Dear Editor

The World Health Organization (WHO) report suggests that around 15% of the world’s population is suffering from different kinds of disabilities [1]. On the other hand, the estimate of governmental sources in Iran reports number of people with disabilities (PWD) as about 4% of the entire country’s population [2]. PWD have numerous unmet needs in various areas such as transportation, urbanization, education, recreation, and entertainment, with this deprivation causing further disability. Indeed, this is not the physical disability that prevents them from social participation; rather environmental barriers (whether natural or man-made) and social laws and structures prevent the fulfillment of the essential needs of individuals [3]. The life experiences of PWD indicate that despite the adoption of the International Convention on the Rights of Persons with Disabilities (CRPD), the promotion and implementation of human rights, especially in developing countries, has remained an important challenge [4]. Abdi et al. have declared in a research that the barriers of healthcare system in providing rehabilitation services for PWD in Iran include: Defects in education, weakness in diagnosis and screening of PWD, lack of identification, as well as accessibility and financial problems. It can be concluded that all factors are clear for the proper implementation of CRPD articles [5]. In the past years, when disabled persons were less present in the society, their needs were limited. However nowadays, a large number of these people have graduate education and active participation in the public sectors. Basically, the development of each country is dependent on the maximum use of manpower, capabilities, and talents of everyone. Developing countries cover more than two-thirds of the disabled persons all over the world, with Iran being also one of them. The activity of any person in the development of the country requires his presence and participation in various fields. An individual with a disability must have access to facilities that enable their motivation for taking responsibilities in the society (e.g. urban facilities or spiritual and mental support centers). The gap between individuals having disabilities and progress must be milder in order to support their ability to promote the country, and to ensure their rights as normal citizens [6]. Achieving the goals of human rights law requires not only the adoption, implementation and reformation of these laws, but also changes in social and cultural attitudes to the acceptance and respect of human dignity of these individuals [2]. It seems necessary for policymakers to consider CRPD as a main part of their plan; in particular, they must change...
their oversight towards individuals with disabilities, instead of designing a special park, residential area or health service for them. Accordingly, in the beginning, we design a city where all classes of PWD and people without disabilities can access equal and fair urban facilities and reach a society with equal opportunities which nurture talents and fulfill potentials to achieve their desires. This can be achieved only by establishing fair laws and regulations to direct attention to the demands and basic desires of the disabled community [7-9]. According to the ratification of this convention in Iran, and commitment to the implementation of its items, unfortunately, we are still facing the obstacles of the implementation, Thus the following solutions are proposed to facilitate the implementation of the convention:

- Collaboration and debate among all responsible organizations for disabilities, including welfare, ministry of health, Red Crescent, Relief Committee, etc.
- Providing the services of an executive system to PWD, similar to other citizens, non-discrimination
- Participation and use of the PWD in stewardship organizations
- Strengthening and empowering NGOs by PWD and with the support of the governmental sector.
- Increasing media assistance in order to inform and improve attitudes among people and authorities.
- Defining the intersectional coordination with a detailed explanation of the mechanisms.
- Investing in Knowledge enterprise and domestic companies in the field of rehabilitation technology.
- Establishing training courses to clarify the phenomenon of disability for health care providers.
- Creating special rehabilitation centers for individuals with disabilities
- Allocating financial resources for community-oriented approaches.
- Continuous training of relevant experts with PWD.
- Changing insights and attitudes of policy makers and managers toward PWD.
- Activating the role of community and organizations against PWD.
- Modifying environmental structures for the participation of PWD in the society

We hope this research could take an important step towards the implementation of the CRPD with the implementation and employment of these solutions, and ultimately promote the participation and quality of life of these people.

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References