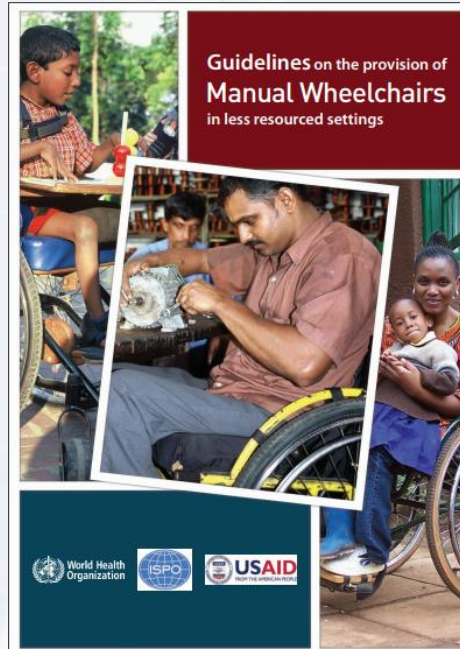


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# Tools and documents



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# Looking forward

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# Next 3 years...

## Research and evidence

- Health economics
  - 2018/19
- Regional report
  - 2019
- Regional report on communication disorders
  - 2020
- Assistive Technology

## Strategic planning

- PAHO action plan 2020-2025
  - Inclusive health & rehabilitation
- PAHO strategy 2020-2025
- Regional implications for CBR to CBID
- Assistive technology in the region



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# Challenges

- Only 7 countries designated disability and rehabilitation as a high priority
- Rehab remains largely disassociated from health services and UHC
- Need to promote consistent message (health sector ownership of the issue)



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# Opportunities

- Rehab Support Package: Guyana, Haiti, Bolivia, Dominican Republic, The Bahamas

Target: 20 STAR reports by end of 2020

- Continue thematic regional meetings
  - Health Information Systems and Assistive Technology in 2019
- Building focus psychosocial and sensory rehabilitation in Region
- Develop the PAO website section on rehabilitation.
  - Spanish, English and Portuguese documents
- Consult with key stakeholders through listening sessions for beyond 2019 action plan



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# Thank you

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