
Agenda item 7

EB156(21)

10 February 2025

Primary prevention and integrated care for sensory impairments including vision impairment and hearing loss, across the life course

The Executive Board, having considered the report by the Director-General,¹

Decided to recommend to the Seventy-eighth World Health Assembly the adoption of the following resolution:

The Seventy-eighth World Health Assembly,

Having considered the report by the Director-General;

Having considered also the World report on vision² and the World report on hearing³ and recalling resolutions WHA66.4 (2013) on a global action plan 2014–2019 towards universal eye health,⁴ WHA70.13 (2017) on prevention of deafness and hearing loss,⁵ WHA73.4 (2020) on integrated people-centred eye care, including preventable vision impairment and blindness,⁶ United Nations General Assembly resolution 75/310 (2021) entitled “Vision for Everyone: accelerating action to achieve the Sustainable Development Goals”,⁷ resolution WHA72.2 (2019) on primary health care,⁸ and the endorsement of the first-ever global targets for refractive error and cataract surgery at the Seventy-fourth World Health Assembly;⁹

¹ Document EB156/7.

² [WHO World report on vision \(2019\)](#).

³ [WHO World report on hearing \(2021\)](#).

⁴ WHA66.4.

⁵ WHA 70.13.

⁶ WHA73.4.

⁷ A/RES/75/310.

⁸ WHA72.2.

⁹ WHA74(12) (2021).

Recalling the United Nations Convention on the Rights of Persons with Disabilities¹⁰ and the UN Decade of Healthy Ageing (2021–2030), endorsed by the World Health Assembly and proclaimed by the United Nations General Assembly;

Recognizing that at least 2.2 billion individuals are affected by vision impairment and 1.5 billion individuals by hearing loss, and noting that the prevalence of such impairments (including sensory disabilities)¹¹ is projected to rise due to population growth, ageing demographics and changes in lifestyle patterns;^{12,13}

Expressing concern regarding the increasing impact of additional risk factors, including extended exposure to digital devices, excessive noise levels in occupational, domestic and recreational settings, and also insufficient time spent outdoors during childhood, contributing to sensory impairments;

Acknowledging that the incidence and prevalence of unaddressed vision impairment and hearing loss remains disproportionately high in low- and middle-income countries, small island developing States, and settings affected by different emergencies, often due to limited or inadequate access to affordable, equitable and good-quality essential health and care services and health products;

Recognizing also that many of the causes of vision impairment and hearing loss can be effectively prevented through access to primary care services and strengthened universal health coverage and other public health interventions, such as vitamin A supplementation, immunization, provision of corrective lenses and provision of hearing aids and implants, prevention of ocular trauma, measures to mitigate noise exposure and ototoxicity, as well as the timely detection and effective management of eye disease or otitis media;

Aware that recent technological advancements that facilitate the screening and detection of vision impairment and hearing loss, including their underlying conditions, across all age groups and diverse settings, and recognizing the availability of cost-effective and good-quality interventions, including cataract surgery and assistive technologies such as spectacles, hearing aids, implants, and rehabilitative services as well as reasonable accommodations, such as sign language interpreters, Braille literacy, which can reduce the barriers to active participation in society for those with sensory impairments;

Expressing concern over the significant impact of unaddressed vision impairment and hearing loss which in interaction with barriers in society, can affect daily communication, child development, educational achievement, employment opportunities, social integration and participation, and the overall financial well-being of affected individuals; further recognizing the established link between sensory impairment, cognitive decline and

¹⁰ Convention on the Rights of Persons with Disabilities, 24 January 2007. United Nations General Assembly resolution 61/106 (2007).

¹¹ The term “sensory impairments” refers to all grades of impairments that affect one or more of the sensory functions, ranging from mild vision and hearing impairments to blindness and deafness. The United Nations [Convention on the Rights of Persons with Disabilities](#) recognizes “that disability is an evolving concept and that disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others” (Preamble paragraph (e)) and acknowledges the importance of addressing barriers in society in order to support participation.

¹² [WHO World report on vision \(2019\)](#).

¹³ [WHO World report on hearing \(2021\)](#).

dementia, and noting the estimated economic impact, exceeding US\$ 980 billion annually, for unaddressed hearing loss¹⁴ and US\$ 410.7 billion for unaddressed vision impairment globally;¹⁵

Acknowledging that the economic impact posed by hearing loss or vision impairment is attributable to loss of productivity, stigma, and social exclusion posed when these impairments remain unaddressed;

Expressing additional concern about barriers to the availability, affordability, and accessibility of eye, vision, ear, and hearing care services, particularly at the community and primary healthcare levels, including limited public awareness, shortage of trained health personnel, inadequate infrastructure and policies, inadequate sustainable financing, high out-of-pocket costs for care resulting in significantly lower intervention coverage, especially within underserved communities and individuals experiencing social, economic, or systemic disadvantages. Further noting the lack of comprehensive inclusion of relevant services in national health benefit packages and universal health coverage, and insufficient data for relevant national monitoring, and evaluation frameworks;

Recalling that persons with disabilities include those who have one or more long-term physical, mental, intellectual, psychosocial or sensory impairments, which in interaction with various environmental, financial, legal and attitudinal barriers in society, including discrimination and stigmatization, may hinder their full and effective participation in society on an equal basis with others, and may limit their access to essential health and care services, including eye, vision, ear and hearing care, as well as recalling the need for reliable, comparable, and disaggregated data by disability;

Recognizing that eye, vision, ear and hearing care encompasses health promotion, prevention, identification, treatment and rehabilitation for eye and ear conditions, as well as interventions for hearing loss or vision impairments;

Noting that the integration of evidence-based policies, including for eye, vision, ear and hearing care can provide significant benefits for individuals with sensory impairments and disabilities, by enhancing language and communication and supporting social connection, educational attainment and employment opportunities, while also reducing the risk of cognitive decline, and yielding an estimated return of approximately US\$ 20 for every dollar invested in prevention and care;^{16,17}

Reaffirming the commitments to action outlined in previous resolutions, including WHA70.13 on prevention of hearing loss and deafness; WHA73.4 on integrated people-centred eye care, including preventable vision impairment and blindness;¹⁸ WHA74.8 (2021)

¹⁴ McDaid D, Park AL, Chadha S. Estimating the global costs of hearing loss. *Int J Audiol*. 2021 Mar;60(3):162-170. doi: 10.1080/14992027.2021.1883197. Epub 2021 Feb 16. PMID: 33590787.

¹⁵ Burton MJ, Ramke J, Marques AP, et al. The Lancet Global Health Commission on Global Eye Health: vision beyond 2020. *Lancet Glob Health*. 2021;9(4):e489-e551. doi:10.1016/S2214-109X(20)30488-5.

¹⁶ Tordrup D, Smith R, Kamenov K, et al. Global return on investment and cost-effectiveness of WHO's HEAR interventions for hearing loss: a modelling study. *Lancet Glob Health*. 2022;10(1):e52-e62. doi:10.1016/S2214-109X(21)00447-2.

¹⁷ [Transforming Lives: An Investment Case for Eye Health, The Fred Hollows Foundation](#).

¹⁸ WHA73.4.

on the highest attainable standard of health for persons with disabilities;¹⁹ WHA76.6 (2023) on strengthening rehabilitation in health systems;²⁰ and WHA71.8 (2018) on improving access to assistive technology;²¹

Recalling the Draft Implementation Roadmap 2023–2030,²² for the Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013–2030,²³ and aligning efforts with the Sustainable Development Goals 3 and 4, which recognize needs and equitable access to good quality healthcare and education for all including persons with disabilities;

Noting with concern that eye and ear diseases as well as vision impairment and hearing loss are commonly not sufficiently addressed within the primary healthcare frameworks that span the entire life cycle, thus leaving significant gaps in service provision for those affected;

Reaffirming the obligation to provide health and care services based on free, prior and informed consent and respecting and promoting human rights, dignity, autonomy and legal capacity, and to respect the diversity and needs of persons with disabilities, including through education and training for health and care workforce, and the promulgation of ethical standards for public and private health and care services;

Appreciating the longstanding and continued efforts made by the WHO Secretariat, Member States and international partners to prevent and address eye and ear diseases and mitigate the impact of vision impairment and hearing loss, while acknowledging the urgent need for widespread, sustained and focused public health actions to strengthen efforts to prevent hearing loss and vision impairment,

1. URGES Member States,²⁴ in line with their own national context and priorities:

(1) to adopt or adapt and implement the recommendations outlined in the *World report on vision* and *World report on hearing*, incorporating comprehensive eye, vision, ear and hearing care across the life course as a core element within national health plans, as appropriate, and primary healthcare initiatives as part of achieving universal health coverage;

(2) to support individuals with vision impairments, hearing loss and sensory disabilities by promoting access to comprehensive and integrated health and care services, including eye, vision, ear and hearing care throughout their lives, with an emphasis on equitable access to assistive technologies, rehabilitation services and inclusive communication features such as access to sign language and interpretation, captioning and other accessibility features;

¹⁹ WHA74.8.

²⁰ WHA76.6.

²¹ WHA71.8.

²² [Draft implementation roadmap for NCDs 2023–2030](#).

²³ [Global action plan for the prevention and control of noncommunicable diseases 2013–2020](#).

²⁴ And, where applicable, regional economic integration organizations.

- (3) to integrate systematic vision and hearing screening and early intervention services within health and care services across the life course, focusing on high-risk populations;
- (4) to expand, where relevant, the availability of, and build the capacity of qualified human resources to deliver eye, vision, ear and hearing care by education and training healthcare workers at the primary level, fostering innovative practices and service delivery approaches;
- (5) to adopt regulations on the scope of practice and competencies to ensure a high quality of care across the continuum of care;
- (6) to set and implement policies, in line with WHO published norms and standards, for the provision and use of protective equipment, and control of noise in occupational settings, at entertainment venues, and through personal audio systems, as well as for control of ototoxic medicines and chemicals;
- (7) to ensure the integration of eye, vision, ear and hearing care into national health benefit packages and services and strengthen the sustainability of financing mechanisms for spectacles, hearing aids and implants, by incorporating them into health benefit packages and services, and provisions for underserved communities, where necessary;
- (8) to undertake high-quality public health research on eye, vision, ear and hearing care;
- (9) to strengthen monitoring and evaluation of eye, vision, ear and hearing care services and assistive technologies, through appropriate surveillance and monitoring systems, including integrating indicators for monitoring eye, vision, ear and hearing care services and assistive technologies within national health information systems, as appropriate, surveys and quality assurance programmes and health technology assessment;
- (10) to ensure that social integration and economic policies should seek to reduce inequalities, promote access to basic social services, education, lifelong learning opportunities for all and health and care services, including for mental health and psychosocial well-being, eliminate discrimination, and increase the participation and integration and inclusion of social groups, particularly persons with sensory impairments and disabilities;

2. CALLS UPON relevant partners, including intergovernmental and nongovernmental organizations, the private sector, organizations of persons with disabilities and their representative organizations, and academia:

- (1) to provide, in collaboration with Member States, technical support for the national implementation of the recommendations contained in the *World Report on Vision* and *World Report on Hearing*, including the development and implementation of evidence-based and evidence-informed guidelines and policies;

- (2) to support Member States through, among others, encouraging public–private partnerships that are aligned with national plans, legislation and priorities, to expand eye, vision, ear and hearing care coverage in countries, while ensuring that such care is accessible, sustainable, affordable and of high quality and respecting data privacy;
- (3) to support monitoring efforts for eye, vision, ear, and hearing care, including through data sharing on health products across the value chain and the promotion of consumer protection-related best practices for audio-visual personal products;
- (4) to strengthen coordination and multisectoral approaches involving Member States, WHO, multilateral institutions, civil society organizations, private sector entities, organizations of persons with disabilities and their representative organizations and the active engagement from communities at large, for equitably expanding access to eye, vision, ear and hearing care;

3. REQUESTS the Director-General:

- (1) to provide technical support to Member States for integrating eye, vision, ear, and hearing care into primary healthcare as part of efforts to achieve universal health coverage and improve the effective coverage of hearing aids, implants and spectacles among the affected population;
- (2) to provide guidance for integration of vision and hearing screening and early intervention services into school-based and occupational-based programmes and other relevant public health and noncommunicable diseases approaches across the life course approach;
- (3) to work in collaboration with Member States and industry partners, in line with the Framework of Engagement with Non-State Actors, as applicable, for the adoption of relevant norms and standards for safe vision and listening and to drive behaviour change in the target population for the prevention of hearing loss and vision impairments including, where relevant, through implementing “MyopiaEd” and the Make Listening Safe initiative;
- (4) to continue the annual observance of both World Hearing Day and World Sight Day, to raise awareness on sensory impairments including eye, vision, ear and hearing care, while also reducing stigma associated with vision impairment and hearing loss and the use of assistive devices;
- (5) to strengthen global collaboration for eye, vision, ear, and hearing care through the World Hearing Forum and the SPECS 2030 Initiative;
- (6) to coordinate data collection to monitor global progress, including progress toward the 2030 eye, vision, ear, and hearing care targets;
- (7) to create guidance on how to integrate eye, vision, ear and hearing care into overall public financing systems (beyond the health sector alone) and take into account the specific needs of persons with disabilities, in particular with sensory disabilities;

(8) to report back on progress in the implementation of this resolution to the Eightieth World Health Assembly in 2027, the Eighty-second World Health Assembly in 2029 and the Eighty-fourth World Health Assembly in 2031.

Eighteenth meeting, 10 February 2025
EB156/SR/18
