

【 Connecting institutions 】

Asian Institute of Gastroenterology (India), Kyushu U H (Japan), Kathmandu Model H (Nepal), U of Malaya (Malaysia), Bill & Melinda Gates Foundation, India Country Office (India), Valley Urgent Care & Occupational Medicine (United States), U of Southampton (United Kingdom), BP Koirala Institute of Health Sciences (Nepal), Universidad Nacional Autonoma de Mexico (Mexico), Hiroshima U (Japan), Suruchi Home Care (Nepal) and 12 of others

【 Comments 】

16th Asia Telemedicine Symposium in conjunction with 3rd National Telemedicine Workshop in Nepal was a grand success. The theme was role of nurses in telemedicine, and it was the eye opening for all participants. The symposium was in hybrid model with in-person and virtual presentations, national and international papers presentations. It was a good experience sharing event which could conclude a good declaration with suggestions for future policy intervention.



Teleconference view at the main venue

Teleconference view at the main venue

Picture taken at : Kathmandu Marriott Hotel

Picture taken at : Kathmandu Marriott Hotel

Digital Technology - Based Telemedicine for the COVID19 Pandemic - July, 2021, Frontier's

<https://www.frontiersin.org/articles/10.3389/fmed.2021.646506/full>

Scale up of Telehealth in the region likely to be constrained by existing barriers, comprehensive strategies across the ecosystem will facilitate sustainable adoption of telehealth

Policy Level	Organizational Level
<ul style="list-style-type: none"> Restrictive, ambiguous regulatory guidelines Inadequate reimbursement policies No mechanisms for accreditation / licensing of telehealth providers No certification processes for telehealth 	<ul style="list-style-type: none"> Lack of consensus on telehealth standards Process incompatibility Lack of incentives for providers Limited evidence on ROI for investments
Technological Level	Individual Level
<ul style="list-style-type: none"> Inadequacy of data security Inadequacy of privacy standards Lack of interoperability Poor user interface and user experience Limitation in access to Internet and bandwidth restrictions 	<ul style="list-style-type: none"> Perceived skepticism about usefulness Privacy and security concerns Preference for face-to-face interactions Uncivil behavior during consultations and fatigue due to constant communication from users

Barriers to Telehealth Adoption

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A presentation slide

A presentation slide

Picture taken at : Kyushu University Hospital

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Ms. Kudo(It.) as a chair

A group photo at the main venue

Picture taken at : Kathmandu Marriott Hotel

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