INTRODUCTION

Launched at the Global Disability Summit in July 2018, ATscale, the Global Partnership for Assistive Technology, put forward the goal of reaching 500 million more people with life-changing assistive technology (AT) by 2030 to enable a lifetime of potential. ATscale is a cross-sector partnership for AT that brings new energy and strategic focus to a significant global challenge. Building upon the foundation that leaders within the sector have established, ATscale will revolutionise access to AT through a collective effort, supporting the global community to have an impact greater than the sum of its individual parts. Increased access to AT is critical to achieve many global commitments including universal health coverage, the ideals of the UN Convention on the Rights of Persons with Disabilities (CRPD), and the ambitious Sustainable Development Goals (SDGs).

The ATscale Forming Committee, currently comprised of 11 organisations, prepared a strategy to guide ATscale through the initial phase of its development and early activities, as well as to inform the establishment of its long-term structure and operating model. A variety of rigorous analyses, including initial AT market assessments, key informant interviews, and high-level secondary research, informed ATscale’s strategic priorities, objectives, and proposed focus areas. This early work, which incorporated input from the broader AT and global health communities, illuminated many barriers to achieving access to affordable, high-quality, and appropriate AT. ATscale will continue to refine its understanding of the greatest challenges and most critical interventions required and will utilise the collective strength of committed organisations to address these barriers and achieve its overarching goals.

This overview document outlines ATscale’s vision and mission, its guiding principles and interim organisational model, as well as strategic priorities and near-term objectives. While this strategy overview was developed by the Forming Committee, ATscale seeks ongoing input from all stakeholders including, but not limited to: AT users, governments, donors, implementing partners, technical experts, the private sector, and civil society. Over time, specific guiding documents related to both operations and technical activities will also be developed to support and advance ATscale’s strategy. The ATscale Forming Committee looks forward to refining and strengthening its approach through consultation and input on its strategy and supporting documents to enable more people to have access to affordable, appropriate AT.

1 Pronounced as “A” “T” “scale”
2 In particular, ATscale will contribute to SDGs 1: Eradicate poverty in all forms and dimensions, targeting the most vulnerable; 3: Ensure healthy lives and promote well-being for all; 4: Ensure inclusive and equitable quality education for all; 8: Promote inclusive and sustainable economic growth and productive employment; 9: Promote sustainable industries, particularly investing in scientific research and innovation; 10: Reduce inequality within and among countries; and, 17: Enhance North-South and South-South cooperation by supporting national plans.

ASSISTIVE TECHNOLOGY (AT) is an umbrella term covering the systems and services related to the delivery of assistive products such as wheelchairs, eyeglasses, hearing aids, prosthetics, and personal assistance devices.
THE GLOBAL NEED FOR ASSISTIVE TECHNOLOGY

Today, over 1 billion people need at least one form of AT, but over 900 million people (90%) do not have access to the AT they require. The number of people who need AT is expected to grow to more than 2 billion people by 2050.4

Access to appropriate AT enables people with loss of function, disabilities, non-communicable diseases, and the aging population to participate in education, work, family, and community life. Lack of access to AT has significant consequences for individuals, their families, and the wider society. Without AT, individuals may experience isolation and exclusion from education, the labour market, and civic life. Lack of access to appropriate AT causes poorer health outcomes including premature death, deteriorating mental health, and increased risk of chronic health conditions and secondary complications, all of which lead to a higher burden on health systems. Increasing accessibility and affordability of AT unlocks unrealised economic potential and provides socioeconomic benefit for individuals, families, and countries by increasing productivity and participation in the workforce.

When addressing the gap in access to AT, it is important to recognise that there is a direct correlation between poverty and disability – each one exacerbating the other. For example, in 2016, 95% of children with developmental disabilities were based in low and middle-income countries (LMICs).5 Further, situations including conflict and emergencies exacerbate challenges around access to AT. During disasters and conflict, persons with disabilities are more likely to be left behind, abandoned, or neglected. They may also lose essential medications and assistive devices, reducing their level of functioning and resulting in increased dependence on caregivers.6 With this in mind, as 68.5 million people worldwide were forcibly displaced last year, including an estimated 10 million people with disabilities, it is evident that millions of people globally are facing severe and unique challenges in accessing and maintaining AT.7

As the global community tackles the challenges around access to AT, it is critical to focus on bringing AT to under-represented and vulnerable communities globally, while also ensuring that work is done in contexts where enabling factors are in place to sustain gains and to build on progress.

THE CHALLENGES

Lack of Enabling Environment

Despite the evidence and consensus around the huge unmet need for AT, research shows that there is a wide range of systemic, underlying environmental challenges and cross-cutting factors contributing to the challenge in matching appropriate supply and demand for AT. These include: inconsistent political will to prioritise AT; a lack of understanding of the role and function of AT in improving health, social, and economic outcomes; a lack of commercial focus on emerging markets for AT; significant gaps in resources and investment in AT; a challenging environment for emerging technology and innovation to enter the market; insufficient data on impact to drive investment; information-failures in the market place; public (especially health) system and service delivery network weaknesses; discrimination and stigma, particularly at the community level; and a lack of global coordination for activities and investments in AT.

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Market Barriers

Market barriers limit both supply and demand of AT, and many are intertwined with gaps in the enabling environment. Lack of demand for AT may be from users, service providers, and/or country governments. Obstacles to clearly articulated global demand include: inadequate funding and lack of inclusion in insurance schemes; fragmented procurement; weak national policy frameworks; complex distribution and logistics; limited service delivery capacity; insufficient product and service standards for various contexts; inadequate number of trained providers and appropriate products; and stigma and discrimination involving those requiring AT. All of this is compounded by a lack of awareness of available AT among users, potential users, service providers, and country governments.

On the supply-side, there are limitations on AT products related to availability, affordability, appropriate design, and assured quality. The related barriers are multi-faceted. As a result of many different challenges, there is insufficient participation by AT manufacturers and suppliers in LMIC markets. Further, where they do participate, prices are usually high, and product and services are only available for more affluent segments of the population. Additional supply-side challenges include: high manufacturing and procurement costs; complex distribution, logistics, and service delivery systems; lack of adequately trained workforce; ineffective investment in innovation; absence of user-centric innovation; complex and long processes required for bringing new products to market; and an absence of standards and guidelines. In order to improve upon supply, demand, quality, and prices in LMICs for AT, a coordinated approach to overcoming identified market barriers is needed to continue to build and shape the market for AT.

THE OPPORTUNITY – A GLOBAL PARTNERSHIP

Globally, while progress has been made in improving many aspects of AT delivery, the sector has been fragmented and under-resourced for some time. Today, there is increased momentum and interest in bringing together different perspectives and
voices to focus on AT. As advocated for by the World Health Organization’s (WHO) Global Cooperation on Assistive Technology (GATE) and its partners, countries are now recognising the necessity of AT coverage to realise their commitments to the Sustainable Development Goals (SDGs) and the UN Convention on the Rights of Persons with Disabilities (UNCRPD). In line with this, the 71st World Health Assembly in 2018 passed a resolution on improving access to AT. To uphold these commitments and influence the complex systems for AT access, a broad set of stakeholders across sectors is needed to invest in and coordinate a multi-faceted, systematic approach spanning market shaping, capacity development, and policy reform.

A global partnership, such as ATscale, enables partners who work in distinct sectors to collaborate within a unified strategy and facilitates complementary approaches, innovation, and capacity building. It is a unique opportunity to build on current and past work to address the entire ecosystem related to AT by coordinating around a common agenda, raising political will and increasing momentum, mobilising and leveraging resources within countries, spurring public and private investment globally, strengthening systems, leveraging market shaping approaches, measuring progress, and sharing best practices. This coordinated approach, convening a broad range of leading stakeholders across sectors, will increase access to affordable, appropriate, and high-quality AT products and services, all while supporting a strong enabling environment.

STRATEGY

2030 Goal  |  ATscale’s goal is to catalyse action to ensure that 500 million more people globally are reached with life-changing AT by 2030.

Vision  |  ATscale’s vision is to enable a lifetime of potential where every person can access and afford the life-changing AT they need.

Mission  |  ATscale’s mission is to build a cross-sector partnership that is a catalyst for change, amplifies existing work, and coordinates and mobilises global stakeholders with a unified strategy to increase availability of and access to affordable and appropriate AT.

Guiding Principles

ATscale is guided by a set of core principles, which underpins its activities and approach. ATscale’s work is:

- **User-centric:** Putting the needs and interests of AT users at the centre of all initiatives
- **Equitable:** Ensuring all individuals have the opportunity to access AT to improve their quality of life, with a particular focus on underrepresented and vulnerable populations
- **Catalytic:** Focusing on initiatives that address systemic challenges and barriers
- **Galvanising:** Driving collaboration among a diverse set of stakeholders to push large-scale change
- **Evidence-based:** Building and using the required data to focus on and invest in what works
- **Entrepreneurial:** Maintaining flexible and lean organisation that enables innovation among members as well as across the AT sector
- **Empowering:** Enabling users, governments, civil societies, and other stakeholders to participate in and take ownership of country-specific AT initiatives
Overarching Strategic Priorities

ATscale will work across six interdependent priorities. These constitute critical areas to invest in to drive transformation in availability and access. These priorities include:

- **Generate data and evidence:** Coordinate collection and creation of required data and build evidence base of what works
- **Spark innovation and new solutions:** Enable a market-led approach to inventing solutions for service delivery, products, and systems
- **Drive affordability and availability:** Test and drive market shaping strategies to increase and better align supply and demand
- **Strengthen policy, systems, and implementation:** Create enabling policies, standards, and other tools to support innovation and implementation of AT systems and services
- **Build capacity and participation:** Expand capacity of AT users, countries, and workforce at global and country levels to increase participation and ownership
- **Galvanise investment and political support:** Deepen advocacy efforts to increase public-private investment and ensure political will at the global and country levels

ATscale’s activities will primarily focus on LMICs; however, broad engagement will be critical to achieve global impact. While country-specific work will be important in overcoming barriers, leveraging opportunities, and mobilising resources, there will also be an emphasis on establishing strong global markets and growing an overall enabling environment, which will require global engagement.
IMMEDIATE OBJECTIVES FOR 2019 – 2021

ATscale’s strategy development process has included a wide-range of discussions with those in the AT community, engagement with potential new partners, and in-depth technical analysis. This process has led to the proposed twin-track approach that will seek to (1) develop an enabling environment across all AT on global, regional, and national levels and (2) identify targeted, catalytic interventions to address both supply and demand barriers to access for priority products. These two tracks, defined by the objectives below, are mutually reinforcing:

1. **OBJECTIVE I:** Develop an enabling environment for increased access to high-quality, affordable AT by growing political will, advocating for and informing policy reform, mobilising investment, and strengthening systems and service delivery at global, regional, and country levels

Political commitment at the global, national, and sub-national levels is critical for translating need into increased, funded demand for AT. This is true for stakeholders including governments, donors, and civil society across all levels. Further, there are policy, financing, service delivery, and system changes required to create an enabling environment that supports appropriate provision of AT for existing and potential users. This space requires new investment, new incentives for a variety of stakeholders to engage, and the channelling of existing funding into the most catalytic interventions. ATscale will identify and develop interventions to address the enabling environment at all levels, including within specific countries, and will evaluate opportunities across contexts, including emergency settings.

To support this first objective, ATscale will evaluate existing information about challenges and opportunities and conduct select additional analyses to inform an investment case and advocacy plan, as well as to identify investable cross-cutting interventions to increase accessibility and affordability of appropriate AT. These analyses and identified subsequent interventions will likely span a variety of focus areas at the global and country levels, particularly for LMICs, including:

- Level of policy, political will, and broad awareness
- Need for and availability of financial resources (e.g. donors, domestic commitments, insurance reimbursement)
- Active engagement of stakeholders
- Availability and quality of data and evidence
- Level of acceptance and stigma
- Need for and structure of increased planning and management
- Capacity of systems to provide AT, including trained human resources
- Availability and quality of cross-cutting systems for products (e.g. product specifications and supply chains)

The outputs of these analyses will support the development of an investment case and global advocacy plan for AT.

The **investment case** will provide a clearer picture of the requirements and opportunities for this space to attract new investors, as well as to advocate for increased, catalytic funding from those already committed. This case will articulate the value of investing in AT, provide a framework to estimate the investment needed at the global level, and address the cost of inaction. This document will inform both implementers and funders and will establish a robust foundation from which to collectively advocate for investment within and beyond ATscale, including funding that has not otherwise been available to this sector.

The **global advocacy plan** will set out to: a) build political will and raise awareness to garner more investment and support for AT; b) identify key areas of policy change needed; c) establish needs and mechanisms for systems strengthening; d) promote innovation, emerging technology, and new service...
delivery models; and, e) highlight strategies and activities to address stigma and discrimination. Other components may also be identified in the initial analysis phase. Leveraging the global AT investment plan and results from supporting analyses, this plan will stratify the key messages, forums for engagement, and approaches by stakeholder type, including specific roles for multilaterals, bilateral donors, governments, and private and civil society actors.

The global investment case and the advocacy plan will also support the development of country-specific frameworks to unlock additional funding and support countries to create well-articulated, effective programs and to implement policy and systems reform. Interventions may target specific systems strengthening needs, necessary policy changes, strategies to address stigma and discrimination, and broader service delivery barriers.

2 OBJECTIVE II: Identify interventions required to shape markets and overcome supply and demand-side barriers for priority AT

The experience of market shaping for global health to date demonstrates that successful market shaping interventions need to be developed using robust analysis, tailored to specific markets. To this end, ATscale will complement its cross-cutting activities targeted at developing an enabling environment with in-depth analysis and development of interventions specific to its priority AT product areas. Building on analysis completed already, this work will identify key barriers and promising market interventions across the value-chain, stretching from research and development to production and procurement, all the way through to supporting service delivery at the user and healthcare worker levels. Outputs from this work will inform ATscale’s further programmatic interventions and investments and will also provide data and evidence to inform implementation and investments more broadly.

The scope of AT is large, and in order to focus the work and to develop a strong approach to apply across the sector, ATscale identified five priority product areas for this initial strategic phase. Specific product areas were selected through an analysis and assessment of the WHO Top 50 Priority Assistive Product List, which considered level of unmet need and the potential for impact through new market shaping approaches.

The five products and their associated services and systems for focus over the next few years include:

**PRIORITY PRODUCTS**

- Hearing Aids
- Prosthetics & associated devices
- Glasses
- Wheelchairs
- Smart PDAs & Tablets with accessible software/applications

To support this objective, ATscale will develop a market-oriented, product narrative for each priority AT, identifying investable opportunities.

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8 As ATscale further develops its operational plan outlining targeted activities and interventions to achieve its objectives, ATscale will develop a framework outlining selection criteria for country engagement. ATscale’s country engagement will align this framework, recognising also that many of ATscale’s partners are already working in specific geographies.
Product narratives will incorporate: a) the current and pipeline product landscape, state of access and provision, unmet need and stakeholders’ current engagement; b) key barriers to access; c) a detailed analysis on viability of hypothesised interventions, including vetting with countries, suppliers, and other stakeholders; d) recommendations of interventions to implement; e) metrics of success; and, f) risks and assumptions.

ATscale will ensure that product narratives are developed through a collaborative approach, seeking input from experts, suppliers, and other stakeholders throughout the drafting process. Further, once the draft product narratives are developed, there will be opportunities for the community to provide feedback on the proposed interventions through in-person and virtual roundtable discussions.

This twin-track approach will kick-start ATscale’s work and inform both its coordinated investment strategy and activities in the long-term. Both workstreams are mutually reinforcing and critical to increased accessibility and affordability of AT. The emphasis and relationship between the two objectives may evolve as ATscale matures. For example, product-specific interventions may be implemented principally in countries where the environment has been primed, enabling ATscale to leverage synergies and political will. ATscale will undertake monitoring and evaluation of activities to guide its overall evolution and to ensure it responds to the most current, robust evidence. As lessons are learned and evidence is established, new objectives in line with ATscale’s strategic priorities will be developed or expanded and interventions will be scaled up.

**ORGANISATION**

In this initial strategic phase, ATscale is governed by a Forming Committee, which oversees ATscale’s development, guided by an internal Statement of Principles collectively developed by the partner organisations. The Forming Committee advises on strategy, coordinates stakeholders, mobilises resources, measures and evaluates progress, identifies and considers potential interventions and investments, and will shepherd ATscale to its permanent structure. ATscale has a small staff facilitating its daily operations including a Director who reports to the Forming Committee.

ATscale will help mobilise resources for the AT sector in line with its broad strategy, in addition to funding its own catalytic investments. These investments will be implemented by organisations that are best positioned to take on the particular initiatives, to be identified from across a broad community of multi-sectoral stakeholders as the interventions and initiatives arise. While ATscale is still in a formation phase, some of ATscale’s investment will also be made by its partners directly, in alignment with the common ATscale strategy. The first of these initial investments, the AT2030 programme, is providing a platform to generate evidence and test ideas that will support progress towards ATscale’s goals and further development. ATscale’s initiatives, including these initial direct investments by its partner organisations, are described on the website ([www.atscale2030.org](http://www.atscale2030.org)).
A priority for ATscale in this initial phase is to establish a more formal operating model and governance structure that harnesses the depth and breadth of the technical and operational expertise in the AT community to support effective performance. The future structure will likely include a small secretariat responsible for driving the goals of ATscale and implementation of its strategy, as well as a funding mechanism that supports coordinated investment.

MOVING FORWARD

Overall, ATscale’s path to its 2030 goal will likely fall into three phases. The initial phase (2019-2021) will involve demonstrating that ATscale, as a global partnership, can accelerate change leading to increased access to AT, as well as establishing a long-term organisational model. In the second phase (2022-2026), ATscale will expand its activities and seek additional investments as programmatic needs accelerate. The third phase (2027-2030) will emphasise taking what works across strategic priorities and geographies to scale.

The launch of ATscale marks a new, coordinated, global response to the challenge of increasing access to AT. As ATscale expands, it will evolve with contributions from stakeholders who are aligned with its vision, mission, and goal. Already, there is a role for interested stakeholders, including country governments, technical experts, implementers, funders, and private and civil society actors to engage with ATscale by:

- **Providing feedback** on the overall strategy and approach;
- **Contributing expertise** and input into technical documents, materials, and operational plans;
- **Aligning and accelerating** programming to the strategic priorities; and/or
- **Funding activities** linked to these initial areas of work or committing future funding.

ATscale will also identify opportunities to proactively engage with interested stakeholders via networks, such as WHO’s online GATE community, at key global events and forums, as well as through collaboration on complementary global initiatives such as the Global Report on Assistive Technology to be produced by WHO in 2021.

**CONTACT:** ATscale looks forward to engaging with the broader AT and global health communities on this strategy and related supporting materials as they are developed. Please contact Alison End Fineberg, Director of ATscale, at any time for additional information, to ask questions, or to share input: alison@atscale2030.org. Please also visit ATscale’s website: www.atscale2030.org.