

Domestic Financing for Assistive Technology (AT)

Webinar Transcript in English (8am CEST session)

>>SATISH MISHRA

SATISH MISHRA: Hello everybody. Thanks for joining in. We'll probably give it a minute more to see, to let people join in and dial in. We should start in a minute so we'll let people continue joining in then we'll start in a minute. Ok I think we should start. I don't see anybody in the waiting room so maybe we can start. Good morning. Good afternoon and good evening to you from different parts of the world. I'm Satish. From ATscale. Welcome to this webinar which focuses on domestic financing for assistive technology. The webinar is for 60 minutes and will end at 9 am central European summer time. Please keep your microphone muted. The webinar is English and translated into Russian and international sign language. Please click on the interpretation button to access them. Closed captioning is available in English. Please click on the links in the chat box to access them. The webinar is being recorded and will be shared publicly after the event. For any questions please feel free to drop them in the chat. We have team members monitoring the chat and they will respond in real time or during the question and answer sessions. If we are unable to respond to your question today we'll make sure we follow up individually with you. Please use the chat function to share any experiences, any practical ideas, any lessons learned because we want to learn from your experiences. Lastly I think it will be good to have a virtual group photo if possible and if everyone can switch on their camera for a moment then we can take a screenshot. We'll have like 30 seconds to do so if you can switch on your camera so we can see all the beautiful people joining from all parts of the world, we can take a screenshot. Ok everybody, ready, 3, 2, 1.

>>SPEAKER

Satish, can we do just another one?

>>SATISH MISHRA

Three, 2, 1. Thank you. Is that good?

>>SPEAKER

One more Satish.

>>SATISH MISHRA



One more. Three, 2, 1. Good, good I see that works. Thank you very much. So today's particular webinar marks the launch of our technical report for assistive technology. It is designed to guide countries in the process of building financial systems that can ensure affordable access to assistive technology. Specifically focusing on how countries can increase and coordinate funding sources. They reduce the financial burden on out of pocket elements. We are particularly meeting at a significant moment across the world, countries are navigating political and economic uncertainty. At a time when overseas development is becoming increasingly constrained and unpredictable and subject to competing priorities. This evolving global context makes our discussion today more urgent than ever. For too long assistive technology has remained under prioritised and under-financed in many national health, social protection, education and development systems. Yet the need is growing. Governments must be increasingly equipped to ensure that assistive technology programmes are no longer neglected but are supported today and for the future. This is precisely the purpose of today's webinar. We want to explore how countries can be better equipped to design and implement sustainable domestic financing approaches to assistive technology. If there are 3 key messages we'd like participants to take from today's discussion that would be number 1, spending on assistive technology is not simply a cost. It is an investment for the future of the country. Investing in assistive technology, helping people's health and wellbeing, it can reduce dependency, improve productivity and unlock the social and economic potential of millions of people. Second, there is no single magic solution that will work for every country. Domestic financing strategies must be tailored to national context, prioritised fiscal realities in the countries and the needs of people who require assistive technology. Third, the resources are always going to be limited. We all know it, even some of the wealthiest high income countries continue to under invest in the space of assistive technology. The challenge there was not about mobilising additional resources but also about finding smarter and more effective ways to maximise the impact and utility of the resources that are available at the country level. These 3 key messages also bring us to an important question that we hope to explore today. What tools, evidence, knowledge and partnership are needed to help countries to successfully design and implement sustainable domestic financing for assistive technology? In today's webinar we'll learn findings from the technical report which has been published. We'll hear from government representatives, along with AT users' perspective on domestic financing and affordability, and we'll hear from development partners supporting countries on domestic financing. For today's webinar I will particularly like to thank Jens Wilkens. Jens along with his co-authors has worked extremely hard to make this particular report a practical guide as countries embark on the journey of domestic financing. Let's dive into today's topic. We'll start with a story of Ineza which will set the stage for the rest of the webinar. Can we have the audio visual please.

>>SATISH MISHRA

Thank you, I think that really sets the stage for this particular webinar so thank you very much. Now let me invite Jens Wilkens who has led the development of this report. Jens, as I mentioned earlier is a technical advisor at ATscale. He is also a researcher at Lund University in

Sweden. He will have practical recommendations that have stemmed from this research. Jens the floor is yours please.

>>JENS WILKENS

Thank you very much Satish. This movie about Ineza is very telling I must say. It is very good and in a sense it has presented the report I think very much. I will try to give some more, put some more meat to the bones with this short presentation. I'm very proud to present this report. It is a sector that has been neglected too long. It still needs more attention, both in terms of financial resources which we'll talk about today, but more importantly how these resources are deployed. Next slide please. So a foundational starting point. We have to address one of the fundamental questions that Satish started with. Why domestic financing is critical for expanding access to assistive technology and as we know and we have some data on it, users fund assistive technology themselves to a large extent. This causes challenges for the individual of course but it also causes challenges for the society as a whole. The intention with this report and I think we have been fairly successful in doing so, we put forward an explanation to what these challenges look like. We provide a framework for country strategy to meet these challenges and we try to guide countries to find technical solutions. Financing mechanisms that are implementable in policy development. Because in fact financing policy can both decrease the dependency on these user payments that we see on the screen, which are substantially higher than in the health sector generally and in all other social sectors I dare say. Financing policy can also mitigate the negative effects on those user payments that will remain because it is probably not realistic to think that we will have prepaid and public funds covering all the needs in assistive technology so it is both a matter of driving down the prevalence of these out of pocket payments, user payments, and mitigate negative effects of those and for all that, we walk through the report, we walk through mechanisms to do exactly that. Next slide please. In low income countries these high user payments affect access very directly as many people simply don't have the means. But I want to stress here that even though most people in high income countries can afford to access assistive technology, products and services, that doesn't mean they don't experience financial hardship due to their need. It is not only a matter of being able to pay at the point of service. That payment can create hardship. Financial hardship we call it, consequences for social wellbeing in the next step of events, so to speak. I also want to stress that this is not only about fairness or rights to needed assistive technology, this is also about effectiveness in the use of resources, because when ability to pay becomes as it is the decisive factor for access then utilisation of assistive technology does not become distributed according to need so this distribution according to ability to pay instead of according to need across a population makes these products and services needed to work below their potential. So the whole system becomes less effective at any given level of resources. And this is, I think intuitive for everybody when we think it through but it is too seldom recognised simply. Next slide please. Ok so with this background the report is a tool for governments and the public strategy to develop. But we do think that NGOs and a wide range of profit, not for profit entities in the sector will also use this report. The report in several instances, in several places acknowledges the importance of the non-governmental sector's work that definitely needs to continue with high

engagement and it is also important to support that and there are mechanisms to do that, there are tools in the financing tool box so to speak to engage and support the non-government stakeholders as well. So the report gives those stakeholders arguments for advocacy, tools for discussing and finding tools for assistive technology. Next slide please. So we have really tried to base this report solidly in economics and applied it to the sector. That comes through in many ways. Satish said all countries' challenges are specific so it is not just that people have to pay a lot themselves because there are details in that picture that are very important, but it is also that contextual factors govern much which solutions can be found to solve those specific problems. That also means that all financing mechanisms that we have on the table, they have a technical meaning in a system and we have to understand that meaning of each technical solution option and what their likely effects are in a specific context and for that we have this foundation in economics and health financing. On the left you see this framework. It was also in Ineza's video. I'm not sure I can do it better than in the video frankly. We'll walk through some of those now. The report is built very much around these elements. So to the first one, collecting funds for assistive technology. Next slide please. Even though we underline that it is not just about more money, that is in fact not the objective in itself. We must not reduce the topic of financing assistive technology to just raise more money so even though that is true. Public funding and the envelope of public funding, how much we have at hand is very important. It is what ensures sustainability and supports equity in ways that no other funds can do. Assistive technology does compete with many sectors and we acknowledge in the report there is no normative benchmark for how much governments need to invest in assistive technology but we walk through mechanisms, assessment methods, benchmarks to build solid arguments for how to prioritise assistive technology in the Government budget to a larger extent than is done today so we outline various types of benchmarks for comparing how much is spent on assistive technology in budgets. Most often explicitly budgeted assistive technology lines and inclusion of assistive technology in benefit packages and similar tools is useful to safeguard funding and build accountability in the system. With increased public funding which is used wisely it is also possible to crowd out these user payments that we talked about a few minutes ago and especially not just generally crowd them out but carefully crowd them out where they are most harmful. And then we discuss the different tools in the tool box to increase domestic public funding and how that can be done. We discuss the technique of earmarking resources at different levels in the public system, the pros and cons, et cetera. Next slide please. Now we have to, when we develop domestic financing strategies and policies we have to be clear that the ultimate goal is after all not access to a specific product or set of products, the ultimate goal is after all impact, utility, effective utility and that comes through and is exemplified in several places in the report under different topics but one implication of that is that financing policy needs to consider the entire continuum of assistive technology. We do have multiple responsibilities in the Government and multiple budget areas where assistive technology elements are included and that contributes to the fragmentation in itself of course. Various parts of the social and health sector budgets for example and this is not necessarily wrong, it is just challenging to manage. And another reason why users experience fragmentation when they need support in assistive technology is also the many engaged non-governmental organisations and they are needed. They are necessary. It is a strength of the sector but we need to find the

mechanisms and develop the mechanisms for aligning these resources for common purposes. We talk about the technical term pooling in the report, that is aligning different resource streams and making use of those aligned resource streams, for example to create bargaining power in procurement of products for example. This continuum of assistive technology, the sector as such also shows how financing policy must relate to both products and services and how they are all provided, so for example effective ways to deliver assistive technology in primary healthcare, there has been a lot of development in that in recent years. It has to be accompanied with financing solutions for that primary healthcare system so that it is not only a matter of developing the service delivery of products and associated services but also ensuring that they are appropriately funded, that the incentives for the primary healthcare sector and everybody working there is well balanced so that it works well so the financing mechanisms come in very clearly there in how services are organised. Next slide please. So like we've said, financing assistive technology is both about ensuring more funds for the sector and making better use of these resources, and we spend quite a lot of space in the report on explaining and describing how it is important that countries carefully define what and for whom these public resources are used. So you see this central box in the figure called available budget, framed in the UHC 3 dimensions of universal health coverage. It is about defining entitlements. Defining for whom or which interventions, that is services and products, are funded, possible copayment regulations so that we to a large extent possible crowd out harmful copayments or user payments. When we do that we are more effective in spending our public funds, but the beauty of this is also that it can help non-government entities to be more effective in their endeavour because when it is clear what the public commitment is it is easier for the non-government sector to complement and to be effective in their work. Next slide please. I want to just show this figure from earlier work that ATscale has done on market shaping to illustrate a couple of things, one is that we make use of earlier work in the sector by ATscale and other organisations working for assistive technology, all the knowledge that has been developed over the last few years, so that comes into the report in many places. We make use of that. This figure in particular also illustrates how important it is that the public sector is clear on what it spends its financial resources on and how it spends it. We see in the report that this data is coming from how parts of the product price is actually dependent on margins in the private sector, that could be different. So it illustrates how we make use of other work that has been done earlier. Next slide please. Finally, I want to stress this element of private funding and the private sector as a whole and please let's be conscious that it is partly about the financing mechanism as such. It is partly about making use of private entities for provision of products and services so it is both the financing and provision side of the private sector. There is a lot of focus on public finance in the report because it is really the core, but we also show in the report how public governance can be effective in supporting the private sector in different ways and the key examples are listed here with sharing risks in investment. Be careful with what we pay for and be smart with what we pay for and not necessarily focus on products but making sure like I said before that the continuum is covered and making sure about impact rather than access to product and that can be used in the way that we pay for assistive technology, with more examples. With that, I think I'll stop and hand back over to you Satish.

>>SATISH MISHRA

Thank you Jens, thank you, thank you very much and also thank you for presenting the assessment findings as well as some of the recommendations which come out of it and I think your particular emphasis on effective use of existing resources and how that can be used more smartly and how do we need to think more from an impact perspective rather than from access perspective alone. Thank you very much. I again want to thank you and all the coauthors who are listed in this particular report who have contributed in making this a valuable knowledge resource in the space of financing for assistive technology. Thank you. I think now is a perfect time to invite different stakeholders who are often related to the ecosystem for financing for assistive technology, the users, the government representatives, the stakeholders as well as the development partners. Let's start from the assistive technology users and it is a pleasure to invite Ida Putru from Indonesia. She is a disability activist and her work focuses on evidence based advocacy for policy reform. Ida, it will be great if you can share your own story and if you have one recommendation for the Government as well as development partners and stakeholders for greater affordability of assistive technology, what that particular recommendation will be. Over to you Ida please.

>>IDA PUTRI

Thank you Satish. Hello everyone. Good afternoon from Indonesia. Some of you are still in the morning. Talking about assistive technology financing resources in Indonesia there are 3 major funding sources for AT. The first one coming from the Government through ministry of social affairs and the second from philanthropists. Those two are mainly to be given for people who are under the poverty line and the third one is a national health insurance scheme. Unfortunately the scheme only covers 8 products out of 50 product lists on WHO and the amount of the funding given to the product is limited and from the study that we held in 2023 limited information related to this scheme, many of them are not aware of this scheme. For myself I am using a wheelchair, I had a manual wheelchair before. It was from the organisation where I work for so I got it for free and my current wheelchair is a power wheelchair, I had to buy it myself because from those 3 schemes unfortunately I'm not eligible for it, I'm not living under the poverty line, however to afford an electric wheelchair is quite an issue for me, it is quite pricey so I needed to save for a couple of months before I could afford to buy the wheelchair and not only when I buy the wheelchair and I don't have to spend any other money to do my daily activities with the wheelchair, there are extra costs that I need to pay for maintenance, like many cases I also heard from my colleagues in my country that maintenance is not covered by any scheme so they have to get money out of their pocket to fix if there is any damage on their assistive technology or any spare parts that need to be replaced and there is no scheme how to fund this specific issue. The other aspect, many people are not aware but we need to have extra support, how we can use the assistive technology freely, like for example when I use my wheelchair I need to take a taxi or I need to have a wagon so I can bring my wheelchair with me, but if I don't use my wheelchair I can take a motorcycle so the cost to rent a taxi is quite a gap and there is no, sometimes it is not something that people are aware of. The other aspect in 2016 when I worked in an organisation providing assistive technology I met a mother. She

obtained a wheelchair for her daughter. It is a complex rehab wheelchair so it is quite big. She went to the office by public transport but when she went home it was difficult for her because the wheelchair would not fit into the bus. She needed to get a big taxi and she faced difficulties because she could not afford to get a taxi so it is something that is not considered by the service provider who provides the wheelchair, that they have given the product but extra money for how the product can really support the daily life of people with a disability. And another story in 2021 me and some of my colleagues performed a survey and we met. Another way on how to make the assistive technology affordable is to have the local components, they make their own assistive products. It is a wooden prosthesis. Custom designed for them and it is more affordable for people because there is wood surrounding them so they are able to make it at a cheaper price and also I met a woman, she used a wooden stool to support her mobility, like a walker, but it is really a custom design for her. It is one way out how to use a local resource to develop assistive technology made for them and as Satish mentioned about the recommendation, my recommendation is to consider not only the product but also other costs that might come with the product so people with disability can use their assistive technology freely and really be able to support their daily life. I think that is my story here and I hand it over to you Satish, thank you.

>>SATISH MISHRA

Thank you very much for sharing your own story and your own experience in Indonesia with regards to access to assistive technology, and also your point that when we are designing financing solutions at the country level we just don't need to think about product and the services along with that but also the associated costs in accessing those services which needs to be kept in mind when we're designing these financing solutions. Thank you very much Ida for that. It is now a good time to invite a Government representative for their perspective. Let me invite Norika Toumak Watt who is the national mental health coordinator in the Government of Vanuatu. Norika is the focal point for assistive technology. Norika will make her presentation through video. Can we have the AV please.

>>NORIKA TOUMAK WATT

My name is Norika, I work as the mental health coordinator under the public health department. Through this project, the Ministry of Health in collaboration with different ministries, Ministry of Education, Ministry of Justice, we developed a technical working group that brings together ideas on how to support or have a pool of funding through the Government system, Government mechanism in order to support the ATscale programme here in Vanuatu. The ATscale coordinators sit within the Ministry of Health and we do have sub-coordinators sitting in the different ministries, Ministry of Education and Ministry of Justice. These are staff paid by the Government so whatever they have in terms of their annual work plans, budgets, we then utilize through those budgets in order to implement alongside the target areas for the ATscale project. This is an example of how the Ministry of Health and the Ministry of Education and Justice in Vanuatu ensure that domestic financing is visible and made through the annual budgets for the different ministries. We are trying to think on how we can sustain the project and when we think

around sustainability in Vanuatu we are looking at 3 different areas. Capacity building, upskilling of community workers who will be able to continue the screening at their own time, at their own pace in the community. The other one is procurement so what we decided to do here in Vanuatu is thinking around how to ensure that through the project we build a system that is sustainable to procure devices in the long run after the project comes to an end, to build a system responsible to procure so that they will be able to in the long run for sustainability purposes support the idea of domestic financing and especially the sustainability of this project going forward. The research will be key to elevating the ATscale project. For Vanuatu it is a new programme and despite that we do have different departments and units under the Ministry of Health who are currently providing the service, the eye department, the ENT, the physio department, the Government of Vanuatu is not yet onboard especially on purchasing the devices, but this is something that we want by the end of the project or for sustainability, we want the Government to be able to take the initiative to take ownership of the project and the programme and the assistive technology needs here in Vanuatu. Continuous technical assistance will be needed for guidance and seeking support and directions on how to scale the project going into the future and as I already mentioned, partnership will be a key component here in addressing those challenges, collaboration will be key in partnership as well as evidence and data.

>>SATISH MISHRA

Thank you Norika and because of connectivity issues we felt it was safer to have the intervention through this pre-recorded video. What Norika mentioned and elaborated on, at least in Vanuatu, what the Government is trying to do is to get different ministries together and get different departments together, and the importance of capacity building of Government stakeholders as well as bringing effectiveness in their existing work, whether it is on procurement or service delivery. It is a great start of a journey to strengthen domestic financing in Vanuatu. Thank you Norika for that intervention. I think it is another good time now to listen from development partners like the World Bank who are often at the centre of financing countries and it is a pleasure to invite our good friend and colleague Ben Zinner who is the senior health specialist at World Bank currently based in Cambodia. Ben, if I can ask a few questions. What do you find the most important highlight of this technical report? The report argues about having dedicated budget lines which comes with its own advantages as well as challenges. How do you see this as an opportunity for increasing domestic resources and effectiveness through dedicated budget lines? And third, if you can give us an example from another health area, be it pharmaceuticals, non-communicable diseases or another example which can be applied in the space of assistive technology. Over to you Ben please.

>>BEN ZINNER

Thank you Satish. Ben Zinner from the World Bank and it is great to be part of this event, I congratulate ATscale and Jens for this report. It is a call to action from the AT community. From the context of Cambodia, one thing I want to underscore is that the barriers to financing assistive technology are really the same barriers that countries face when they decide how to

finance any kind of health or social benefit. At the end of the day they have to decide who should be covered for what coverage. In many countries social health protection or social health insurance are at a range of different levels of sustainability. In the context of Cambodia also it is important to remember that rehabilitation services were largely developed in the aftermath of a civil war where you had significant levels of need and war injuries and at the same time you had an influx of donor financing and non-governmental organisations helping to meet the need which takes the pressure off of the Government that is constrained in terms of resources, in terms of service delivery capacity. But that context has really shifted. Initially the international response helped create physical rehabilitation centres that provided free access to assistive technology across the country and a lot of that was built with international funding. The needs are now evolving, the predominant drivers of need in terms of assistive technology are shifting to increasingly injuries from road traffic accidents, occupational injuries, consequences of diseases. So the health system is playing a growing role in addition to social protection and at the same time financing has shifted quite substantially so Cambodia has seen a longer decline in funding for rehabilitation services and in part that reflects what is a natural trajectory from a post war recovery. The challenge is, how do you make sure that domestic financing keeps pace and the delivery of those services becomes more integrated into the system over time? This is also important given the events of the past year and a half to acknowledge the broader global shifts in ODA and development assistance, particularly in the health sector and on top of that, the impact of global conflict on energy costs across sectors which creates new fiscal constraints for governments. What does this mean for health and social services, in particular assistive technology? Ministries of Health are being asked to fund more for more people and they often don't have the means to do it. When I go into the Ministry of Health now the refrain in every department is how do we get the attention of the Ministry of Finance for our priorities and how do we embed the services that we're trying to deliver within social insurance or social health protection schemes so more people are covered. Global funding has declined so one key question is how do we make the needs of people with disabilities, people in need of assistive technology visible in the policy process? That is another thing that I think the report touches on that is important, this fragmentation. Financing for assistive technology comes from a range of sources. You still have development partners, you have responsibilities across multiple ministries and you have multiple insurance schemes. The overall state of development of health insurance in Cambodia is just beginning. It is funded through ministry budgets. Social health insurance doesn't fully cover commodity costs for any health condition including the costs of assistive technology explicitly except in the National Social Security Fund which is largely covering the formal sector, but over half the population is non-poor so not eligible for the scheme but still without health care coverage. So it hits on this idea that explicit commitments are important. That is the beginning of transparency about entitlements that can be used as a tool to shine a light and guide prioritisation across multiple actors. I appreciate what Norika said about cross-sector governance and coordination, there has to be that leadership to really make sure that different benefits and financing can connect. Finally I think another key element is to better target those most in need. The World Bank in Cambodia is partnering in the context of social health insurance looking at utilisation patterns, trying to understand drivers of out-of-pocket costs and who in the total population of people that may need assistive technology

is most in need of financial protection. Some people in need of AT may not be as financially at risk so framing the investment cases is important and being clear about who is most in need and at risk, who is incurring catastrophic costs to tailor policy solutions and quantifying the economic and social returns of meeting those needs, and grappling also with the question that free coverage may not be feasible in many contexts so if it is not, where to start? Understanding the context of health financing is really important and I think again this report is so helpful to the AT community. In closing I would say the challenge is really not so much to convince people that AT matters but really to understand and influence the priority setting process wherever that is happening. Making needs and costs more visible and trying to embed assistive technology

within budgets and within broader reform contexts. Thank you.

>>SATISH MISHRA

Thank you Ben. Thank you very much for briefing and explaining to us what is happening in Cambodia and what can be done with regards to domestic funding for assistive technology. We'll take a few questions. Very quickly, probably this one for you Jens, how can Government prioritise assistive technology within constrained public budgets while balancing multiple priorities across health, education, social protection among others? Assistive technology being cross-sectoral is often the one that gets dropped because of other priorities not being sector-specific. In those situations how can the Government prioritise that and what should the Government do?

>>JENS WILKENS

Yeah, thank you Satish. First of all thank you to everybody who has been speaking, and thank you for all the good questions in the chat. To this one specifically, the challenge is very much that anybody who goes to the Ministry of Finance where the core of the allocation of resources takes place will meet a similar attitude in all countries in my experience, which is that the civil servants there keep their funds tight to themselves. They are scared of overspending, so they are not so much focused on the impact, the actual outcomes. They are budget people. They want to make sure that the budget lines are held, they are not focused on the effects side so much. That is a fundamental challenge. Having said that, people above them, Prime Ministers' offices, are interested in impact and satisfaction across the population so being able to explain the benefits of assistive technology is key here. There is a lot of work to be done because what we've done so far is the advocacy side of it. We can make use of that more, but as we state and explain in the report, this sector must become better at creating the data and scientific evidence of both needs, utilisation and impact, so that it becomes possible to produce regular statistics on what the need looks like, prevalence basically, what utilisation of assistive technology products and services looks like, and the impact of it. When we can measure these things more carefully, then we can also show cost effectiveness. We can show what is effective in terms of outcome relative to cost. This relates very much to the APL investment, both global and national assistive products list development which builds on the effectiveness of products. But we cannot only relate it to cost as budget impacts. We need to relate it to the ratio between costs and

effectiveness, cost utility and cost effectiveness. We have to be better at showing that and for that we need data. Yeah, that is one way of answering in short, Satish.

>>SATISH MISHRA

Thank you, I see there are many good questions and we are overshooting with the time so we will ensure that we write to you individually and respond to the questions. Thank you everyone for this discussion and apologies for running over time. The technical report is available online, my colleagues will share the web link of the report in the chat, the webinar recording will be shared publicly on the ATscale website as well and through social media platforms. We're excited, the next webinar will happen today at 4 o'clock Central European Summer Time on the same topic of domestic financing but capturing other geographical regions, and the next one will be on ear and hearing package interventions in October when everyone will be invited. Invitations will be shared soon on the timing of the next webinar. In the end we hope today's webinar will not be the end of the conversation but the beginning of an ongoing dialogue and collective effort for domestic financing. I'd like to thank all the speakers and partners and participants of this webinar who joined us today and I'd like to thank my colleagues in ATscale for all the efforts put into the development of this report as well as in organising this webinar. Have a great day or night ahead depending where you are. Thank you very much and thank you for joining.

Thank you, I think that really sets the stage for this particular webinar so thank you very much. Now let me invite Jens Wilkens who has led the development of this report. Jens, as I mentioned earlier is a technical advisor at ATscale. He is also a researcher at Lund University in Sweden. He will have practical recommendations that have stemmed from this research. Jens the floor is yours please.

>>JENS WILKENS

Thank you very much Satish. This movie about Ineza is very telling I must say. It is very good and in a sense it has presented the report I think very much. I will try to give some more, put some more meat to the bones with this short presentation. I'm very proud to present this report. It is a sector that has been neglected too long. It still needs more attention, both in terms of financial resources which we'll talk about today, but more importantly how these resources are deployed. Next slide please.

>>SATISH MISHRA

Thank you Jens, thank you, thank you very much and also thank you for presenting the assessment findings as well as some of the recommendations which come out of it and I think your particular emphasis on effective use of existing resources and how that can be used more smartly and how do we need to think more from an impact perspective rather than from access perspective alone. Thank you very much. I again want to thank you and all the coauthors who are listed in this particular document in this particular report who have contributed in making this a valuable knowledge resource in the space of financing for assistive technology. Thank you. I

think now is a perfect time to invite different stakeholders who are often related to the ecosystem for financing for assistive technology, the users, the government representatives, the stakeholders as well as the development partners. Let's start from the assistive technology users and it is a pleasure to invite Ida Putri from Indonesia. She is a disability activist and her work focuses on evidence based advocacy for policy reform. Ida, it will be great if you can share your own story and if you have one recommendation for the Government as well as development partners and stakeholders for greater affordability of assistive technology, what that particular recommendation will be. Over to you Ida please.

>>IDA PUTRI

Thank you Satish. Hello everyone. Good afternoon from Indonesia. Some of you are still in the morning. Talking about assistive technology financing resources in Indonesia there are 3 major funding sources for AT. The first one coming from the Government through ministry of social affairs and the second from philanthropists. Those two are mainly to be given for people who are under the poverty line, and the third one is a national health insurance scheme. Unfortunately the scheme only covers 8 products out of 50 product lists on WHO and the amount of the funding given to the product is limited and from the study that we held in 2023 limited information related to this scheme, many of them are not aware of this scheme. For myself I am using a wheelchair, I had a manual wheelchair before. It was from the organisation where I work for so I got it for free and my current wheelchair is a power wheelchair, I had to buy it myself because from those 3 schemes unfortunately I'm not eligible for it, I'm not living under the poverty line, however to afford an electric wheelchair is quite an issue for me, it is quite pricey so I needed to save for a couple of months before I could afford to buy the wheelchair and not only when I buy the wheelchair and I don't have to spend any other money to do my daily activities with the wheelchair, there are extra costs that I need to pay for maintenance, like many cases I also heard from my colleagues in my country that maintenance is not covered by any scheme so they have to get money out of their pocket to fix if there is any damage on their assistive technology or any spare parts that need to be replaced and there is no scheme how to fund this specific issue. The other aspect, many people are not aware but we need to have extra support, how we can use the assistive technology freely, like for example when I use my wheelchair I need to take a taxi or I need to have a wagon so I can bring my wheelchair with me, but if I don't use my wheelchair I can take a motorcycle so the cost to rent a taxi is quite a gap and there is no, sometimes it is not something that people are aware of. The other aspect in 2016 when I worked in an organisation providing assistive technology I met a mother. She obtained a wheelchair for her daughter. It is a complex rehab wheelchair so it is quite big. She went to the office by public transport but when she went home it was difficult for her because the wheelchair would not fit into the bus. She needed to get a big taxi and she faced difficulties because she could not afford to get a taxi so it is something that is not considered by the service provider who provides the wheelchair, that they have given the product but extra money for how the product can really support the daily life of people with a disability. And another story in 2021 me and some of my colleagues performed a survey and we met. Another way on how to make the assistive technology affordable is to have the local components, they make their own

assistive products. It is a wooden prosthesis. Custom designed for them and it is more affordable for people because there is wood surrounding them so they are able to make it at a cheaper price and also I met a woman, she used a wooden stool to support her mobility, like a walker, but it is really a custom design for her. It is one way out how to use a local resource to develop assistive technology made for them and as Satish mentioned about the recommendation, my recommendation is to consider not only the product but also other costs that might come with the product so people with disability can use their assistive technology freely and really be able to support their daily life. I think that is my story here and I hand it over to you Satish, thank you.

>>SATISH MISHRA

Thank you very much for sharing your own story and your own experience in Indonesia with regards to access to assistive technology, and also your point that when we are designing financing solutions at the country level we just don't need to think about product and the services along with that but also the associated costs in accessing those services which needs to be kept in mind when we're designing these financing solutions. Thank you very much Ida for that. It is now a good time to invite a Government representative for their perspective. Let me invite Norika Toumak Watt who is the national mental health coordinator in the Government of Vanuatu. Norika is the focal point for assistive technology. Norika will make her presentation through video. Can we have the AV please.

>>NORIKA TOUMAK WATT

My name is Norika, I work as the mental health coordinator under the public health department. Through this project, the Ministry of Health in collaboration with different ministries, Ministry of Education, Ministry of Justice, we developed a technical working group that brings together ideas on how to support or have a pool of funding through the Government system, Government mechanism in order to support the ATscale programme here in Vanuatu. The ATscale coordinators sit within the Ministry of Health and we do have sub-coordinators sitting in the different ministries, Ministry of Education and Ministry of Justice. These are staff paid by the Government so whatever they have in terms of their annual work plans, budgets, we then utilize through those budgets in order to implement alongside the target areas for the ATscale project. This is an example of how the Ministry of Health and the Ministry of Education and Justice in Vanuatu ensure that domestic financing is visible and made through the annual budgets for the different ministries. We are trying to think on how we can sustain the project and when we think around sustainability in Vanuatu we are looking at 3 different areas. Capacity building, upskilling of community workers who will be able to continue the screening at their own time, at their own pace in the community. The other one is procurement so what we decided to do here in Vanuatu is thinking around how to ensure that through the project we build a system that is sustainable to procure devices in the long run after the project comes to an end, to build a system responsible to procure so that they will be able to in the long run for sustainability purposes support the idea of domestic financing and especially the sustainability of this project going forward. The research will be key to elevating the ATscale project. For Vanuatu it is a new

programme and despite that we do have different departments and units under the Ministry of Health who are currently providing the service, the eye department, the ENT, the physio department, the Government of Vanuatu is not yet onboard especially on purchasing the devices, but this is something that we want by the end of the project or for sustainability, we want the Government to be able to take the initiative to take ownership of the project and the programme and the assistive technology needs here in Vanuatu. Continuous technical assistance will be needed for guidance and seeking support and directions on how to scale the project going into the future and as I already mentioned, partnership will be a key component here in addressing those challenges, collaboration will be key in partnership as well as evidence and data.

Thank you Norika and because of connectivity issues we felt it was safer to have the intervention through this pre-recorded video. What Norika mentioned and elaborated on, at least in Vanuatu, what the Government is trying to do is to get different ministries together and get different departments together, and the importance of capacity building of Government stakeholders as well as bringing effectiveness in their existing work, whether it is on procurement or service delivery. It is a great start of a journey to strengthen domestic financing in Vanuatu. Thank you Norika for that intervention. I think it is another good time now to listen from development partners like the World Bank who are often at the centre of financing countries and it is a pleasure to invite our good friend and colleague Ben Zinner who is the senior health specialist at World Bank currently based in Cambodia. Ben, if I can ask a few questions. What do you find the most important highlight of this technical report? The report argues about having dedicated budget lines which comes with its own advantages as well as challenges. How do you see this as an opportunity for increasing domestic resources and effectiveness through dedicated budget lines? And third, if you can give us an example from another health area, be it pharmaceuticals, non-communicable diseases or another example which can be applied in the space of assistive technology. Over to you Ben please.

>>BEN ZINNER

Thank you Satish. Ben Zinner from the World Bank and it is great to be part of this event. I congratulate ATscale and Jens for this report. It is a call to action from the AT community. From the context of Cambodia, one thing I want to underscore is that the barriers to financing assistive technology are really the same barriers that countries face when they decide how to finance any kind of health or social benefit. At the end of the day they have to decide who should be covered for what coverage. In many countries social health protection or social health insurance are at a range of different levels of sustainability. In the context of Cambodia also it is important to remember that rehabilitation services were largely developed in the aftermath of a civil war where you had significant levels of need and war injuries and at the same time you had an influx of donor financing and non-governmental organisations helping to meet the need which takes the pressure off of the Government that is constrained in terms of resources, in terms of service delivery capacity. But that context has really shifted. Initially the international response helped create physical rehabilitation centres that provided free access to assistive technology across the country and a lot of that was built with international funding. The needs

are now evolving, the predominant drivers of need in terms of assistive technology are shifting to increasingly injuries from road traffic accidents, occupational injuries, consequences of diseases. So the health system is playing a growing role in addition to social protection and at the same time financing has shifted quite substantially so Cambodia has seen a longer decline in funding for rehabilitation services and in part that reflects what is a natural trajectory from a post war recovery. The challenge is, how do you make sure that domestic financing keeps pace and the delivery of those services becomes more integrated into the system over time? This is also important given the events of the past year and a half to acknowledge the broader global shifts in ODA and development assistance, particularly in the health sector and on top of that, the impact of global conflict on energy costs across sectors which creates new fiscal constraints for governments. What does this mean for health and social services, in particular assistive technology? Ministries of Health are being asked to fund more for more people and they often don't have the means to do it. When I go into the Ministry of Health now the refrain in every department is how do we get the attention of the Ministry of Finance for our priorities and how do we embed the services that we're trying to deliver within social insurance or social health protection schemes so more people are covered. Global funding has declined so one key question is how do we make the needs of people with disabilities, people in need of assistive technology visible in the policy process? That is another thing that I think the report touches on that is important, this fragmentation. Financing for assistive technology comes from a range of sources. You still have development partners, you have responsibilities across multiple ministries and you have multiple insurance schemes. The overall state of development of health insurance in Cambodia is just beginning. It is funded through ministry budgets. Social health insurance doesn't fully cover commodity costs for any health condition including the costs of assistive technology explicitly except in the National Social Security Fund which is largely covering the formal sector, but over half the population is non-poor so not eligible for the scheme but still without health care coverage. So it hits on this idea that explicit commitments are important. That is the beginning of transparency about entitlements that can be used as a tool to shine a light and guide prioritisation across multiple actors. I appreciate what Norika said about cross-sector governance and coordination, there has to be that leadership to really make sure that different benefits and financing can connect. Finally I think another key element is to better target those most in need. The World Bank in Cambodia is partnering in the context of social health insurance looking at utilisation patterns, trying to understand drivers of out-of-pocket costs and who in the total population of people that may need assistive technology is most in need of financial protection. Some people in need of AT may not be as financially at risk so framing the investment cases is important and being clear about who is most in need and at risk, who is incurring catastrophic costs to tailor policy solutions and quantifying the economic and social returns of meeting those needs, and grappling also with the question that free coverage may not be feasible in many contexts so if it is not, where to start? Understanding the context of health financing is really important and I think again this report is so helpful to the AT community. In closing I would say the challenge is really not so much to convince people that AT matters but really to understand and influence the priority setting process wherever that is happening. Making needs and costs more visible and trying to embed assistive technology

within budgets and within broader reform contexts. Thank you.

Thank you Ben. Thank you very much and thank you for briefing and explaining to us what is happening in Cambodia and what can be done with regards to domestic funding for assistive technology. We'll take a few questions. Very quickly, probably this one for you Jens, how can Government prioritise assistive technology within constrained public budgets while balancing multiple priorities across health, education, social protection among others? Assistive technology being cross-sectoral is often the one that gets dropped because of other priorities not being sector-specific. In those situations how can the Government prioritise that and what should the Government do?

>>JENS WILKENS

Yeah, thank you Satish. First of all thank you to everybody who has been speaking, and thank you for all the good questions in the chat. To this one specifically, the challenge is very much that anybody who goes to the Ministry of Finance where the core of the allocation of resources takes place will meet a similar attitude in all countries in my experience, which is that the civil servants there keep their funds tight to themselves. They are scared of overspending, so they are not so much focused on the impact, the actual outcomes. They are budget people. They want to make sure that the budget lines are held, they are not focused on the effects side so much. That is a fundamental challenge. Having said that, people above them, Prime Ministers' offices, are interested in impact and satisfaction across the population so being able to explain the benefits of assistive technology is key here. There is a lot of work to be done because what we've done so far is the advocacy side of it. We can make use of that more, but as we state and explain in the report, this sector must become better at creating the data and scientific evidence of both needs, utilisation and impact, so that it becomes possible to produce regular statistics on what the need looks like, prevalence basically, what utilisation of assistive technology products and services looks like, and the impact of it. When we can measure these things more carefully, then we can also show cost effectiveness. We can show what is effective in terms of outcome relative to cost. This relates very much to the APL investment, both global and national assistive products list development which builds on the effectiveness of products. But we cannot only relate it to cost as budget impacts. We need to relate it to the ratio between costs and effectiveness, cost utility and cost effectiveness. We have to be better at showing that and for that we need data. Yeah, that is one way of answering in short, Satish.

Thank you, I see there are many good questions and we are overshooting with the time so we will ensure that we write to you individually and respond to the questions. Thank you everyone for this discussion and apologies for running over time. The technical report is available online, my colleagues will share the web link of the report in the chat, the webinar recording will be shared publicly on the ATscale website as well and through social media platforms. We're excited, the next webinar will happen today at 4 o'clock Central European Summer Time on the same topic of domestic financing but capturing other geographical regions, and the next one will be on ear and hearing package interventions in October when everyone will be invited. Invitations will be shared soon on the timing of the next webinar. In the end we hope today's

webinar will not be the end of the conversation but the beginning of an ongoing dialogue and collective effort for domestic financing. I'd like to thank all the speakers and partners and participants of this webinar who joined us today and I'd like to thank my colleagues in ATscale for all the efforts put into the development of this report as well as in organising this webinar. Have a great day or night ahead depending where you are. Thank you very much and thank you for joining.