

## Editorial

2015 is an important milestone in the global fight against poverty and the effort to ensure equitable access to development benefits. The Millennium Development Goals (MDG) come to an end this year after 15 years. While much has been achieved by the MDGs, it has also been acknowledged that grave challenges remain and that efforts must to be continued to ensure that development benefits reach all people living in poverty.

Sustainable development goals are being defined to succeed MDGs for the next 15 years, along with their targets and indicators. Inclusion and equity are the key themes of the new development goals, with a human rights-based approach and a renewed focus on the most vulnerable, the poorest and the marginalized.

Over the last few years, a strong case has been made for inclusion of disability in the MDGs. A heartening development as a consequence is the global recognition of the need to explicitly include persons with disabilities into the post 2015 agenda. Taking the example of health care (which continues to be a key goal in the new agenda) and rehabilitation, the World Report on Disability (2011) has pointed that people with disabilities do not receive the health care they need and have poorer health compared to persons without disabilities. According to data from the World Report, people with disabilities are more than twice as likely to find healthcare providers' skills and facilities inadequate; nearly three times more likely to be denied health care; and four times more likely to be treated badly.

Further support to this is provided in a report of the Technical Briefing on *Preparing for the General Assembly High-Level Meeting on Disability and Development: The Health Sector's Contribution* from the 66th World Health Assembly, 23rd May 2013. While declaring that "Disability is an important public health and development issue", the report states that "Improved access to health for people with disabilities is not only a human right but also a critical enabling factor to achieving aspirations including education, employment, caring for and participating in family, community and public life" and that "Good health will lead to better overall socio-economic outcomes for people with disabilities and achievement of broader global development goals."

CBR and inclusive development approaches and practice have shown that they are relevant responses to ensure access to health care and rehabilitation by persons with disabilities. The World Report (Chapter 3 on General Health Care) recognises the role of CBR in promoting and facilitating access to health care services for people with disabilities and their families in low-income and lower middle-income countries. The Report also recommends (Chapter 4 on Rehabilitation) that in low-resource, capacity-constrained settings, efforts should focus on accelerating the supply of services in communities through CBR, complemented with referral to secondary services. The chapter cites examples of measures in CBR such as identification, referrals and follow up at community level, providing simple rehabilitation therapy at community level, providing individual or group-based educational, psychological, and emotional support services for persons with disabilities and their families and involving the community. Other CBR activities include health promotion; raising awareness about prevention of causes of impairment and about HIV/AIDS, malaria and other diseases (MDG 6); and improving the quality of environments that can lead to disabilities (MDG 7).

CBR is mentioned in the “WHO global disability action plan 2014–2021: Better health for all people with disability”. The action plan has 3 objectives: to remove barriers and improve access to health services and programmes; to strengthen and extend rehabilitation, habilitation, assistive technology, assistance and support services, and *community-based rehabilitation (emphasis added)*; and to strengthen collection of relevant and internationally comparable data on disability and support research on disability and related services.

Global stakeholders are now in the process of operationalising plans and approaches for implementation of the new development goals. Along with the emphasis on inclusion of disability in the post 2015 agenda, stakeholders need to consider CBR and inclusive development as an appropriate response in low and lower middle income countries to ensure inclusion of persons with disabilities and their equitable access to development benefits.

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