

## **Fifth report of Committee A**

**(Draft)**

Committee A held its eighth, ninth and tenth meeting on 23 May 2014. This meeting was held under the chairmanship of Dr Pamela Rendi-Wagner (Austria).

It was decided to recommend to the Sixty-seventh World Health Assembly the adoption of the attached resolutions relating to the following agenda items:

13 Noncommunicable diseases

13.3 Disability

One resolution

13.4 Comprehensive and coordinated efforts for the management of autism spectrum disorders

One resolution, as amended, entitled:

Autism

13.5 Psoriasis

One resolution, as amended, entitled:

Psoriasis

## Agenda item 13.3

### Disability

The Sixty-seventh World Health Assembly,

Having considered the *World report on disability*,<sup>1</sup> the report on disability,<sup>2</sup> and the draft WHO global disability action plan 2014–2021: better health for all people with disability,<sup>3</sup>

1. ADOPTS the WHO global disability action plan 2014–2021: better health for all people with disability;
2. URGES Member States to implement the proposed actions for Member States in the WHO global disability action plan 2014–2021: better health for all people with disability, adapted to national priorities and specific contexts;
3. INVITES international, regional and national partners to implement the necessary actions to contribute to the accomplishment of the three objectives of the WHO global disability action plan 2014–2021: better health for all people with disability;
4. REQUESTS the Director-General:
  - (1) to implement the actions for the Secretariat in the WHO global disability action plan 2014–2021: better health for all people with disability;
  - (2) to submit reports on the progress achieved in implementing the action plan to the Seventieth and Seventy-fourth World Health Assemblies.

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<sup>1</sup> World Health Organization, World Bank. *World report on disability*. Geneva: World Health Organization; 2011.

<sup>2</sup> Document A67/16.

<sup>3</sup> Document A67/16, Annex.

## **Agenda item 13.4**

### **Autism**

The Sixty-seventh World Health Assembly,

Having considered the report on comprehensive and coordinated efforts for the management of autism spectrum disorders,<sup>1</sup>

Recalling the Universal Declaration of Human Rights; the Convention on the Rights of the Child; the Convention on the Rights of Persons with Disabilities; United Nations General Assembly resolution 62/139 declaring 2 April as World Autism Awareness Day; and United Nations General Assembly resolution 67/82 on addressing the socioeconomic needs of individuals, families and societies affected by autism spectrum disorders, developmental disorders and associated disabilities;

Further recalling, as appropriate, resolution WHA65.4 on the global burden of mental disorders and the need for a comprehensive, coordinated response from health and social sectors at the country level and resolution WHA66.9 on disability; resolution SEA/RC65/R8 adopted by the Regional Committee for South-East Asia on comprehensive and coordinated efforts for the management of autism spectrum disorders (ASD) and developmental disabilities; resolution EUR/RC61/R5 adopted by the Regional Committee for Europe on the WHO European Declaration and Action Plan on the Health of Children and Young People with Intellectual Disabilities and their Families; resolution EM/RC57/R.3 adopted by the Regional Committee for the Eastern Mediterranean on maternal, child and adolescent mental health: challenges and strategic directions 2010–2015, all of which emphasize a strong response to the needs of persons with developmental disorders including autism spectrum disorders and other developmental disorders;

Reiterating commitments to safeguard citizens from discrimination and social exclusion on the grounds of disability irrespective of the underlying impairment whether physical, mental, intellectual or sensory according to the Convention on the Rights of Persons with Disabilities; and promoting all persons' basic necessities of life, education, health care and social security, as well as ensuring attention to vulnerable persons;

Noting that globally, an increasing number of children are being diagnosed with autism spectrum disorders and other developmental disorders and that it is likely that still more persons remain unidentified or incorrectly identified in society and in health facilities;

Highlighting that there is no valid scientific evidence that childhood vaccination leads to autism spectrum disorders;

Understanding that autism spectrum disorders are developmental disorders and conditions that emerge in early childhood and in most cases, persist throughout the lifespan, and are marked by the presence of impaired development in social interaction and communication and a restricted repertoire of activity and interest, with or without accompanying intellectual and language disabilities; and that

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<sup>1</sup> Document A67/17.

manifestations of the disorder vary greatly in terms of combinations and levels of severity of symptoms;

Further noting that persons with autism spectrum disorders continue to face barriers in their participation as equal members of society, and reaffirming that discrimination against any person on the basis of disability is inconsistent with human dignity;

Deeply concerned that individuals with autism spectrum disorders and their families face major challenges including social stigma, isolation and discrimination, and that children and families in need, especially in low resource contexts, often have poor access to appropriate support and services;

Acknowledging the comprehensive mental health action plan 2013–2020<sup>1</sup> and, as appropriate, the policy measures that are recommended in resolution WHA66.9 on disability, which can be particularly instrumental for developing countries in the scaling-up of care for autism spectrum disorders and other developmental disorders;

Recognizing the need to create or strengthen, as appropriate, health systems that support all persons with disabilities, mental health and developmental disorders, without discrimination,

1. URGES Member States:

- (1) to give appropriate recognition to the specific needs of the individuals affected by autism spectrum disorders and other developmental disorders in policies and programmes related to early childhood and adolescent development, as part of a comprehensive approach to address child and adolescent mental health and developmental disorders;
- (2) to develop or update and implement relevant policies, legislation, and multisectoral plans, as appropriate, in line with resolution WHA65.4, supported by sufficient human, financial and technical resources to address issues related to autism spectrum disorders and other developmental disorders, as part of a comprehensive approach to supporting all persons living with mental health issues or disabilities;
- (3) to support research and public awareness-raising and stigma-removal campaigns consistent with the Convention on the Rights of Persons with Disabilities;
- (4) to increase the capacity of health and social care systems, as appropriate, to provide services for individuals and families with autism spectrum disorders and other developmental disorders;
- (5) to mainstream into primary health care services the promotion and monitoring of child and adolescent development in order to ensure timely detection and management of autism spectrum disorders and other developmental disorders according to national circumstances;
- (6) to shift systematically the focus of care away from long-stay health facilities towards community-based, non-residential services;

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<sup>1</sup> See document WHA66/2013/REC/1, Annex 3.

- (7) to strengthen different levels of infrastructure for comprehensive management of autism spectrum disorders and other developmental disorders, as appropriate, including care, education, support, intervention, services and rehabilitation;
- (8) to promote sharing of best practices and knowledge about autism spectrum disorders and other developmental disorders;
- (9) to promote sharing of technology to support developing countries in the diagnosis and treatment of autism spectrum disorders and other developmental disorders;
- (10) to provide social and psychological support and care to families affected by autism spectrum disorders, including persons with autism spectrum disorders and developmental disorders and their families in disability benefit schemes, where available and as appropriate;
- (11) to recognize the contribution of adults living with autism spectrum disorders in the workforce, continuing to support workforce participation in partnership with the private sector;
- (12) to identify and address disparities in access to services for persons with autism spectrum disorders and other developmental disorders;
- (13) to improve health information and surveillance systems that capture data on autism spectrum disorders and other developmental disorders, conducting national level needs assessment as part of the process;
- (14) to promote context-specific research on the public health and service delivery aspects of autism spectrum disorders and other developmental disorders, strengthening international research collaboration to identify causes and treatments;

2. REQUESTS the Director-General:

- (1) to collaborate with Member States and partner agencies in order to provide support, strengthening national capacities to address autism spectrum disorders and other developmental disorders as part of a well-balanced approach that strengthens systems addressing mental health and disability and is in line with existing, related action plans and initiatives;
- (2) to engage with autism-related networks, and other regional initiatives, as appropriate, supporting networking with other international stakeholders for autism spectrum disorders and other developmental disorders;
- (3) to work with Member States, facilitating resource mobilization in different regions and particularly in resource-poor countries, in line with the approved programme budget, which addresses autism spectrum disorders and other developmental disorders;
- (4) to implement resolution WHA66.8 on the comprehensive mental health action plan 2013–2020, as well as resolution WHA66.9 on disability, in order to scale up care for individuals with autism spectrum disorders and other developmental disorders, as applicable, and as an integrated component of the scale-up of care for all mental health needs;
- (5) to monitor the global situation of autism spectrum disorders and other developmental disorders, evaluating the progress made in different initiatives and programmes in collaboration

with international partners as part of the existing monitoring efforts embedded in related action plans and initiatives;

(6) to report on progress made with regard to autism spectrum disorders, in a manner that is synchronized with the reporting cycle on the comprehensive mental health action plan 2013–2020, to the Sixty-eighth, Seventy-first and Seventy-fourth World Health Assemblies.

## Agenda item 13.5

### Psoriasis

The Sixty-seventh World Health Assembly,

Having considered the report on psoriasis,<sup>1</sup>

Recalling all relevant resolutions and decisions adopted by the World Health Assembly on the prevention and control of noncommunicable diseases, and underlining the importance for Member States to continue addressing key risk factors for noncommunicable diseases through the implementation of the WHO global action plan for the prevention and control of noncommunicable diseases 2013–2020;<sup>2</sup>

Recognizing the urgent need to pursue multilateral efforts to promote and improve human health, providing access to treatment and health care education;

Recognizing also that psoriasis is a chronic, noncommunicable, painful, disfiguring, and disabling disease for which there is no cure;

Recognizing further that in addition to the pain, itching and bleeding caused by psoriasis, many affected individuals around the world experience social and work-related stigma and discrimination;

Underscoring that those with psoriasis are at an elevated risk for a number of co-morbid conditions, namely, cardiovascular diseases, diabetes, obesity, Crohn disease, heart attack, ulcerative colitis, metabolic syndrome, stroke and liver disease;

Underscoring also that up to 42% of those with psoriasis also develop psoriatic arthritis, which causes pain, stiffness and swelling at the joints and can lead to permanent disfigurement and disability;

Underscoring that too many people in the world suffer needlessly from psoriasis due to incorrect or delayed diagnosis, inadequate treatment options and insufficient access to care;

Recognizing the advocacy efforts of stakeholders, in particular through activities held every year on 29 October in many countries, to raise awareness regarding the disease of psoriasis, including awareness of the stigmatization suffered by those with psoriasis;

Welcoming the consideration of psoriasis issues by the Executive Board at its 133rd session,

1. ENCOURAGES Member States to engage further in advocacy efforts to raise awareness regarding the disease of psoriasis, fighting stigmatization suffered by those with psoriasis, in particular through activities held every year on 29 October in Member States;

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<sup>1</sup> Document A67/18.

<sup>2</sup> See document WHA66/2013/REC/1, Annex 4.

2. REQUESTS the Director-General:

(1) to draw attention to the public health impact of psoriasis, publishing a global report on psoriasis, including the global incidence and prevalence, emphasizing the need for further research on psoriasis, and identifying successful approaches for integrating the management of psoriasis into existing services for noncommunicable diseases, for stakeholders, in particular policy-makers, by the end of 2015;

(2) to include information about psoriasis diagnosis, treatment and care on the WHO website, aiming to raise public awareness of psoriasis and its shared risk factors, and to provide an opportunity for education and greater understanding of psoriasis.

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