

Embedding rehabilitation in the WHO Fourteenth General Programme of Work, 2025–2028

As a group of organizations and academia working in the field of rehabilitation and assistive technology, we hereby provide some considerations in relation to the Consultation Document that outlines the principles, objectives, and framework of the World Health Organization’s Fourteenth General Programme of Work (2025-2028).

We call on Member States and the WHO Secretariat to build on

- the Resolution [WHA 76.6](#) “Strengthening rehabilitation in health systems”
 - the new [UN Political Declaration on Universal Health Coverage](#), and
 - on the Resolution [WHA 71.8](#) “Improving access to assistive technology”
- to scale-up efforts for advancing rehabilitation in the WHO programmatic work.

This requires investing in and strengthening WHO capacities and resources, at all levels, to support Member States in meeting the growing rehabilitation needs.

“A dramatically different world”¹ in which rehabilitation needs are rising!

The Consultation Document recognises “that the pace of key demographic, epidemiological, environmental, economic, technological and scientific changes has increased”.²

These changes result in higher rehabilitation needs. Indeed, it is estimated that 1 out of 3 people globally need rehabilitation.³ This number has increased by 63% from 1990 to 2019⁴ and will continue increasing in the years to come due to an ageing population and the increasing prevalence of chronic, non-communicable diseases, injuries and traumas. In addition, rehabilitation is needed in health emergencies, including natural disasters, conflicts or epidemics and pandemics.

“Five areas in which GPW 14 should evolve”⁵, while embedding rehabilitation across them!

- Accelerating progress towards the health-related SDGs requires a comprehensive approach to health and well-being to improve the performance of health systems across the three health indicators: mortality, morbidity, and functioning.⁶ Therefore, the emphasis should not be only on reducing the number of deaths and of people affected by health conditions, but also ensuring that people live and participate at their best potential through the promotion of functioning (which is the ultimate goal of rehabilitation and assistive technology).

¹ WHO, “Fourteenth General Programme of Work, 2025–2028 Consultation document”, 2023.

² WHO, “Fourteenth General Programme of Work, 2025–2028 Consultation document”, 2023.

³ WHO and Institute for Health Metrics and Evaluation, “Global estimates of the need for rehabilitation based on the Global Burden of Disease study 2019”, 2020.

⁴ WHO and Institute for Health Metrics and Evaluation, “Global estimates of the need for rehabilitation based on the Global Burden of Disease study 2019”, 2020.

⁵ WHO, “Fourteenth General Programme of Work, 2025–2028 Consultation document”, 2023.

⁶ Gerold Stucki, Jerome Bickenbach, “Functioning: the third health indicator in the health system and the key indicator for rehabilitation”, *European Journal of Physical Rehabilitation and Medicine*, 53(1):134-138, 2017.

- Setting a health agenda for all health players, at the country, regional and global levels, is crucial to strengthen rehabilitation in health systems. Indeed, while Member States are responsible for integrating rehabilitation services at all levels of the health system by expanding coverage, concerted action (including through international cooperation) is required to address unmet rehabilitation needs to mitigate the long-term negative consequences on persons and their families, societies and economies.⁷
- Enhancing the impact of WHO's country and regional presence should incorporate effective measures that strengthen WHO capacities and capabilities to support Member States in increasing the variety of available rehabilitation services and access to available, affordable and usable assistive technology, and to facilitate international collaboration in this regard.⁸ This is particularly relevant for low and middle-income countries.
- A comprehensive theory of change, which will be outlined in the Fourteenth General Programme of Work, should place the principle of “leave no one behind” at its core as a means to urgently address global health needs. In this regard, the health and well-being of the world's population need to be understood, with no discrimination, along the continuum of promotion, prevention, treatment, rehabilitation (including assistive technology), and palliative care. Specific action should be taken to ensure access to rehabilitation for groups who face significant obstacles, including persons with disabilities, people living in poverty, women, and older people.
- The engagement with crucial health-related sectors is of pivotal importance to advance rehabilitation services. Rehabilitation requires a human-centred, goal-oriented and holistic approach to guide coordinated cross-governmental mechanisms that integrate measures linked to public health, education, employment, social services and community development and to work in collaboration with civil society organizations, representative organizations and other relevant stakeholders.⁹

The relevance of rehabilitation across the priority areas of “preventing disease, and promoting, providing, and protecting health”¹⁰

- (Preventing and promoting) - Rehabilitation is a set of interventions designed to optimize the physical, social, and mental functioning of individuals in interaction with their environment. Rehabilitation results in health and well-being benefits and it promotes participation. It is proven to shorten hospital stays¹¹ and reduce readmissions and secondary health problems.¹² Rehabilitation also results in functional gains, greater economic productivity, and societal inclusion.¹³

⁷ World Health Assembly's Resolution 76.6 “Strengthening rehabilitation in health systems”, May 2023.

⁸ World Health Assembly's Resolution 76.6 “Strengthening rehabilitation in health systems”, May 2023.

⁹ World Health Assembly's Resolution 76.6 “Strengthening rehabilitation in health systems”, May 2023.

¹⁰ WHO, “Fourteenth General Programme of Work, 2025–2028 Consultation document”, 2023.

¹¹ Peiris, C., Shields, N., Brusco, N., Watts, J., Taylor, N. (2018). Additional Physical Therapy Services Reduce Length of Stay and Improve Health Outcomes in People with Acute and Subacute Conditions: An Updated Systematic Review and Meta-Analysis.

¹² WHO, 'Rehabilitation in Health Systems', 2018.

¹³ Bickenbach J, Rubinelli S, Baffone C and Stucki G. The human functioning revolution: implications for health systems and sciences. *Front Sci* (2023) 1:1118512. doi: 10.3389/fsci.2023.1118512.

- (Providing) - More than 50% of people in need of rehabilitation cannot access it.¹⁴ Access to assistive technology, in some countries, can be as low as 3%.¹⁵ Financial coverage of these services and products, including social protection schemes and health insurances, remains variable worldwide, and is poor or even absent in many low- and middle-income countries. Therefore, rehabilitation and assistive technology represent unsustainable out-of-pocket expenses for most people.¹⁶ Rehabilitation services and assistive technologies should be included in financial risk protection mechanisms, with the objective of achieving universal health coverage and ensuring health care to populations at higher risk of being left behind.
- (Protecting) - Rehabilitation is a core element of emergency response. Early rehabilitation prevents or reduces health complications, speeds hospital discharge, promotes long-term recovery and facilitates independent living. Moreover, rehabilitation has demonstrated its relevance for people affected by infectious diseases, during the acute, subacute and chronic phases, of COVID-19 (including post-COVID). Therefore, rehabilitation and provision of assistive technology must be incorporated in all health emergency responses, and in health planning in relation to pandemic preparedness and response, considering both the rehabilitation needs of people affected by emergencies and other groups requiring continuous access to rehabilitation.

Measuring impact and being accountable, also against the growing rehabilitation needs

WHO's impact measurement should be developed to effectively monitor the coverage of essential health services and financial hardship, including rehabilitation and assistive technology. The set of indicators should account for the effective coverage of rehabilitation services, focusing on tracer health conditions.

In addition, we call for functioning to be formally recognized as the third health indicator to complement mortality and morbidity, and bridge the gap between health and individual well-being. Functioning includes the functions and structures of the body that constitute the intrinsic health capacity of a person as well as the actual performance of simple and complex activities in interaction with the person's physical, human-built environment and social environment.¹⁷ The conceptualization of functioning is operationalized by the International Classifications of Functioning (ICF), which complements two other data classifications, International Statistical Classification of Diseases and Related Health Problems (ICD) and the International Classification of Health Interventions (ICHI),¹⁸ which together allow for the routine collection of data concerning all three indicators of health status—mortality, morbidity, and functioning.¹⁹

¹⁴ UNDESA, 'UN Flagship Report on Disability and Development', 2018.

¹⁵ WHO and UNICEF, "Global Report on Assistive Technology", 2022.

¹⁶ ReLAB-HS "Rehabilitation and Assistive Technology are Essential Components of Universal Health Coverage", 2023.

¹⁷ Bickenbach J, Rubinelli S, Baffone C and Stucki G. The human functioning revolution: implications for health systems and sciences. *Front Sci* (2023) 1:1118512. doi: 10.3389/fsci.2023.1118512

¹⁸ World Health Organization. *International classification of health interventions*. Geneva: World Health Organization (2018).

¹⁹ Bickenbach J, Rubinelli S, Baffone C and Stucki G. The human functioning revolution: implications for health systems and sciences. *Front Sci* (2023) 1:1118512. doi: 10.3389/fsci.2023.1118512

This position paper is endorsed by (in alphabetical order):

Humanity & Inclusion (Handicap International Federation)

Institute for Disability and Rehabilitation Research - Ontario Tech University

International Rehabilitation Forum

International Society of Physical and Rehabilitation Medicine

International Spinal Cord Society

Light for the World

Rehabilitation International

WHO Collaborating Centre for Rehabilitation and Assistive Technology, University of Sao

Paulo Medical School General Hospital

World Federation of Chiropractic

World Federation of Occupational Therapists