Understanding and Advancing Canadian Policies for Equitable Access to Assistive Technology

RH Wang[1], MG Wilson[2], Z Batliwalla[3], CA Pollack[4], D Simeonov[5], and JE Bickenbach[6]

[1]University of Toronto, [2]McMaster Health Forum, [3]March of Dimes Canada, [4]AGE-WELL APPTA Hub, [5]AGE-WELL NCE, [6]University of Lucerne

Canadian Context

Federated nation with universal health coverage

Population of aged 65+ is growing: 17.2% (2018) → 20% (2024)

Population aged 15+ living with disability: 22.3% (2017)

Canadians with disability aged 15+ with unmet disability support need (e.g. aids, devices, medications): 26% (2017)

Despite being ratifying state, no comprehensive legislation or policy framework to facilitate implementation of UN CRPD

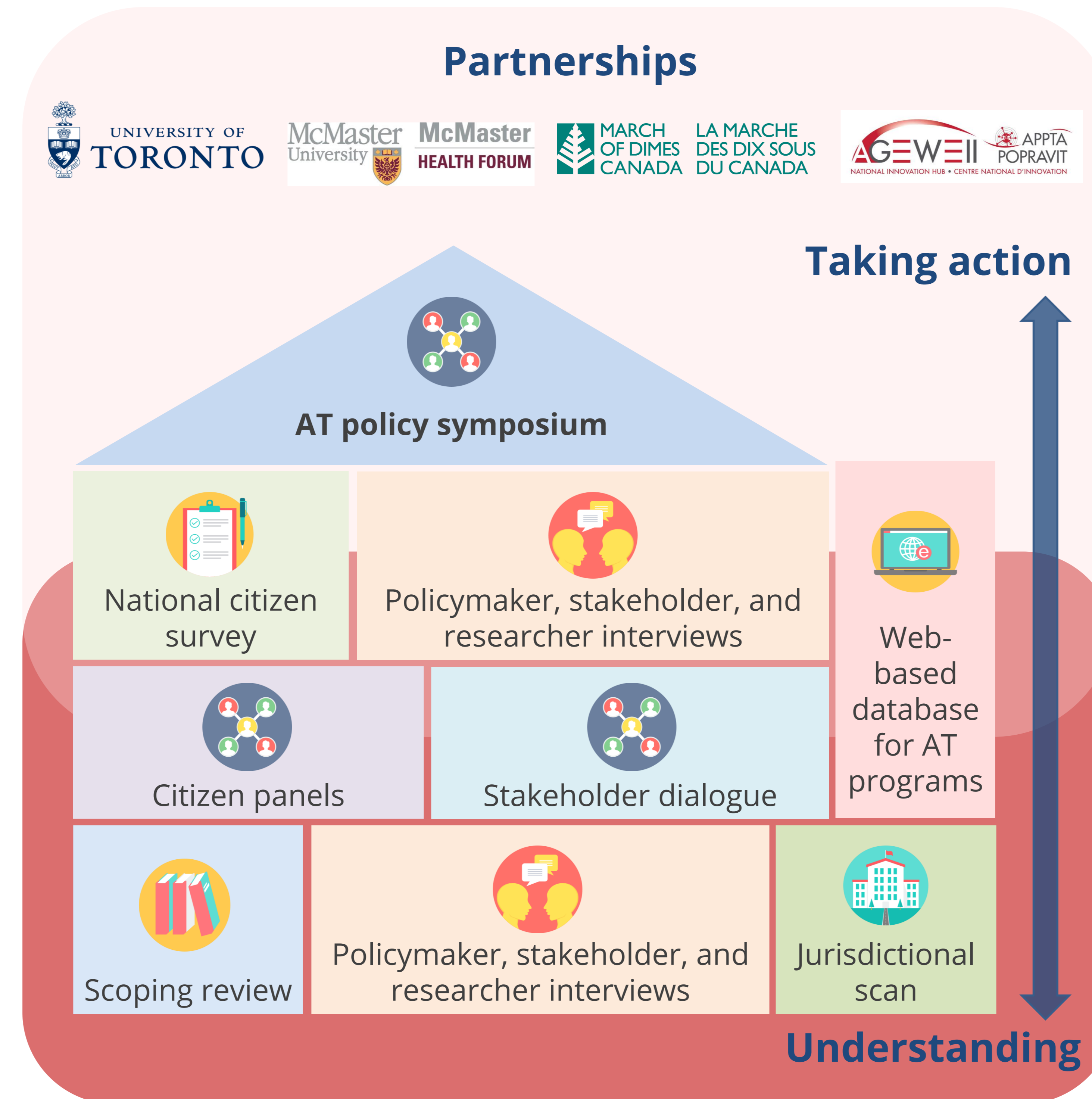**No universal access to AT**

Objective

To present insights from a Canadian initiative to support equitable access to assistive technology (AT), highlighting

- Comprehensive study findings of AT access issues;
- Need to transform approaches to meet needs of aging population and values for community-based solutions;
- Need to adopt a rights-based, person-centred, and co-creation approach to advance access
- Opportunities for enhancing access using a social model of disability and better alignment with CRPD

Overview of Approach

- Practices for policy innovation centered on *enhancing collaboration* and *knowledge mobilization* across disciplines, sectors, organizations, and jurisdictions
- *Integrated knowledge mobilization*: meaningful engagement of citizens, policymakers, stakeholders, and researchers in guiding all phases of initiative

Research Initiative

Partnerships

UNIVERSITY OF TORONTO — McMaster University — McMaster HEALTH FORUM — MARCH OF DIMES CANADA / LA MARCHE DES DIX SOUS DU CANADA — AGEWELL APPTA POPRAVIT

Taking action

AT policy symposium

National citizen survey | Policymaker, stakeholder, and researcher interviews | Web-based database for AT programs

Citizen panels | Stakeholder dialogue

Scoping review | Policymaker, stakeholder, and researcher interviews | Jurisdictional scan

Understanding

Results and Discussion

AT access system in Canada

- 14 jurisdictions (federal, 13 provincial/territorial): 86 government, 134 charitable organization AT funding and service programs
- Characteristics of AT system: Lacks national leadership and minimum standards; has variable legislation, policies, and programs across jurisdictions; lacks system integration between main providers; offers poor access to funding
- Reports of user experiences of inequitable AT access; disparities for certain groups, system navigation issues, unmet AT needs; universal lack of awareness and knowledge regarding AT and how to access AT
- Need to transform approaches to meet population needs and values for community-based solutions
- Need for rights-based, person-centred, and co-creation approaches for policy development and implementation

Developing a policy vision

- Stakeholder dialogue identified need for policy vision with clear set of short- and long-term priorities, principles to underpin policy actions can guide AT system transformation
- Significant leadership and collaboration needed to drive policy action
- Vision document can facilitate system champions to identify action plans to advance priorities in their jurisdictions

Opportunities

- CRPD obligation to make AT available/affordable and to support AT use
- Linking universal AT access with Accessible Canada Act, National Pharmacare

In Progress

- **Acting on recommendations to create policy vision which includes short- and long-term priorities and guiding principles to underpin action**
- **Co-creating national vision document and action plans to provide guidance to drive policy action and system transformation**

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