Medicus Mundi International

Meeting: Seventy-first World Health Assembly (A71/1) Agenda Item: 12.5 Improving access to assistive technology

Statement:

We welcome WHO's initiative in coordinating improvement in access to assistive technologies.

Access to early intervention, rehabilitation, assistive technology and social welfare services are prerequisite for persons with disabilities to be able to function independently in their daily lives and their inclusion in the society. People with disabilities are subject to multiple deprivations. Ensuring equity in health requires prioritising the needs and concerns of persons with disabilities. Despite large populations of persons with disabilities, many LMIC's have weak infrastructure and maintenance capacities that are needed to support use of assistive technologies. Support should be extended to LMIC's in areas such as manufacturing, storage and procurement of assistive products. Assistive technologies should be treated as a public good. A corporate-controlled patents-driven system in assistive technologies can obstruct access. We urge MS and WHO to promote open design and open access innovations, copyright exemptions and mechanisms for transfer of technology. To ensure affordabilty and protection from financial-risks, effective price control policies are required.

We are concerned that the draft resolution ignores the interlinkages between social conditions, population specificities and anthropometrics while developing standards. Failing to do so would affect the optimization of product design as per country specific requirements and usage. This is aligned with the resolution proposal for support to national manufacturing capacities, especially in LMICs. We urge MS to promote the use and social acceptance of assistive aids to prevent discrimination against PWDs and ensure that the approach to persons with disabilities is not overly medicalized.

Finally, we urge WHO to collaborate with the Inter-Agency Support Group for the Convention on the Rights of Persons with Disabilities.