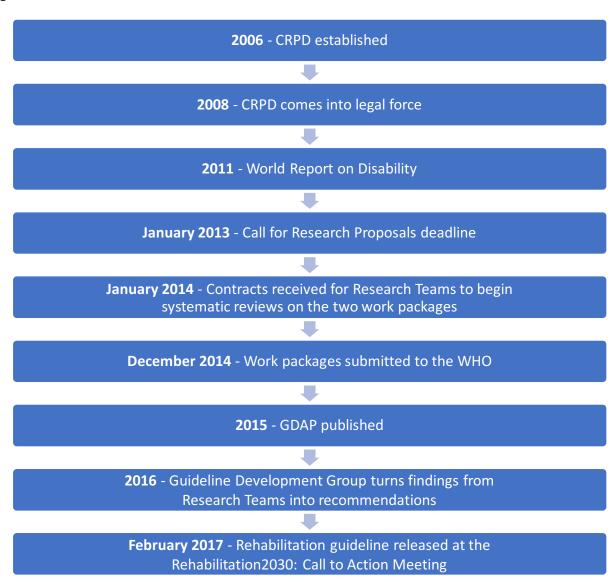rehabINK Article: Scaling up rehabilitation worldwide with the new WHO guideline – Is it enough?

Figure 1. Timeline and key events in the development of the *Rehabilitation in health systems* guideline.

2006 - CRPD established

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2008 - CRPD comes into legal force

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2011 - World Report on Disability

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January 2013 - Call for Research Proposals deadline

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January 2014 - Contracts received for Research Teams to begin systematic reviews on the two work packages

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December 2014 - Work packages submitted to the WHO

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2015 - GDAP published

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2016 - Guideline Development Group turns findings from Research Teams into recommendations

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February 2017 - Rehabilitation guideline released at the Rehabilitation2030: Call to Action Meeting

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Table 2. Summary table of the WHO *Rehabilitation in health systems* guideline.

Building Block	Recommendation	Research Team	Strength of Recommendation	Quality of Evidence
Service Delivery	A. Rehab services should be integrated in health systems	IWH	Conditional	Very low
	B. Rehab services should be integrated into and between primary, secondary and tertiary levels of health systems	IWH	Strong	Very low
	C. A multi-disciplinary rehab workforce should be available	IWH	Strong	High
	D. Both community and hospital rehab services should be available	IWH	Strong	Moderate
	E. Hospitals should include specialized rehab units for inpatients with complex needs	IWH	Strong	High
Financing	F. Financial resources should be allocated to rehab services to implement and sustain the recommendations on service delivery	?	Strong	Very low
	G. Where health insurance exists or is to become available, it should cover rehab services	?	Conditional	Very low
Good Practice Statements	Financing and procurement policies should be implemented to ensure that assistive products are available to everyone who needs them	GDG	N/A	N/A
	Adequate training should be offered to the user, and care provider when appropriate, when assistive products are provided	GDG	N/A	N/A

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Legend:
N.B. "Building Block" refers to the WHO *Framework for Action* document for strengthening health systems; these are two of six building blocks
GDG=Guideline Development Group; IWH=Institute for Work and Health and the University of Toronto; N/A=not applicable; ?=Presumed to be The Johns Hopkins Bloomberg School of Public Health and The Johns Hopkins School of Medicine (inferred from Guideline)
Strength of Recommendation levels: Strong, Conditional
Quality of Evidence levels: High, Moderate, Low, Very Low