



Recommendations for the EU Global Health Resilience Initiative

European Disability Forum Input
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**EDF Response to the European Commission Call for Evidence on
the Global Health Resilience Initiative**

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Introduction

The European Disability Forum

The European Disability Forum is an independent NGO that advocates for the rights of 100 million Europeans with disabilities. EDF is a unique platform which brings together representative organisation of persons with disabilities from across Europe. EDF is run by persons with disabilities and their families. We are a strong, united voice of persons with disabilities in Europe.

Acknowledgements

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Executive Summary

The European Disability Forum (EDF) is pleased to contribute to the [European Commission's Call for Evidence on the Global Health Resilience Initiative](#). As the representative organisation of persons with disabilities in Europe, EDF brings the perspective of its members and partners to ensure that disability inclusion is fully reflected in the design and implementation of the initiative. This submission outlines key recommendations to strengthen global health resilience through a human rights-based approach that ensures the full and equal participation of persons with disabilities.

Key recommendations

Drawing on the experience of persons with disabilities during the COVID-19 pandemic and our previous work, the European Disability Forum calls on the European Commission to:

1. **Ensure political commitment and accountability** to uphold the rights of persons with disabilities at all times, including in situations of risk, humanitarian and health emergencies, and to assess and investigate the impact of crisis responses on persons with disabilities.
2. **Adopt measures to ensure systematic consultation and meaningful involvement** of all persons with disabilities through their representative organisations in all decisions that affect their lives, including the most disadvantaged groups, such as self-advocates. This requires adequate and sustainable funding for organisations of persons with disabilities.
3. **Invest in disability-inclusive preparedness and response**, including accessible public health announcements and emergency communication, as well as targeted measures to support persons with disabilities. Adequate resources must be allocated to ensure that mainstream services are inclusive and accessible—including vaccination programmes and prevention of violence and emergency responses—and to ensure the continuity of essential services and support, including access to essential medical supplies and assistive technologies.
4. **Ensure accessibility and inclusion of persons with disabilities at all levels**, including governance, information, response and recovery measures, service provision and in society. Investment in accessibility of information and communication technologies, transport and other services, and the built environment must be maintained and prioritised.
5. **Ensure that disability-specific and mainstream health and support services are available, accessible, affordable and recognised as essential services** for all persons with disabilities, coordinated and continuous across the life course.
6. **End institutionalisation by investing in independent living and supported decision-making**, fostering the transition from institutional settings to community-based support services, including in mental health care.

7. **Ensure inclusive, rights-based mental health services,** including
 - Availability, accessibility and diversity of services;
 - Prevention and prohibition of forced placement and treatment;
 - Training of mental health professionals in disability rights and person-centred approaches.
8. **Ensure a human rights-based approach across all actions,** in line with the **United Nations Convention on the Rights of Persons with Disabilities (UN CRPD),** including:
 - Equality and non-discrimination in legislation and practice;
 - Protection from violence, abuse, exclusion, coercion and neglect, with disability-, gender- and age-sensitive measures;
 - Continuous and independent human rights monitoring;
 - Free and informed consent in all medical interventions, including vaccination.
9. **Ensure the protection of women and girls with disabilities against violence and abuse,** and the availability and accessibility of support services, including those related to sexual and reproductive health and rights.
10. **Ensure the collection and use of disaggregated data** to inform policies and investments, including data disaggregated by disability, age and gender, covering persons in institutions and other closed settings.
11. **Ensure adequate budget allocation, tracking and accountability,** including dedicated funding for disability inclusion and the **systematic use of the OECD DAC disability policy marker** in global health financing.
12. **Promote disability inclusion in global health governance and partnerships,** including through EU leadership in multilateral, regional and bilateral cooperation.

Feedback to the Global Health Resilience Initiative

1. Problem definition

EDF welcomes the Commission's analysis of increasing pressures on global health systems, including fragmentation, underinvestment and rising global health threats. However, the problem definition does not sufficiently reflect the situation of persons with disabilities.

Persons with disabilities, representing approximately 1 in 6 people globally, are disproportionately affected by gaps in health systems, disruptions in essential services and risk situations. Structural barriers—including lack of accessibility, discrimination and exclusion from decision-making—limit access to healthcare and undermine health system resilience.

The COVID-19 pandemic demonstrated that the absence of disability-inclusive approaches leads to disproportionate impacts, including barriers to accessing care, discriminatory practices, increased exposure to violence and neglect, and disruptions in essential support services. These challenges are systemic and should be explicitly recognised.

For more information please read [EDF Human Rights Report "Impact of COVID-19 on persons with disabilities"](#) (2021).

2. Objective of the Initiative

EDF supports the objective of strengthening global health resilience. However, this objective must explicitly include ensuring the full and equal enjoyment of the right to health for persons with disabilities, in line with the UN CRPD.

To be effective, the GHRI should ensure that:

- Health systems are inclusive and accessible by design, including infrastructure, services, transport and digital solutions.
- Universal Health Coverage includes both mainstream and disability-specific services, recognised as essential.
- Policies promote independent living, community-based care, and supported decision-making.
- Preparedness and response frameworks are disability-inclusive, including accessible communication and targeted measures.

- Actions ensure equality and non-discrimination, including in situations of risk.
- Persons with disabilities are systematically involved through their representative organisations, including those most underrepresented persons with disabilities.
- Health systems promote continuity of care across the life course, including transitions between services.
- Policies support prevention and early intervention to reduce health inequalities.
- Specific attention is given to intersectionality, including women and girls with disabilities.

3. Proposed actions and priority areas

EDF supports the priority areas identified by the Commission and recommends the following:

- **Strengthening health systems**
Ensure accessibility and inclusion across all levels of health systems, including infrastructure, services, communication and transport. Guarantee the availability and continuity of both mainstream and disability-specific services and support and recognise them as essential services. Promote integrated and multidisciplinary care models and strengthen the health workforce, including training on disability inclusion.
- **Health security and preparedness**
Invest in disability-inclusive preparedness and response, including accessible communication and targeted support measures. Ensure resources are allocated to make mainstream services inclusive, including vaccination programmes and emergency responses. Ensure continuity of support in emergencies, including access to essential supplies, affordable assistive technologies, and accessible services.
- **Global health governance**
Ensure the meaningful involvement of organisations of persons with disabilities in decision-making at all levels. Promote inclusive governance, accountability and independent human rights monitoring.
- **Supply chains and innovation**
Ensure access to essential health products, including assistive

technologies, and strengthen resilient and diversified supply chains, including local production where appropriate.

- **Misinformation and communication**

Ensure that public health communication is accessible in multiple formats, including sign language, easy-to-read and accessible digital content.

4. Implementation and added value

The European Union has a key role to play in promoting inclusive global health. To maximise its added value, the Global Health Resilience Initiative (GHRI) should be firmly grounded in the **United Nations Convention on the Rights of Persons with Disabilities (UN CRPD)** and a human rights-based approach, ensuring equality and non-discrimination across all actions. It should also ensure that EU external action and partnerships are inclusive and accessible, including through the systematic engagement of organisations of persons with disabilities.

In addition, the GHRI should strengthen health information systems and the use of data to support inclusive policy-making. This includes:

- Collecting and analysing data disaggregated by disability, age and gender.
- Ensuring that persons with disabilities in institutions and other closed settings are included in data collection.
- Using data to inform inclusive policies and investments and to address health inequalities.
- Supporting partner countries in strengthening their health information systems and data capacities.

The initiative should also ensure adequate and targeted financing to advance disability inclusion. This should include:

- Allocating dedicated budgets for disability inclusion and accessibility.
- Applying the OECD DAC disability policy marker to track disability-inclusive health investments.
- Strengthening organisations of persons with disabilities and the broader disability movement.

The European Union Delegations should play a key role in operationalising disability inclusion on the ground. They should be equipped with the

necessary guidance, expertise and resources to mainstream disability inclusion across all health-related programmes and partnerships. In particular, EU Delegations should:

- Ensure systematic consultation and engagement with organisations of persons with disabilities at country level.
- Promote disability inclusion in policy dialogue with partner governments.
- Support the collection and use of disaggregated data and inclusive monitoring frameworks.
- Ensure that EU-funded programmes and investments are fully accessible and inclusive, including through the application of relevant markers and safeguards, and that they do not support institutionalisation or substituted decision-making schemes.
- Facilitate coordination among Team Europe actors to ensure a consistent and coherent approach to disability inclusion.

Finally, the European Union should use its leadership role to promote disability inclusion in global health governance, including through multilateral, regional and bilateral cooperation.

EDF recalls its [joint position with the International Disability and Development Consortium \(IDDC\)](#), which highlights the need to systematically mainstream disability inclusion across all global health priorities.

5. Conclusions

EDF calls on the European Commission to ensure that disability inclusion is systematically integrated across the Global Health Resilience Initiative.

Ensuring accessibility, inclusion, participation, adequate resourcing and accountability is essential to uphold the rights of persons with disabilities and to strengthen the effectiveness, equity and resilience of global health systems worldwide.

Document credits

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