



## DSi Member Meeting – Health Equity Campaign



# Introductions



Please tell us:



- Your name
- Which organisation you are representing
- Where you are in the world





# Agenda



- Welcome and introductions
  - Introduction to Health Equity
  - Health Equity Campaign plans
  - Next steps
- 
- 



## Ground rules



One person speak at a time

Keep your point as short and clear as you can

Say your name when you speak

Please tell us if you do not understand or have questions

Use plain language please – no jargon!

Stick to time





## Introduction to Health Equity





## In this session we will talk about



1. What is health and why it is important
2. The challenges people with disabilities face to being healthy
3. What is Health Equity
4. The World Health Organization Report on Health Equity for people with disabilities
5. How we can use the WHO Report to improve health for people with disabilities





## What is health?



- ✓ Health is not just if you are sick or not
- ✓ You can be healthy even if you have an impairment/condition
- ✓ People with disabilities can be healthy
- ✓ People with disabilities have healthcare needs beyond their impairment/condition

The World Health Organization  
says

**“Health is a state of complete physical, mental and social well-being and not merely the absence of disease or sickness.”**



# What do we need to be healthy?

- ✓ Good food
- ✓ Exercise
- ✓ Drink lots of water
- ✓ Information about what is healthy and what is not healthy
- ✓ We can go to the doctor when we need
- ✓ Supportive family, friends and community
- ✓ To be able to participate in our community (e.g. go to school, have a job, spend time with friends...)







## Why is health important?

- ✓ Health is important to being able to participate in society.
- ✓ All people have a right to health.
- ✓ All people deserve to be as healthy as possible.



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# World Health Organization report



The World Health Organization wanted to find out about the health of people with disabilities.

➤ In 2022, the World Health Organization published a Report.

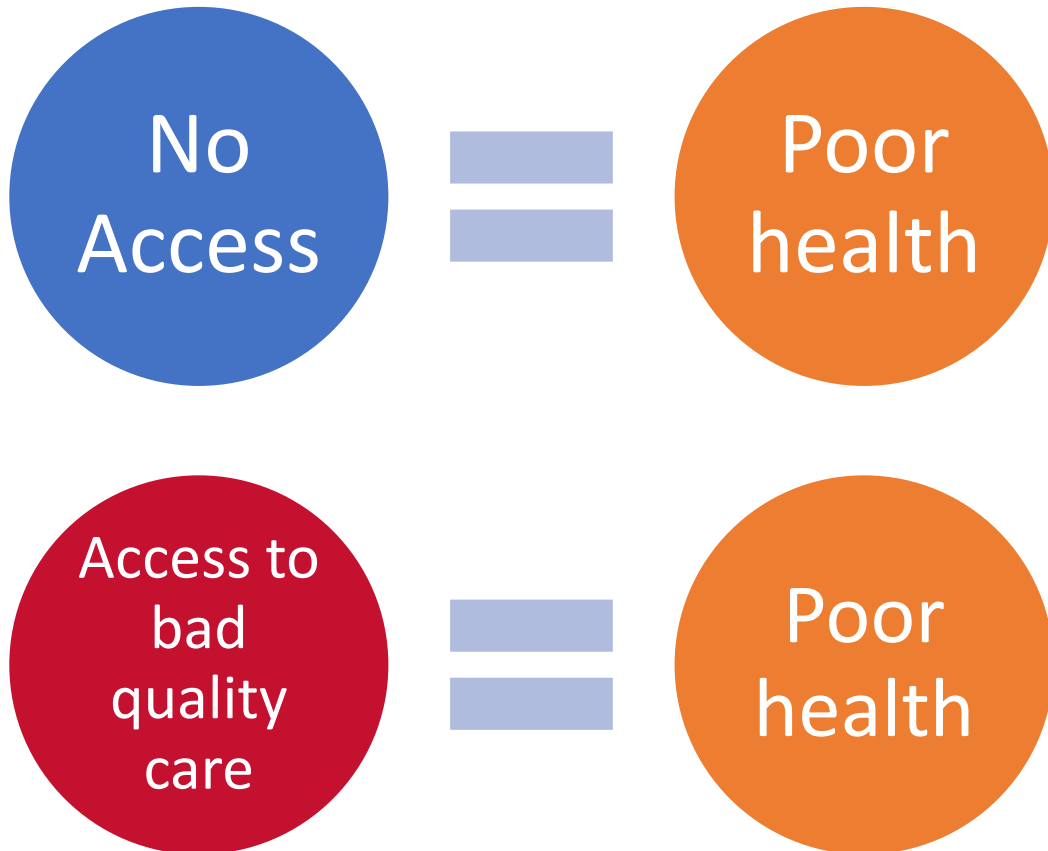
➤ Includes sections on:

1. What health equity means.
2. Levels of health equity for people with disabilities.
3. Factors that cause health inequity.
4. Steps to be taken to improve health equity.



# 1. What is Health equity?

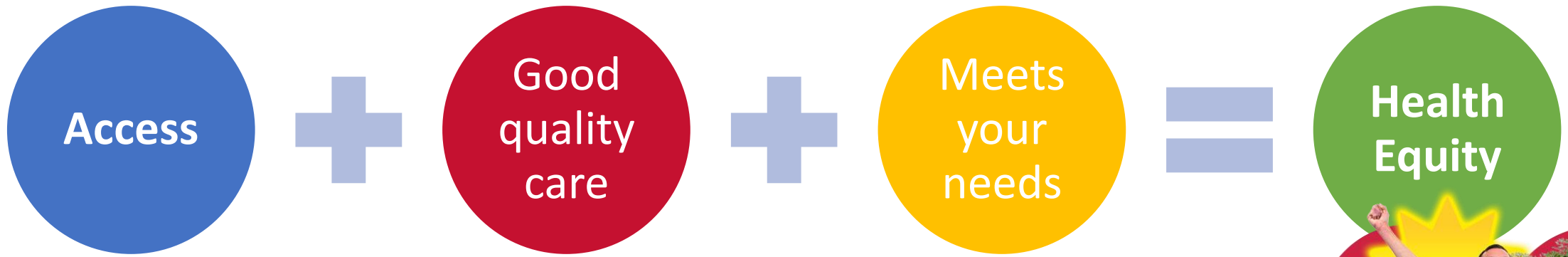
- When people with disabilities have **access to quality health care that meets their needs.**





# 1. What is Health equity?

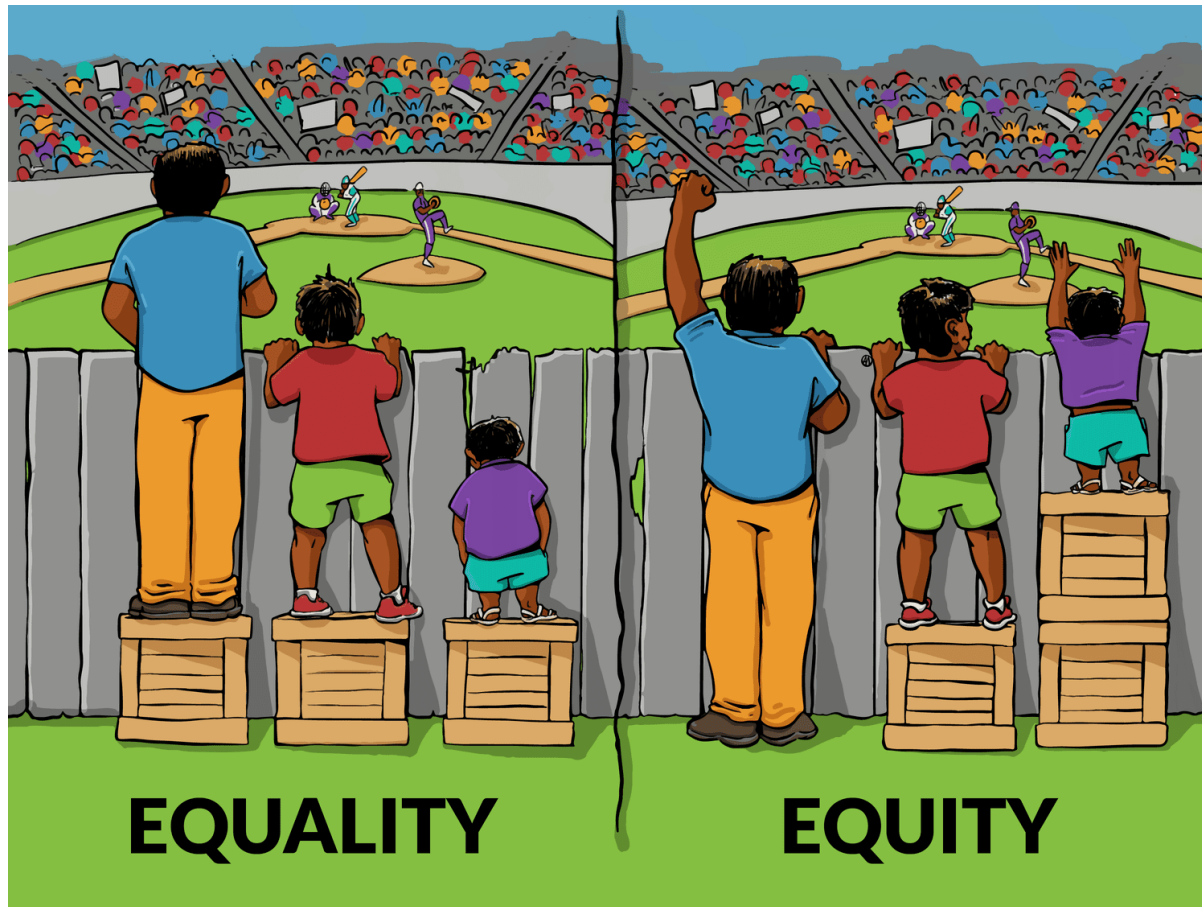
➤ When people with disabilities have **access to quality health care that meets their needs.**



How might this apply to people with Down syndrome?



# Difference between Equality and Equity



- **Equality = Treating everyone the same.**  
Everyone has access to the same opportunities or resources.
- **Equity = Treating everyone fairly.**  
Opportunities or resources are adjusted to make sure everyone has the same outcomes.



## Equality or Equity?

### Taking the bus:

Everyone pays the same for the bus fare – \$2.30 for each trip.

Some people cannot afford to pay, so they cannot take the bus.



#### Equality

**Treating everyone the same**

Everyone pays the same for the bus regardless of their capacity to pay.

#### Equity

**Treating everyone fairly**

Poorer and elderly people pay less for the bus so everyone can access transport.





## Equality or Equity?

### At the doctor:

The doctor asks all patients the same questions in same way. The doctor doesn't take time to explain, and asks questions to parents or support persons and not to the patient.

- Some patients do not understand the questions the doctor is asking.
- And they don't feel comfortable to share about their health problems.
- They don't get the same quality of health care from the doctor.



**Equality**

**Treating everyone the same**

Giving the same health care to everyone, regardless of their different health or other needs.

**Equity**

**Treating everyone fairly**

Health care takes into account people's different needs, so everyone is as healthy as they can be!



## 2. Levels of health equity



The **Report** found that **people with disabilities do not have health equity**

- **Premature death** – people with disabilities are more likely to die young than other people.
- **Poorer health** - people with disabilities have higher rates of physical and medical health conditions than other people.
- **Functioning** – people with disabilities face more barriers in their environments that limit their day-to-day activities and participation in society, than other people.







### 3. Factors that cause health inequity



- What do you think is causing people with disabilities to have worse health outcomes than other people?

The report found:  
Health inequities are due to **unfair, unjust and avoidable situations** which affect persons with disabilities disproportionately.





# Structural factors



For example:

- Stigma and discrimination
- Inadequate policies and processes.



## Social factors



For example:

- Living in poverty.
- Transport not being accessible.

# Risk factors



For example:

- Not being physically active.
- Having a poor diet.

# Issues with health systems



For example:

- Badly trained health professionals.
- Poor-quality health services.

# 4. What can be done to improve health outcomes?

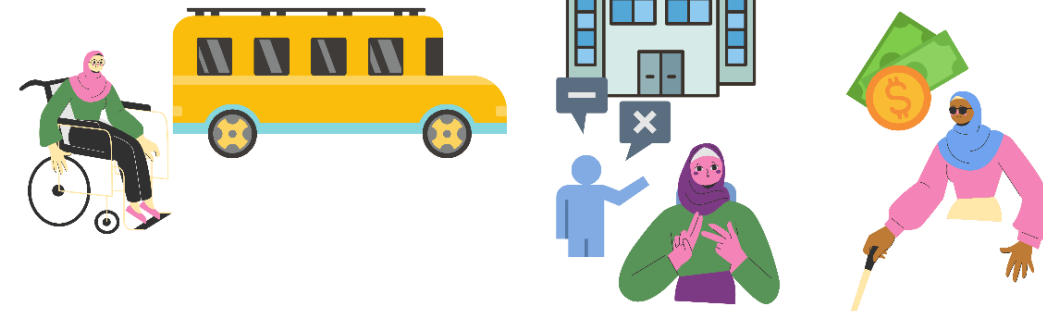
Health systems often do not give people with disabilities the services and education that meet their needs. This is a big problem!

But, Health systems can improve people’s health.

✓ If Health systems provide the **health services people with disabilities need**



✓ There are **low or no barriers** to people with disabilities **accessing** these services



✓ Health professionals provide **quality care for all**



# 4. What can be done to improve health outcomes?



## actions to achieve health equity for persons with disabilities

### Political commitment, leadership, and governance

- 1 Prioritize health equity for persons with disabilities
- 2 Establish a human rights-based approach to health
- 3 Assume a stewardship role for disability inclusion in the health sector
- 4 Make international cooperation more effective by increasing funding to address health inequities for persons with disabilities
- 5 Integrate disability inclusion in national health strategies, including preparedness and response plans for health emergencies
- 6 Set actions that are specific to the health sector in national disability strategies or plans
- 7 Establish a committee or a focal point the Ministry of Health for disability inclusion
- 8 Integrate disability inclusion in the accountability mechanisms of the health sector
- 9 Create disability networks, partnerships and alliances
- 10 Ensure the existing mechanisms for social protection support the diverse health needs of persons with disabilities

### Health financing

- 11 Adopt progressive universalism as a core principle, and as a driver of health financing, putting persons with disabilities at the centre
- 12 Consider health services for specific impairments and health conditions in packages of care for universal health coverage
- 13 Include into health-care budgets the costs of making facilities and services accessible

### Engagement of stakeholders and private sector providers

- 14 Engage persons with disabilities and their representative organizations in health sector processes
- 15 Include gender-sensitive actions that target persons with disabilities in the strategies to empower people in their communities
- 16 Engage the providers of informal support for persons with disabilities
- 17 Engage persons with disabilities in research and including them in the health research workforce
- 18 Request that providers in the private sector support the delivery of disability-inclusive health services

### Models of care

- 19 Enable the provision of integrated people-centred care that is accessible and close to where people live

### Ensure universal access to assistive products

- 20 Ensure universal access to assistive products
- 21 Invest more finances in support persons, interpreters, and assistants to meet the health needs of persons with disabilities
- 22 Consider the full spectrum of health services along a continuum of care for persons with disabilities
- 23 Strengthen models of care for children with disabilities
- 24 Promote deinstitutionalization

### Health and care workforce

- 25 Develop competencies for disability inclusion in the education of all health and care workers
- 26 Provide training in disability inclusion for all health service providers
- 27 Ensure the availability of a skilled health and care workforce
- 28 Include persons with disabilities in the health and care workforce
- 29 Train all non-medical staff working in the health sector on issues related to accessibility and respectful communication
- 30 Guarantee free and informed consent for persons with disabilities

### Physical infrastructure

- 31 Incorporate a universal design-based approach to the development or refurbishment of health facilities and services

- 32 Provide appropriate reasonable accommodation for persons with disabilities

### Digital technologies for health

- 33 Adopt a systems-approach to the digital delivery of health services with health equity as a key principle
- 34 Adopt international standards for accessibility of digital health technologies

### Quality of care

- 35 Integrate the specific needs and priorities of persons with disabilities into existing health safety protocols
- 36 Ensure disability-inclusive feedback mechanisms for quality of health services
- 37 Consider the specific needs of persons with disabilities in systems to monitor care pathways

### Monitoring and evaluation

- 38 Create a monitoring and evaluation plan for disability inclusion
- 39 Integrate indicators for disability inclusion into the monitoring and evaluation frameworks of country health systems

### Health policy and systems research

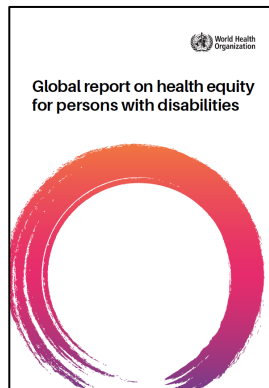
- 40 Develop a national health policy and systems research agenda on disability

WHO/UC/NCD/SDR/2022.02  
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CC BY-NC-SA 3.0 IGO license. For more details, refer  
to <https://www.who.int/health-topics/disability>.



➤ Improving health systems is the responsibility of the government of each country.

➤ The WHO report recommends 40 actions that governments can take to improve health systems for people with disabilities.



# What can we do to raise awareness about health equity?



- **Raise awareness:** Talk about health equity with your members, family and friends!
- **Document evidence on health inequities:** Ask people with Down syndrome about their experiences of health care, and the challenges they face, and what they want to be improved.
- **Educate health service providers:** Talk to health care providers about what you need to make health services more friendly for people with Down syndrome
- **Bring health equity for persons with disabilities to the attention of decision-makers:** Use the WHO Report on Health Equity in your advocacy with your government and health decision-makers







# Health Equity Campaign - Aims



Aims of the campaign:

- To raise awareness around the world on the right to health equity.
- To gather evidence about the health equity of people with Down syndrome and intellectual disabilities around the world.
- To advocate for changes in policy and legislation to promote health equity.





## Health Equity Campaign – Main activities



- Campaign briefing meetings with member organisations.
- Health equity conference at UN Headquarters.
- Health equity consultation.
- Launch of DSi health equity network group.





## Campaign briefing meetings with member organisations.



- Today's meeting – introduction to health equity and campaign.
- Another meeting with World Health Organization – Health Equity report and work around it.
- Let us know if other meetings would be helpful!

The Zoom logo is displayed in a large, bold, blue, lowercase sans-serif font.



**World Health  
Organization**





# Health equity conference at UN Headquarters.



- Conference on 21 March at UN in New York.
- You can attend in person or watch online on UN Web TV.
- We are looking for in-person and virtual speakers.





# Health equity consultation



We want to understand more about health equity for people with Down syndrome and intellectual disabilities around the world.

We will launch a consultation in March, including:

- A survey
- Focus group discussions run by DSI members.

We will need your help!

**Questions**



1. What do you think about it?

Good

Bad

Not sure



# DSi Health Equity Network Group



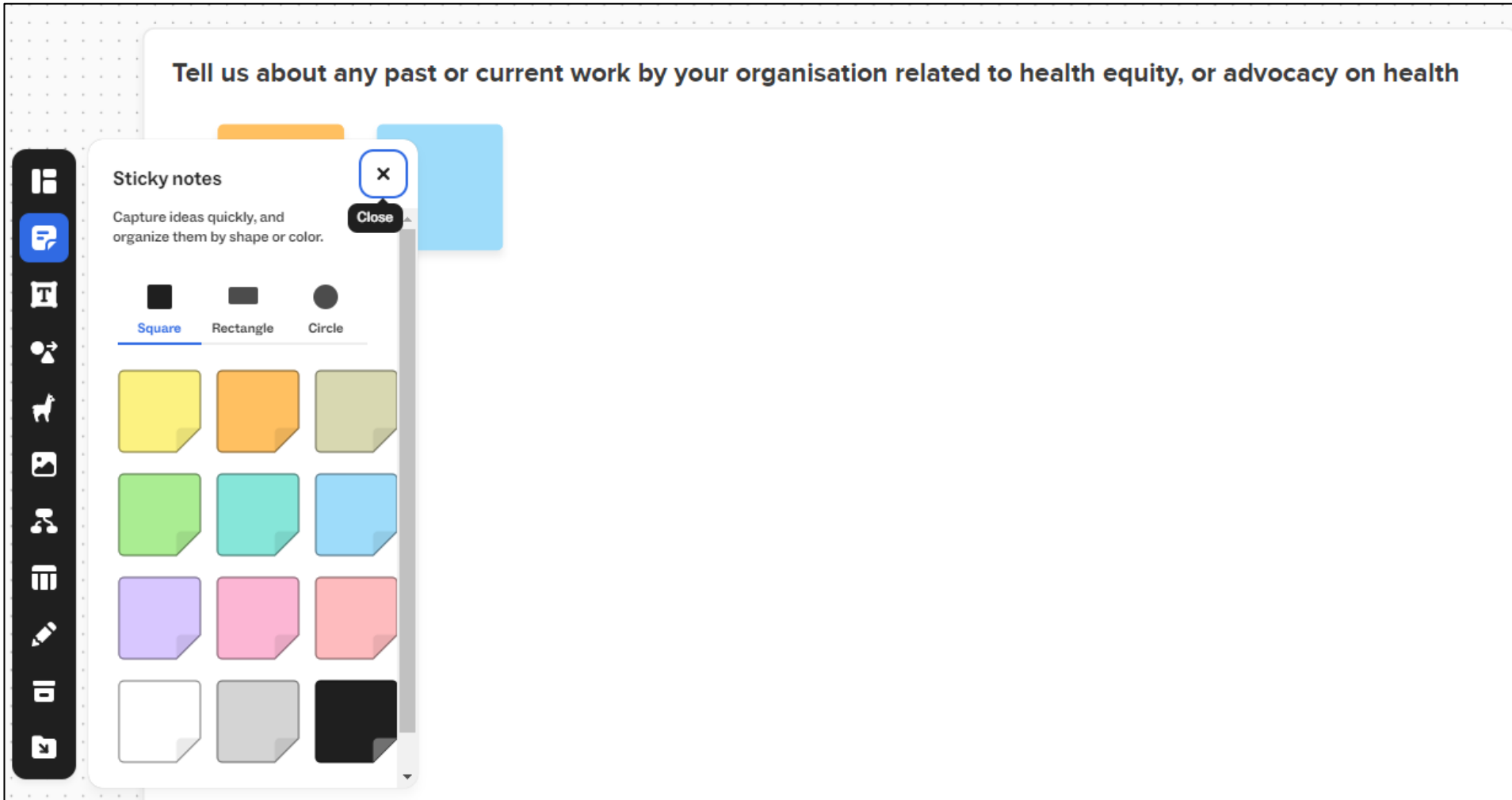
- Group for DSi members to work together and support each other on Health Equity.
- Will meet a few times a year on Zoom.
- We will look for other ways to keep in touch in between meetings.
- We will be looking for members to be co-chairs.





# Discussion: on Mural

- Either add a sticky note to the Mural or type in the chat and we can add it.





## Next steps



- We will have another Members Meeting with the World Health Organization.
- We will send you some draft consultation materials for feedback.
- We will invite applications to be co-chairs of the Health Equity Network Group

