Colombian wheelchair sector: People, Policies, Products, and Provision
Sara Múnera\textsuperscript{1, 2}
Maria Luisa Toro\textsuperscript{3}
Jonathan Pearlman\textsuperscript{1, 2}

\textsuperscript{1} Human Engineering Research Laboratories, VA Pittsburgh Healthcare System
\textsuperscript{2} Department of Rehabilitation Science and Technology, University of Pittsburgh
\textsuperscript{3} Centro de Evaluación de Tecnologías en Salud, Facultad de Medicina, Universidad CES, Medellín, Colombia
Disclosures

• Presenter: Sara Múnera
  • University of Pittsburgh Master Student in Rehabilitation Science and Technology

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Overview

• Population
  • Case studies
• Policies
• Products
• Provision
• Brainstorm
Audience poll

Where do you work

CHANGE IT
Learning objectives

1. Summarize the methodology used to gather the wheelchair sector country-profile

2. Identify three characteristics of Colombia’s current demographic situation

3. List four current challenges to appropriate wheelchair provision in Colombia

4. Summarize at least one proposed strategy to face the presented challenges in Colombia
Methodology - country profile

• Need to understand the wheelchair needs and establish the roles to move the wheelchair sector forward

• Methodology:
  • Desk review of policies, research, demographics, etc.
  • Description of the experience working with wheelchair professionals and wheelchair users
Background

Urgent need for wheelchairs
- 15% of the population has a disability
- 1% needs a wheelchair
This prevalence is higher for developing countries

Access to appropriate wheelchairs is a right

Barriers to access
- Discrimination against people with disabilities
- Lack of education about this issue
- In developing nations only 15% of those who need a wheelchair have one

Background

Consequences of not having an appropriate wheelchair

- Health related issues
- Decrease independence, self-esteem, and confidence
- Poverty

Background

In developing countries

- Lack of accurate information:
  - people with disabilities
  - need for a wheelchair
  - local production or importation

- Data needed to improve access to appropriate assistive technology devices

- Supporting stakeholders in developing countries to gather information to advocate for the fulfillment of the right to personal mobility
People

Policies

Products

Provision
47.12 million

6.3% of the population was people with disabilities

Disability registry: this registry has only been able to measure to about 1 million people

People

- Wide social injustice
  - More than 70% have health coverage
  - Only 11% is able to access habilitation or rehabilitation services
- Less than 10% of people with disabilities had access to rehabilitation services
  - When asked about priorities:
    - access to education
    - built-environment accessibility
    - labor

People

No information about wheelchair needs nor access

- Higher prevalence of people requiring a wheelchair:
  - Longest civil war in the Americas
  - Rapidly aging population
  - High road traffic accidents
  - Poverty

People

People with disabilities with difficulties in ADL by age

Maintaining a body position
- 60 or more: 17,852
- 20-59: 73,229
- 0-19: 109,046
Total: 200,127

Walking short distances
- 60 or more: 15,554
- 20-59: 87,279
- 0-19: 193,772
Total: 296,605

Walking, running, jumping
- 60 or more: 44,519
- 20-59: 216,132
- 0-19: 330,653
Total: 591,304

MinSalud Sala situacional discapacidad, 2015
Case studies
<table>
<thead>
<tr>
<th>WHO recommendation</th>
<th>What happens in Colombia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referral and appointment</td>
<td>PCP to PM&amp;R</td>
</tr>
<tr>
<td>Assessment</td>
<td>PM&amp;R</td>
</tr>
<tr>
<td>Prescription (selection)</td>
<td>20-30 min session</td>
</tr>
<tr>
<td>Funding and ordering</td>
<td>Health care system approval</td>
</tr>
<tr>
<td>Product (wheelchair) preparation</td>
<td>Vendor takes measurement</td>
</tr>
<tr>
<td>Fitting</td>
<td>Wheelchair delivery</td>
</tr>
<tr>
<td>User training</td>
<td></td>
</tr>
<tr>
<td>Maintenance, repairs and follow up</td>
<td></td>
</tr>
</tbody>
</table>

WHO, 2011.
Carolina

• 17 years old
• T8 SCI, ASIA A (2 years ago)
• Lives with her mom in a rural area
• Cannot go to school because she can’t independently propel her wheelchair
• Mom quit working to take care of her
• Bigger brother working double shifts
• Sacral UPP (8 months old)
<table>
<thead>
<tr>
<th>Referral</th>
<th>Nurse in the local health center</th>
</tr>
</thead>
</table>
| Assessment                     | 2 months to get an appointment with a PCP  
                                   No assessment done |
| Prescription                   | Depo wheelchair, no cushion       |
| Funding and ordering           | Court appeal                      
                                   10 months process |
| Product preparation            | No product preparation            |
| Fitting                        | No fitting, a pharmacy sends the wheelchair on a box to the user’s house |
| User training                  | No user training                  |
| Maintenance, repairs and follow-up | No follow-up                     |
Javier

• 25 years old
• Myelomeningocele
• Lives by himself, works in AT support
• Has been using crutches but his shoulders are hurting so wants to start using a wheelchair

[ISWP, CES]
<table>
<thead>
<tr>
<th>Referral</th>
<th>Referred by the PCP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment</td>
<td>2 weeks to get an appointment with a PM&amp;R 30 minute evaluation</td>
</tr>
<tr>
<td>Prescription</td>
<td>Appropriate wheelchair according to user and environment’s needs</td>
</tr>
<tr>
<td>Funding and ordering</td>
<td>Out of pocket 1 month process</td>
</tr>
<tr>
<td>Product preparation</td>
<td>According to measurements</td>
</tr>
<tr>
<td>Fitting</td>
<td>Fitting process by vendor</td>
</tr>
<tr>
<td>User training</td>
<td>Vendor explain how to use the wheelchair (30 min)</td>
</tr>
<tr>
<td>Maintenance, repairs and follow-up</td>
<td>Vendor explains how to perform maintenance (30 min) follow-up 1 month later</td>
</tr>
</tbody>
</table>
Camilo

• 7 years
• Cerebral palsy GMFCS V
• Lives in an indigenous native community
Camilo

<table>
<thead>
<tr>
<th>Service</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referral</td>
<td>No referral</td>
</tr>
<tr>
<td>Assessment</td>
<td>-</td>
</tr>
<tr>
<td>Prescription</td>
<td>-</td>
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</tbody>
</table>
## Score grid

<table>
<thead>
<tr>
<th>WHO/UNCRPD recommendation</th>
<th>Colombia’s state</th>
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</thead>
<tbody>
<tr>
<td>Referral</td>
<td></td>
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<td>Assessment</td>
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<td>Right to personal mobility</td>
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If People with disabilities in Colombia have the same rights, why aren’t they accessing appropriate wheelchairs?
Policies

• On 2011, Colombia ratified the UNCRPD and created a National Disability System and public policy regarding disabilities

• Access to appropriate wheelchairs and related services are human rights but, wheelchairs are excluded from the national health care plan

Policies

How to access a wheelchair in Colombia

- Legal mechanism via a court appeal
- Subsides through the government
- Special social security system (Military)
- Out of pocket
- Charity, massive donations
Policies

How to access a wheelchair in Colombia

Legal mechanism via a court appeal

Not having access to a wheelchair is considered a violation of the right to health

Access to the prescribed wheelchair paid by the government
The prescription is not always adequate

How to access a wheelchair in Colombia

Legal mechanism via a court appeal

Policies

How to access a wheelchair in Colombia

Subsidies through the government

Low income
A wheelchair once a year
Not always delivered with appropriate services

Policies

Assistive technology provision guidelines

- Prescribed by an interdisciplinary team (physical and contextual evaluation)
- Follow-up required

How to access a wheelchair in Colombia

Special social security system (Military)

- 3 types of wheelchairs: basic, medium range and high-technology
- Returned of old devices
- Power wheelchairs: replacement of the batteries covered only once
- Assistive technology donations
- Uniform assistive technology database

Ministerio de defenza nacional, 2015.
How to access a wheelchair in Colombia

Special social security system (Military)

Policies

How to access a wheelchair in Colombia

Out of pocket

Policies

How to access a wheelchair in Colombia

Charity, massive donations

### Policies

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>Ratification of the UNCRPD</td>
<td></td>
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</table>
| 2013 | FIRST REPORT TO THE UN | - Article 20  
Local government entities will be supported to strengthen the delivery of assistive technology  
Guidelines to implement assistive technology banks  
Unification of the health care regimes to include access to assistive technology  
- Article 25, 26, 28 |
| 2016 | SHADOW REPORT TO THE UN | - Article 20 no mentioned  
The only mention of poor access to wheelchairs is specifically related to people with disabilities in jail  
- Article 26  
No clear pathways to access rehabilitation services |

Republica de Colombia, 2013. Coalicion Colombiana para la implementation de la Convencion de los derechos de las personas con Discapacidad, 2016.
Policies

• UN recommends that the government expand the habilitation and rehabilitation services to comply with the UNCRPD

• Emphasizes on the inclusion and access to services of people with disabilities victims of the internal conflict

Naciones Unidas, 2016.
If **People** with disabilities in Colombia have the same rights, why aren’t they accessing appropriate wheelchairs?

Wheelchairs are not part of the healthcare system and there are not enough **Policies** to support the right of personal mobility.
Products

- Influx of high-cost and high-end imported wheelchairs and cushions has increases the access gap
Products

• Lack of regulations
  • No quality regulation in place
    • Rural areas: ISO 7176 standard section 8, which relates to wheelchair durability
  • Product classification
  • How often to get a wheelchair
  • Caps for type of products
Products

The same “type” of product is available in a wide variety of prices

Aluminum ultra-light wheelchair
($900 USD vs $3000 USD)
Products

The same “type” of product is available in a wide variety of prices

• Resold several times

The public system continues to pay for the wheelchairs that are prescribed and fought through the legal system regardless the source of the product
If **People** with disabilities in Colombia have the same rights, why aren’t they accessing appropriate wheelchairs?

Wheelchairs are not part of the healthcare system and there are not enough **Policies** to support the right of personal mobility.

**Products** are not regulated.
Provision

Lack of nation-wide guidelines for the services
  • Users not having a wheelchair at all
  • Some receiving wheelchairs “off the shelf”
  • Many not receiving training on how to use the wheelchair nor maintenance and repairs services

Prescription
  • Physician vs. PM&R
  • The judge is the one that grants access to the devices

Professional training
  • International Committee of the Red Cross
  • Manufacturers

Comité Internacional de la Cruz Roja, 2016.
If **People** with disabilities in Colombia have the same rights, why aren’t they accessing appropriate wheelchairs?

Wheelchairs are not part of the healthcare system and there are not enough **Policies** to support the right of personal mobility.

**Products** are not regulated.

There are no service **Provision** guidelines and few trained professionals.
Summary

• Lack of accurate data
• Needs:
  • gather a critical mass that advocates and implements solutions
  • articulation of national stakeholders
  • technical assistance of international organizations
  • building on other countries efforts
  • sharing experiences
Proposed strategy

1. June 1st stakeholder meeting in Medellin
   • Identify leaders to advocate
2. Advocating with the institute of technology evaluation from the ministry of health
3. Sharing best practices from successful stories
4. Seek support from WHO/PAHO country office
Questions and Discussion: Strategies brainstorm

Products
Policies
Provision services