Summary Statement to Rehabilitation 2030

As Australia’s peak body for Rehabilitation and Assistive Technology Practitioners, and one of many sister organisations internationally, ARATA strongly endorses the Rehabilitation 2030 Call to Action.

Access to rehabilitation, in its broadest sense, is a human right and ensures the full scope of every person’s health, wellbeing, and participation needs are addressed - all stages of life.

Access to Assistive Technologies is a fundamental component of rehabilitation and one that may be overlooked. The work of Rehabilitation and Assistive Technology practitioners extends beyond traditional, narrowly-defined, and medically-focused “health” settings. Rehabilitation and Assistive Technology Practitioners provide services across the spectrum of health, social care, education, employment, disability, and human services.

Our Practitioners work across government, NGO, volunteer, private, and for-profit service settings, and represent a wide breadth of professional and para-professional disciplines – including allied health, nursing, engineering, IT, and education.

ARATA stands ready to bring the substantial, collective knowledge and expertise of these Practitioners to promote and advance the goals of Rehabilitation 2030.

ARATA and our international sister organisations offer the following principles to further the goals of Rehabilitation 2030:

1. **PERSON CENTERED PRACTICE**: People-centred practice is what we, as Rehabilitation and Assistive Technology Practitioners, deliver every day. Rehabilitation and Assistive Technology services are highly individualised, and must reflect the unique characteristics of each person, their environments, and participation goals.

2. **INDIVIDUALISED OUTCOMES**: Assistive technology outcomes research demonstrates effectiveness on the dimensions of independence and functioning, objective and subjective participation, satisfaction, quality of life and cost effectiveness. Collaborative research with AT users demonstrates that person-defined outcome measures may be different to those valued by professionals. For example autonomy is more highly valued than independence, and that some measures such as the population norm studies supporting some health related quality of life scales, do not capture the lived experience of disability and may be discriminatory.

3. **RESPONSIVE AND RELEVANT RESEARCH METHODOLOGIES**: Assistive technologies are most effective as multi-component interventions, with elements of environmental adaptation and personal support as part of each individually tailored solution. Measuring these heterogeneous populations and solutions is challenging, but methods are being developed to fully capture costs and outcomes from the person’s perspective. These methods can be utilised in rehabilitation more fully in order to fully realise the impacts of our interventions and to capture outcomes that matter.

On behalf of ARATA, I thank you for the opportunity to be part of this call to action, and to improve the lives of every person – no matter where they live - through provision of the full suite of rehabilitation strategies, including assistive technology.

ARATA’s Statement to Rehabilitation 2030 Meeting: February 7, 2017 WHO Headquarters: Geneva