



Advancing the rights and inclusion of people with disabilities worldwide

FACT SHEET: HEALTH, HABITATION AND REHABILITATION

Overview

As defined in the CRPD, Habilitation and Rehabilitation “enable persons with disabilities to attain and maintain maximum independence, full physical, mental, social, and vocational ability, and full inclusion and participation in all aspects of life.”

Without adequate habilitation and rehabilitation services, persons with disabilities may not be able to work, go to school, or participate in cultural, sports, or leisure activities. At the same time, barriers to other human rights can prevent persons with disabilities from claiming the right to habilitation and rehabilitation. Services may exist, but if there is not accessible transportation, many persons with disabilities will not receive the benefit of these services. If information about habilitation and rehabilitation services is not available in accessible formats, persons with certain disabilities may never know that they exist.

Statistics on health and disability around the world:

- Poverty often causes disability through malnutrition, poor health care, and dangerous living conditions, according to the World Bank.
- There are an estimated 140 million children with disabilities in developing countries alone; fewer than four percent of them have access to services, reported UNICEF.
- Individuals with disability have equal or greater exposure to all known risk factors for HIV infection. For example, adolescents and adults with disability are as likely as their non-disabled peers to be sexually active, found a study by Yale University and the World Bank.
- Women are at higher risk for becoming disabled due to practices such as female circumcision and through domestic violence or labor-related injuries, according to the WHO.
- The increased vulnerability of women and girls with disabilities encourages more families to keep women with disabilities at home rather than to go out to take advantage of educational or rehabilitation services available to them, found a study by the World Bank.
- Women use only 20 percent of rehabilitation services offered in the Asia Pacific region, according to the UN Economic and Social Commission for Asia and the Pacific.

Health in the UN Convention on the Rights of Persons with Disabilities:

Article 25 provides that people with disabilities should have the same access to the highest possible quality of health care and same choices and standards as others without disabilities in their country. More specifically, government officials will take action to make services accessible with attention to the different needs of men and women in health-related rehabilitation and sexual and reproductive health.



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“States Parties shall take all appropriate measures to ensure access for persons with disabilities to health services that are gender-sensitive, including health-related rehabilitation.” In particular, States Parties shall:

- a) Provide persons with disabilities with the same range, quality and standard of free or affordable health care and programmes as provided to other persons, including in the area of sexual and reproductive health and population-based public health programmes;
- b) Provide those health services needed by persons with disabilities specifically because of their disabilities, including early identification and intervention as appropriate, and services designed to minimize and prevent further disabilities, including among children and older persons;
- c) Provide these health services as close as possible to people's own communities, including in rural areas;
- d) Require health professionals to provide care of the same quality to persons with disabilities as to others, including on the basis of free and informed consent by, inter alia, raising awareness of the human rights, dignity, autonomy and needs of persons with disabilities through training and the promulgation of ethical standards for public and private health care;
- e) Prohibit discrimination against persons with disabilities in the provision of health insurance, and life insurance where such insurance is permitted by national law, which shall be provided in a fair and reasonable manner;
- f) Prevent discriminatory denial of health care or health services or food and fluids on the basis of disability.

Habilitation and rehabilitation in the UN Convention on the Rights of Persons with Disabilities:

Article 26 says that

1. States Parties shall take effective and appropriate measures, including through peer support, to enable persons with disabilities to attain and maintain maximum independence, full physical, mental, social and vocational ability, and full inclusion and participation in all aspects of life. To that end, States Parties shall organize, strengthen and extend comprehensive habilitation and rehabilitation services and programmes in such a way that these services and programmes:
 - a) Begin at the earliest possible stage, and are based on the multidisciplinary assessment of individual needs and strengths;
 - b) Support participation and inclusion in the community and all aspects of society, are voluntary, and are available to persons with disabilities as close as possible to their own communities, including in rural areas.
2. States Parties shall promote the development of initial and continuing training for professionals and staff working in habilitation and rehabilitation services.
3. States Parties shall promote the availability, knowledge and use of assistive devices and technologies, designed for persons with disabilities, as they relate to habilitation and rehabilitation.



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RI Advocacy Recommendations on Health:

- Write letters to and organize meetings with key politicians and government officials urging your country to sign and ratify the UN Convention on the Rights of Persons with Disabilities.
- Meet with your key government representatives and local and national human rights organizations to raise awareness of the educational needs and rights of people with disabilities.
- Assess what your community and/or country are doing to implement Article 25 (concrete programs, action plans, etc) by talking to persons with disabilities, government officials in the Ministry of Health, health care providers and other relevant actors.
- Identify what areas need attention in the public and private sector; where are people with disabilities not getting adequate health care and at risk for secondary conditions?
- Develop talking points on two or three pressing health concerns to present to the media, government representatives and health institutions.
- Identify regional and local allies who already have an interest in your targeted issue.