



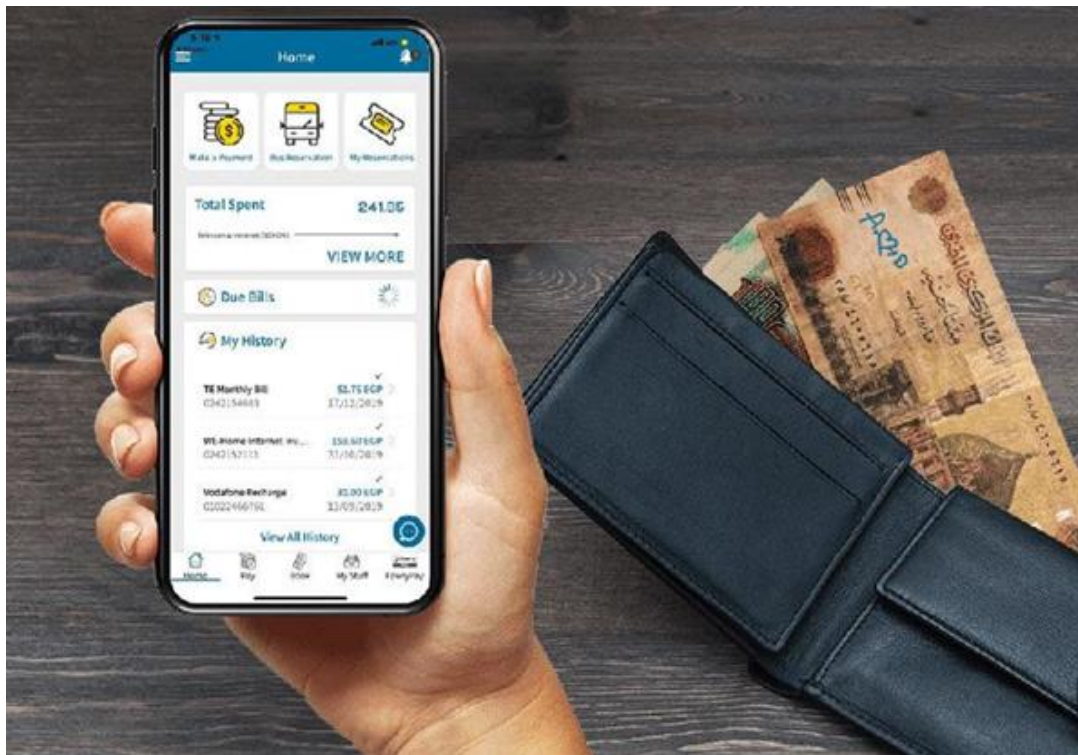
**USAID**  
FROM THE AMERICAN PEOPLE



## e-Conference Report

# Health and Financial Services in the Middle East and North Africa: Time to go Digital

February 10, 2021



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**About SHOPS Plus:** Sustaining Health Outcomes through the Private Sector (SHOPS) Plus is USAID's flagship initiative in private sector health. The project seeks to harness the full potential of the private sector and catalyze public-private engagement to improve health outcomes in family planning, HIV/AIDS, maternal and child health, and other health areas. SHOPS Plus supports the achievement of U.S. government health priorities and improves the equity and quality of the total health system.



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# Acronyms

<b>CGAP</b>	Consultative Group to Assist the Poor
<b>DFS</b>	Digital financial services
<b>GIZ</b>	Deutsche Gesellschaft für Internationale Zusammenarbeit
<b>GSMA</b>	Global System for Mobile Communications Association
<b>KYC</b>	Know your customer
<b>MENA</b>	Middle East and North Africa
<b>MFI</b>	Microfinance institution
<b>SHOPS Plus</b>	Sustaining Health Outcomes through the Private Sector Plus
<b>UHC</b>	Universal health coverage
<b>USAID</b>	United States Agency for International Development

# Acknowledgments

SHOPS Plus would like to thank Amy Kay, Senior Technical Advisor, and Ean Hundley, ICT4D Advisor, at the USAID Middle East Bureau for their support in shaping the e-conference and for their technical insights. We appreciate the excellent contributions from the speakers and moderators, who discussed insights about the potential for digital financial services to improve health outcomes, increase financial inclusion and expand universal health coverage in the Middle East and North Africa. Special thanks to all attendees who shared their questions and thoughts.

Jeanna Holtz, Marianne El-Khoury, Sarah Romorini, Maggie Stokes and David Thompson organized the e-conference and prepared this report.

# Introduction

The time is ripe for investing in digital interventions in the Middle East and North Africa (MENA) to increase access to financial services, promote self-reliance and support the region's health objectives. The COVID-19 pandemic has made the world more digital than ever before. Rapid growth and innovation across the world offer lessons for the region to accelerate digital financial services (DFS). DFS use technology to provide secure, affordable, and accessible options for financial transactions. By making financial services more affordable and equitable, DFS can help expand access to health information, products, and services, and support progress toward universal health coverage (UHC). In MENA, mobile phone penetration rates are high, alongside emerging regulatory reforms that enable DFS. Yet significant challenges must be overcome. More than half the population in the region are unbanked with no secure means of storing, saving, borrowing or making or receiving payments. Barriers that impede use of DFS include inadequate regulation, limited reach of distribution networks particularly for low income and other marginalized groups, lack of access to and use of DFS by women and displaced people, and low investment in DFS for health.

In July 2020, the Sustaining Health Outcomes through the Private Sector (SHOPS) Plus project, USAID's flagship initiative in private sector health, published a [landscape assessment](#) of the status, trends, enablers of and barriers to the use of DFS in 11 focus countries in MENA: Algeria, Egypt, Iraq, Jordan, Lebanon, Libya, Morocco, Syria, Tunisia, West Bank & Gaza, and Yemen. The assessment explores the link between access to financial services and more equitable access to social services, including health – a topic not previously examined in detail in the MENA region.

To disseminate the assessment findings and discuss their implications, in September 2020, SHOPS Plus facilitated [two USAID webinars](#) with the Middle East Region Bureau. Subsequently, on February 10, 2021, the project hosted an e-conference with a broader range of MENA and global stakeholders with interests in DFS, health, financial inclusion, regulation, private sector engagement, humanitarian aid, and gender equity. The e-conference provided a forum for approximately 100 participants to engage and identify actions to advance digital interventions for health and financial services, focusing on those that promote partnerships, innovation, and investments for better health in MENA.

This report summarizes the proceedings from the e-conference. The conference agenda, speaker biographies and links to the presentations, assessment and other reference materials are found in Appendices A, B, and C.

## Opening Remarks

Ms. Carol Wilson, Director of the Office for Technical Support at USAID's Middle East Region Bureau, opened the meeting. Wilson noted that DFS are a key area of interest to USAID and align with USAID's broader [Digital Strategy](#). The topics of the e-conference, she noted, are also relevant to other USAID strategies for health and private sector engagement, and USAID's support of partner countries in their journeys toward self-reliance. It is more important than ever for USAID to support resilience of communities in the face of COVID-19 and other health threats

by ensuring countries in the MENA region have robust digital ecosystems that are open, inclusive, secure, and of benefit to all. To this end, the U.S. government’s position on digital health, namely the use of digital information and communications technologies – whether mobile phones or other digital systems – aims to improve health systems and public health service delivery. Wilson concluded by welcoming diverse voices and spirited discussions to the e-conference.

In her opening remarks, Ms. Amy Kay, Senior Technical Advisor at USAID’s Middle East Region Bureau, stated that USAID’s Digital Strategy and [Digital-Health Vision](#) are very timely as the world has been forced to adopt technologies and new ways of doing business. The Vision advances a plan for better health outcomes through strategic investments in digital technologies. Kay remarked that DFS are an important tool that can allow for greater access to health services - whether you are a single mother seeking maternal and child health services in downtown Cairo, a person on the move seeking care for diabetes or another non-communicable disease in a host country like Jordan or Lebanon, or a person living with HIV in Tunisia seeking options to safely access quality, consistent treatment and care. Kay concluded by reiterating the ultimate goal of USAID and the Middle East Bureau: healthy people, communities, and societies that, in turn, underpin the healthy economies and resilient democracies necessary to advance self-reliance, especially in a world affected by COVID-19.

“The [USAID Digital-Health] Vision puts governments, civil society, and the private sector in our partner countries at the center of decision-making and supports the creation of long-lasting and sustainable systems.” – Amy Kay, Senior Technical Advisor, Middle East Region Bureau, USAID

## Technical Discussion

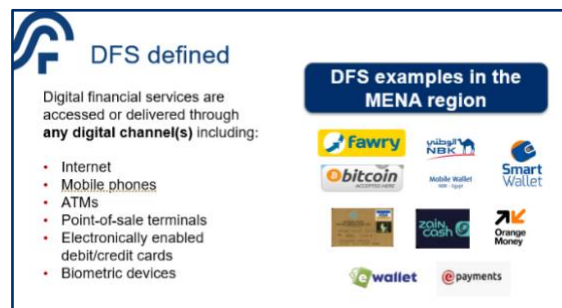
The e-conference comprised a series of technical discussions with regional and global experts.

### Session 1: Lightning talk, DFS in the MENA region: Latest findings

Ms. Sarah Romorini, Digital Solutions Market Lead, Abt Associates

Romorini opened the technical discussion of the e-conference with a presentation highlighting key findings from the SHOPS Plus assessment on DFS in the MENA region. This set the stage for more focused discussions to follow, especially on the intersection between DFS and health. Romorini began by sharing a common definition of DFS and some DFS actors in the region (Figure 1). She noted that e-wallets, electronic payment and mobile money are all examples of DFS.

Figure 1: DFS defined



DFS comprise four pillars: Enabling policies, e-payment infrastructure, supply, and demand. The SHOPS Plus assessment found the following key barriers to adopting DFS in MENA across these pillars: geopolitics, conservative banking culture, low consumer value, and the gender gap. While these barriers exist in other regions, they are more pronounced in the 11 MENA countries/territories detailed in the assessment.

Romorini noted that recent initiatives in MENA are opening the door to DFS, with the COVID-19 pandemic adding additional impetus for change. One example is found in Egypt, where the government is making strides to promote cashless financial transactions. Another example comes from Yemen, which recently announced the launch of a mobile money platform.

There are developments in three areas accelerating use of DFS in MENA:

- **Regulatory reforms**, which thrive on innovation and a dynamic test environment. For example, innovation hubs, venture capital and regulatory waivers for fintech providers, helps regulators and innovators to collaborate. Egypt, Jordan and Morocco are leading regulatory reforms for DFS, and across the region, a number of countries are moving to allow non-banks to provide financial services. Others are reducing requirements for opening accounts while not compromising security through know-your customer rules.
- **Mobile infrastructure** is extensive in MENA. Notably, mobile connections exceed 100% of the population in Algeria, Egypt, Jordan, Libya, Morocco, and Tunisia, and mobile internet growth increased from 29% (2014) to 40% (2018).
- **Global stakeholder support**: A number of donors are looking to increase financial inclusion, especially for refugees and women. Three examples are Financial Inclusion for the Arab Region Initiative (FIARI), Financial Inclusion Global Initiative (FIGI), and Financial Inclusion in the MENA Region (FIMENA).

Romorini stressed that DFS and other digital services for health can advance UHC. So far, there has been limited use of digital solutions in health sector in the MENA region. Most facilities conduct financial and other transactions (e.g., sharing clinical data, communicating with patients and communities) using paper-based systems. Although challenging, it is possible to go digital. There have been important investments by donors like USAID to digitize health information systems, including health management info systems and electronic health records at private and public health facilities in West Bank/Gaza, that can help open the door for DFS.

Romorini concluded by mentioning several opportunities to promote DFS for health in MENA

(Figure 2). DFS show promise to efficiently reach underserved groups like refugees with financial services such as remittances, credit, and insurance. These financial services often directly or indirectly address health needs. As a result, the humanitarian aid sector supports DFS under broader efforts to serve large displaced populations, or vulnerable groups in fragile states. There is also increasing demand for telemedicine, especially in the wake of COVID-19. Telemedicine also helps overcome other persistent barriers

**Figure 2: DFS can accelerate progress to health and wealth**





to access health services, such as geographical distances, security concerns, or limited mobility of many women outside the home.

## Session 2: Building blocks for digital interventions

Session 2 comprised two moderated expert discussions to examine the interrelated pillars of DFS. The first discussion focused on enabling policies and e-payment infrastructure, while the second discussion focused on supply and demand. Each discussion centered on three core questions: 1) *What do we know?* 2) *Where do we want to go?* 3) *How will we get there?*

### Focus discussion A: Supply and demand

Moderator: Ms. Sarah Romorini, Digital Solutions Market Lead, SHOPS Plus

- Mr. Jalil Allabadi, Co-founder & CEO, Altibbi
- Mr. Michele Grosso, CEO, Democrance
- Mr. Michal Matul, Head of Value Added Services, Consumer Insights and Training, AXA

This session began with a short [video](#) that highlighted the potential for digital health insurance and remittances in MENA, delivered by Democrance, a digital intermediary operating from Dubai. In ensuing conversations, a main message from panelists was that the COVID-19 pandemic has accelerated demand for digital health applications like telemedicine, but also presented setbacks.



Jalil Allabadi, CEO of [Altibbi](#), a digital health platform that provides telemedicine in 12 countries in MENA as well as the largest Arabic medical content portal, shared that Altibbi has worked with government and others to set up COVID-19 hotlines in Jordan and Egypt that provide information on prevention, testing and treatment of the virus. During the pandemic, Altibbi has conducted up to 30,000 tele-consultations per day. The platform reaches groups and locations that are hard to reach, with greater efficiency compared to in-person methods. Allabadi noted there is still more to learn about the effectiveness and efficiency of telemedicine compared to in-person visits. There is a need to build the case for when and how to use telemedicine to deliver health services and information.

Michal Matul (AXA) and Michele Grosso (Democrance), a UAE-based DFS intermediary, discussed the effect of the pandemic on use of remittances and microfinance services. Matul noted a general decline of around 15-20% for financial services during the pandemic. In-person financial transactions have been disrupted due to business closures, and the overall economic slowdown in 2020. However, microfinance institutions (MFIs) have maintained membership (no growth) – a sign of resilient demand for affordable and accessible credit by women, low income people and other clients. He observed that now is the time for MFIs to digitize, as people are more receptive to low-touch or no-touch solutions. AXA sees increasing demand from MFI partners to bundle insurance with loan products.

Grosso expanded on the experience of Democrance to provide digital remittance services to migrant workers in the UAE. Migrant workers report that health needs of family members at

home are a key concern, followed by job security. Since arrival of the COVID-19 pandemic, Democrance saw a 66% drop in money transfer operations in mid-2020 compared to earlier in the year. Business has bounced back since then.

DFS actors like Democrance, and full-service financial service providers like AXA are keen to reach larger numbers of clients who have had limited access to financial services, and see digital applications as an enabler. Grosso mentioned that Democrance is working with MENA fintech operators and central banks to offer more digital solutions. The UAE is an example where regulation is more developed and enabling for DFS. This environment makes the UAE a hotbed for innovation, and a good place to test partnerships. More generally, however, across MENA there is a lack of regulation for telemedicine and other digital health and financial services. “Fear of the regulator” inhibits investment in developing and scaling DFS.

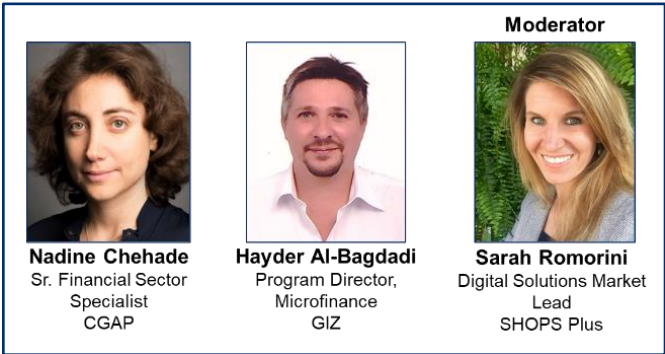
Matul explained that inclusive insurance is a high tech, low-ticket business – driving big commercial insurers like AXA to partner with digital intermediaries. This helps the insurer bypass legacy systems (and thinking), and deliver products designed for low- to middle-income consumers sustainably.

He emphasized that human touch and communications remain critical to drive behavior change leading to uptake in DFS, especially among low-income populations. Clients are new to insurance and digital transactions. AXA sees higher use of services when loan officers or other trusted “brokers” help the client understand and use DFS. In another example from the region, 80% of Altibbi clients who received reminder calls about availability of telemedicine followed up and accessed a tele-consultation.

### Focus discussion B: Enabling policies and e-payment infrastructure

Moderator: Ms. Sarah Romorini, Digital Solutions Market Lead, SHOPS Plus

- Mr. Hayder Al-Bagdadi, Program Director, Microfinance, Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) (German Corporation for International Cooperation)
- Ms. Nadine Chehade, Sr. Financial Sector Specialist, Consultative Group to Assist the Poor (CGAP)



In this session, two experts in financial inclusion, Hayder Al-Bagdadi (GIZ), and Nadine Chehade (CGAP) discussed building blocks for DFS, including the enabling environment and e-payment infrastructure.

Chehade noted that DFS now fuel growth of financial system and financial inclusion. In MENA there is a huge untapped market – estimated by CGAP at \$7 billion for

financial services, assuming uptake in the region would approach levels seen in countries like Ghana, South Africa, Bolivia and Ukraine. Such progress will occur faster with more innovation, testing, and competition in the financial sector.

She also explained that mobile money consists of high volume, low ticket transactions – a characteristic not aligned with the DNA of commercial banks. An e-wallet is the client's gateway to digital transactions. There are four core regulatory enablers of DFS:

- Non-bank e-money issuance: An e-wallet is a key point of access for the unbanked.
- Use of risk-based (tailored) due diligence of clients
- Use of agents: digital applications also need physical/human infrastructure, which can encourage trust.
- Consumer protection, to foster trust.

Al-Bagdadi commented further, citing the importance of conducting regulatory impact assessments in new DFS markets to help identify challenges and obstacles for DFS.

Regulations for financial services need to adapt and “modernize” to better enable DFS. Regulations should align with the activity being performed and the risk it carries. They are not “all or nothing”; they are not monolithic. They function best when developed and implemented using a “test, learn and adapt” approach, as was done with M-Pesa in Kenya. For example, regulations can support market development at first through limited or restrictive licensing of providers and products. As business models show proof of concept, licensing can become less restrictive.

Both experts reflected on lessons learned about fostering an enabling environment for financial inclusion, and use of DFS based on their extensive experience in MENA and beyond:

- It takes times (years) for financial services and supporting systems to be set up; regulations must catch up.
- Be patient for innovations in financial services to take root. For example, we may have expected too much, too soon of regulatory sandboxes. They attract a limited number of applicants and fintech companies have a low survival rate.
- A dedicated unit for DFS helps.
- Investments that have shown success:
  - Capacity building, e.g., financial inclusion department in central banks.
  - Peer-to-peer learning: Platforms where central bank regulators can learn from peers.
  - Cross-sector dialogue: Convene stakeholders (policymakers, regulators, private sector) to define goals and contributions, and advance financial inclusion.
  - National strategies for financial inclusion: Jordan was the first MENA country where the central bank developed and implemented a national strategy for financial inclusion.
  - Financial literacy, as seen in Ghana, is another enabler of financial services uptake. This, along with availability of affordable, relevant “micro” products for new clients and those with low incomes can accelerate financial inclusion.

Chehade and Al-Bagdadi also commented on health insurance, and its relationship to financial inclusion. Savings and payments for health are easier to implement and do promote financial inclusion. Health insurance is the most difficult financial service to sell. It is less tangible – the “product” is peace of mind and a promise to pay by the insurer when a health need arises in exchange for small regular prepayments. For this reason, it is helpful to include visible, easy to use services such as simple health information, free telemedicine or health screening that add tangible value to health insurance products.

Session 2 also featured two video interviews about digital interventions supported by USAID in MENA. The first video, [Security of Data and People in a Digital World: USAID's LINKAGES project](#), illustrates the importance of data security and privacy concerning health, especially for groups vulnerable to harassment, exploitation or harm; social media presents particular concerns. The second video, [Health Management Information Systems, USAID projects in West Bank/Gaza](#), illustrates the use of digitized information to improve continuity and quality of health care.

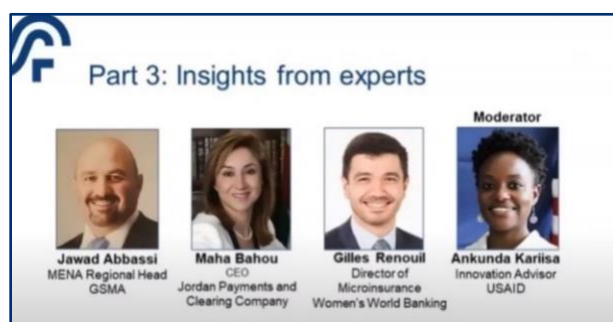
## Session 3: Takeaways and future actions

Moderator: Ms. Ankunda Kariisa, Associate Innovation Advisor, USAID (moderator)

- Mr. Jawad Abbassi, MENA Regional Head, Global System for Mobile Communications Association (GSMA)
- Ms. Maha Bahou, CEO, Jordan Payments and Clearing Company
- Mr. Gilles Renouil, Director of Microinsurance, Women's World Banking

During Session 3, a panel with expertise in areas of interest, including mobile and digital technologies, regulation, financial inclusion, and gender exchanged views and reflections.

Jawad Abbassi (GSMA) characterized the acceleration of digital applications for financial services and health as a “silver lining” amidst the massive ill-effects of COVID-19. The pandemic triggered major growth in the use of mobile money in MENA and across the world. In 2019 and before the start of the pandemic, there were more than 1 billion registered mobile money accounts, transacting \$1.9 billion daily – an amount that now exceeds transactions with cash. Governments are increasingly using digital applications to transfer money to populations, including large numbers or displaced people in MENA.



“2020 was a terrible year for humanity, but we have seen acceleration of digital [applications] and shaking out of many regulatory hurdles by governments.”

- Jawad Abbassi, MENA Regional Head, GSMA

Maha Bahou is a former central bank regulator in Jordan. She recognized the cross-cutting nature of DFS. Bahou reflected on the depiction of health and wealth as outcomes supported by DFS (Figure 2). She posited that wealth and health are two sides of our well-being. Although we have placed attention on the wealth component, health is more important. The two goals feed off each other.

Bahou also suggested there are many untapped areas for DFS:

- Customized medical loans
- Paperless claim settlement

- Health management applications that use individual health information to manage conditions such as diabetes or depression
- Use of artificial intelligence, machine learning to support financial services for health
- Greater reach of unbanked and those without access to health care, such as refugees/displaced pops, women, low income households
- Integrating customer due diligence, and know your customer (KYC) requirements to – assess medical and financial risks (potential applications in health insurance)
- Adapting innovations in DFS used in other sectors to health
- Products and services for women (to close the gender gap)

She concluded by stating that digital transactions promote transparency. Those who may benefit from corruption will resist digitizing for this reason.

Gilles Renouil (Women’s World Banking) opened by saying, “You cannot deliver a baby digitally”. Women and their families benefit from digital health and financial services. However, much care – such as maternity care – must be delivered in person. One effect of COVID-19 is a reduction in hospital deliveries.

Renouil also recognized other ways that COVID-19 may widen gender gaps in financial inclusion and access to health, with greater negative effects for women. They are “time-poor” and can face harassment when accessing health or financial services in person. An underlying issue is the persistent gender gap in mobile phone and internet use. Women are caregivers, financial managers of family resources, even when they do not control money directly. They provide a multiplier effect for their families and communities, so it is important to do more to reach them.

He noted the importance of building confidence and trust in digital services among women and demonstrating the value of digital services. For example, in Algeria, Women’s World Banking found that 20% of women do not see value of a mobile phone. They do not trust the product or service until they see that it demonstrates value for them. Another observation is that women need to gain confidence to use digital services. This comes from trying the product, from learning by doing. Other insights on promoting update of digital products, especially among women, are that they need to gain experience using a mobile phone to trust digital services. Many benefit from having a physical place to interact, and access to an agent or other person who can help. Finally, DFS must be affordable. A simple measure is that the transaction should not cost more than a bus ride.

Moderator Ankunda Kariisa asked the experts how donors and other parties can accelerate the use of and impact of DFS for health. Abbassi recommended a combination of substantial and long-term investment in digital infrastructure, backed by regulations that incentivize investment (e.g., tax breaks). He reminded participants that the development of high-speed broadband internet (fourth generation or 4G) resulted after investing years and billions to develop, with impressive gains. He also encouraged donors to support early stage development of digital services.

Bahou urged donors to support testing new digital applications for health – perhaps using a regulatory sandbox approach focused on health. She suggested there is value in starting small and experimenting with enabling regulation. The sector should document and share lessons learned with demonstration cases before working to scale up investments.

Renouil brought the group back to the issue of gender. We need gender disaggregated data to support development of products that better serve women. Economies will benefit as women adopt and use digital services.

# Key Takeaways

- DFS align with USAID's broader Digital Strategy and Digital-Health Vision, which advances a plan for better health outcomes through strategic investments in digital technologies. The Vision puts governments, civil society, and the private sector at the center of decision-making.
- DFS and other digital services for health can advance UHC. However, so far, there has been limited use of digital solutions in health sector in MENA. Important investments by donors in the region can help open the door for DFS.
- DFS show promise to efficiently reach underserved groups like refugees with financial services such as remittances, credit, and insurance. These financial services often directly or indirectly address health needs.
- Physical access and human interaction help promote adoption and uptake of financial services, including digital products, especially among low-income populations.
- The COVID-19 pandemic triggered major growth in the use of mobile money in MENA and across the world. It has also accelerated demand for digital health applications like telemedicine. Telemedicine helps overcome persistent barriers to access health services, such as geographical distances, security concerns, or limited mobility of many women.
- Collaboration between traditional banks and insurers and digital intermediaries can drive update and use of digital financial and health services.
- Across MENA there is a lack of regulation for telemedicine and other digital health and financial services. A "fear of the regulator" inhibits investment in developing and scaling DFS.
- There are four main enablers of regulation: issuance of e-money by non-banks; use of risk-based (tailored) due diligence of clients; use of agents (human touch); and consumer protection to foster trust.
- Investments that have shown success for fostering an enabling environment for financial inclusion include capacity building, peer-to-peer learning, cross-sector dialogue, national strategies for financial inclusion, and financial literacy.
- Regulations for financial services need to adapt and "modernize" to better enable DFS. Importantly, it takes time (years) to set up financial services and supporting systems; regulations must catch up. There is value in starting small and experimenting with enabling regulation.
- Economies will benefit as women adopt and use digital services. It is therefore important to build confidence and trust in digital services among women, and to demonstrate the value of digital services. Women also need to gain confidence to use digital services.

# Closing Remarks

Ean Hundley and Amy Kay of USAID closed the e-conference. After thanking the panelists, moderators, attendees and SHOPS Plus, Hundley noted the relevance of the e-conference to two main objectives of USAID's Digital Strategy, released in April 2020:

1. Improve measurable development and humanitarian assistance outcomes through the responsible use of digital technology in our programming;
2. Strengthen the openness, inclusiveness and security of country-level digital ecosystems.

"DFS have proven to be one of the many promising digital and increasingly effective and sought-after advances to support stronger health for all."

- Amy Kay, USAID

"(...) digital is no longer an option."

- Ean Hundley, USAID

He remarked at the irony that COVID-19, a virus that threatens our health, has leapfrogged us into the digital future, saying, "digital is no longer an option."

Hundley reiterated USAID's commitment to partner with civil society organizations and partner governments. USAID intends to work even more closely with the private sector in MENA to achieve these objectives, building on experience from other initiatives such as the Better than Cash Alliance to help emerging economies facilitate the shift to digital payments. He stated there is an enormous opportunity over the next few years for dramatic economic growth fueled by an inclusive and open digital ecosystem. This view supports USAID's interest in the future of health and digital financial services that reach the underserved, underbanked, and uninsured.

# Appendix A. Agenda

**8:30**     **Session 1: Welcome, agenda and poll**  
Jeanna Holtz | SHOPS Plus

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**8:40**     **Session 1: Opening remarks**  
Carol Wilson | Middle East Bureau, USAID  
Amy Kay | Middle East Bureau, USAID

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**8:45**     **Session 1: Lightning talk, DFS in the MENA region: Latest findings**  
Sarah Romorini | Digital Solutions Market Lead, SHOPS Plus

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**8:56**     **Session 2: Building blocks for digital inventions, supply and demand**  
Jalil Allabadi | Altibbi  
Michele Grosso | Democrance  
Michal Matul | AXA  
Moderator: Sarah Romorini | SHOPS Plus

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**9:28**     **Break | Videos**  
Health management information systems  
Security of data and people in a digital world

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**9:38**     **Session 2: Building blocks for digital inventions, enabling policies and e-payment infrastructure**  
Hayder Al-Bagdadi | GIZ  
Nadine Chehade | CGAP  
Moderator: Sarah Romorini | SHOPS Plus

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**10:10**    **Break**

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**10:20**    **Session 3: Takeaways and future actions: Insights from experts**  
Jawad Abbassi | GSMA  
Maha Bahou | Jordan Payments and Clearing Company  
Gilles Renouil | Women's World Banking  
Moderator: Ankunda Kariisa | USAID

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**10:55**    **Wrap-up and concluding remarks**  
Amy Kay | Middle East Bureau, USAID  
Ean Hundley | Middle East Bureau, USAID  
Jeanna Holtz | SHOPS Plus

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# Appendix B. Speaker Bios



**Jawad Abbassi**, MENA Regional Head, GSMA

Jawad leads the GSMA MENA team in the UAE, Kuwait, Lebanon, Jordan, Egypt and Tunisia, which is responsible for GSMA work & activities in the MENA region and spans 25 countries. He oversees the MENA advocacy activities and GSMA programs such as future networks and technology programs. Jawad's career experience in ICT and media spans 26 years. Before joining the GSMA as head of MENA in October 2015, Jawad managed the Arab Advisors Group, which he founded in 2001. Before founding Arab Advisors Group, Jawad's career experience included working as a senior telecommunications and technology consultant with the Yankee Group in Boston, USA. Jawad is also a frequent guest speaker at conferences and seminars related to technology, communications and media in the Arab World.



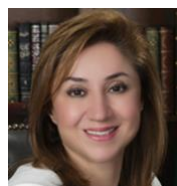
**Hayder Al-Bagdadi**, Program Director, Microfinance, GIZ

Hayder Al-Bagdadi is the head of the GIZ-implemented program "Financial Inclusion in the MENA Region – FIMENA." Prior to his current position, Hayder worked for the Alliance for Financial Inclusion (AFI) as a Policy Manager in the areas of digital financial services and SME finance. He also managed AFI's policy grant portfolio for the Pacific, Asia, and Eastern Europe. Before AFI, Hayder spent eight years at GIZ working on financial system and private sector development issues. At GIZ headquarters in Germany, he was an Advisor in the Financial System Development (FSD) Unit of the Economic Development and Employment Department responsible for GIZ's FSD programs in Asia. Prior to this, Hayder served as a Project Manager in private sector development programs in Indonesia, Bosnia and Herzegovina. His career began focusing on microfinance at GIZ Headquarters' in Germany.



**Jalil Allabadi**, Co-founder and CEO, Altibbi

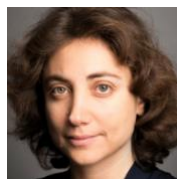
Jalil Allabadi, is the co-founder and CEO of Altibbi, the largest Arabic digital health platform with the aim of providing access to high quality healthcare support to the masses. Altibbi provides a 24/7 primary care telehealth service in 12 countries in MENA as well as the largest Arabic medical content portal, Altibbi.com. Jalil holds a master's degree in industrial engineering from Bologna University in Italy and an MBA from Thunderbird. Prior to co-founding Altibbi, Jalil worked in the Pharma industry in Italy and in the U.S. with a focus on logistics, operations management and marketing.



**Maha Bahou**, CEO, Jordan Payments and Clearing Company

Maha Bahou has served as CEO of the Jordan Payments and Clearing Company since June 2018. The company is mandated with enhancing and promoting digital payments as a major driver of digital financial inclusion, and digital economy. Before JoPACC, Maha worked at the Central Bank of Jordan for 30 years, where she was most recently the Executive Manager of the Payment Systems, Domestic Banking Operations and Financial Inclusion Department for 7 years. She has done consulting work in Libya and has experience as a lecturer at the University of Jordan and as

trainer in cooperation with Philadelphia Consulting, the Institute of Banking Studies, the Central Bank of Jordan and different NGOs.



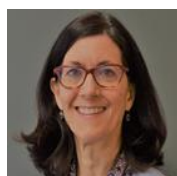
**Nadine Chehade**, Senior Financial Sector Specialist, CGAP

Nadine Chehade is a Senior Financial Sector Specialist, representing CGAP in the Arab world. She works to deepen CGAP's engagement in the region, collaborating with various partners, including regulators and policy-makers, donors and investors, regional associations, and businesses. She currently focuses on fintechs and digital financial services, in addition to leading CGAP's global work on financial services in humanitarian crises and fragile countries. More broadly, she covers matters related to regulation, business, and markets, with the overarching goal of advancing financial inclusion. Her research work has included regulatory frameworks, cash transfers, digital financial services, postal financial inclusion, microfinance, and financial inclusion measurement. She joined CGAP in 2012, bringing ten years of experience in investment banking, management consulting, and microfinance rating. Nadine holds an MBA from ESSEC in France. She is fluent in Arabic, English, French, and conversational in Spanish.



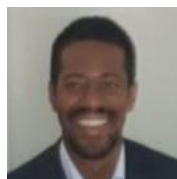
**Michele Grosso**, CEO, Democrance

Driven by the desire to restore insurance to its original purpose of providing mutual aid for those who need it most, but can afford it least, Michele founded Democrance in 2015. Prior to that, Michele worked in strategy and distribution at global insurance powerhouse AXA and MetLife in France, Egypt and the UAE. He is a frequent speaker and contributor at microinsurance, entrepreneurship and social innovation events and publications. Italian by birth, Michele holds a master's in management from ESCP Europe in Paris and a MSc in Economics from Turin University, Carlos III University in Madrid and City University in London.



**Jeanna Holtz**, Health Financing Director, SHOPS Plus, Abt Associates

Jeanna Holtz is the Health Financing Director for the SHOPS Plus project, leading both core and field health financing activities, and a Principal Associate at Abt Associates. Previously, Holtz served six years as chief project manager of the International Labor Organization's Impact Insurance Facility in Geneva. Holtz also held management positions with the global financial services provider, Allianz, and the U.S. health insurer, Aetna. She holds an MBA with a concentration in health care management from Northwestern University.



**Ean Hundley**, ICT4D Advisor, USAID

Ean Hundley is the ICT4D Advisor in USAID's Middle East Bureau where he leads the strategic integration of ICT and digital development in the Bureau's planning and programming. He has previously worked in Latin America and the MENA region in bringing the public and private sectors together to promote economic growth through embracing disruptive technologies. Ean continues to champion innovation to tackle the development challenges of today and tomorrow.



**Ankunda Kariisa**, Innovation Advisor, USAID

Ankunda Kariisa is an Innovation Advisor at the Center for Innovation and Impact. Most recently, Ankunda completed an AAAS Science and Technology Policy fellowship with USAID’s Digital Finance practice where she played a key role in supporting the team’s sector integration work, with a specific focus on global health and agriculture. Prior to joining USAID, Ankunda was a post-doctoral researcher in Microbiology at the University of Washington in Seattle where she worked on antibiotic resistance. She obtained a Ph.D. in Microbiology and Immunology from the University of North Carolina in Chapel Hill, studying cholera, and a Bachelor of Science in Physiology with a minor in Pharmacology and Therapeutics from McGill University.



**Amy Kay**, Senior Technical Advisor, USAID

Amy Kay has been working in the Middle East and North Africa region for over 15 years. She is a Senior Health Advisor in USAID’s Middle East Bureau leading health programs in development, humanitarian and stabilization contexts. Amy continues to lead long-standing human rights and health based civil society efforts led by and for People Living with HIV and the LGBTI community in MENA.



**Michal Matul**, Head of Value Added Services, Consumer Insights and Training, AXA

Michal Matul joined AXA Emerging Customers early 2017 after 9 years at ILO’s Impact Insurance Facility, a leading think-tank in inclusive insurance. At AXA he leads digital health agenda and is supporting AXA entities in emerging markets to build internal capabilities and develop new solutions for low and middle-income households. Michal’s work has focused for more than 20 years on understanding financial behaviors and improving risk-management options for low-income households. His previous assignments include work with PlaNet Finance in West Africa and with Microfinance Centre in Eastern Europe. He holds a master’s degree from Sciences Po (Paris) in Economic Demography and a PhD in Economics from the University of Warsaw.



**Gilles Renouil**, Director of Microinsurance, Women’s World Banking

Gilles Renouil is the global head of insurance products at Women’s World Banking. Prior to joining Women’s World Banking in 2015, Gilles served as a Director at Swiss Re in risk management and group underwriting strategy. Until 2006, he worked for Allianz in Germany and Spain, where he developed several innovative insurance products. A graduate from École des Ponts ParisTech, his areas of expertise include product design, pricing, underwriting, control frameworks, financial performance and process improvement. With his team at Women’s World Banking, Gilles has helped develop large insurance schemes in Morocco, Egypt and Jordan.



**Sarah Romorini**, Digital Solutions Market Lead, Abt Associates

Sarah Romorini works to expand Abt’s digital footprint by working with teams to identify their digital strategy and connects programs with solutions to enhance service and product delivery, communication, behavior change, and data-driven decision-making. She has been at Abt for two and a half years as a Senior Associate and is part of Abt’s Data Science, Surveys, and Enabling Technologies team. Sarah has been based in El Salvador, Malawi, and Argentina and has a master’s in international development.

# Appendix C. Additional Resources

1. **Event recording**
2. **Event PowerPoint slides – contact [info@shopsplusproject.org](mailto:info@shopsplusproject.org) for slides**
3. **Full assessment: Digital financial services in the Middle East and North Africa**
4. **Executive summary: Digital financial services in the Middle East and North Africa**
5. **Interactive infographic: Health and financial services in the Middle East and North Africa: Time to go digital**
6. **Videos:**
  - a. [Health management information systems, USAID projects in West Bank/Gaza](#)
  - b. [Security of data and people in a digital world: USAID's LINKAGES project](#)
  - c. [Linking insurance with remittances – Democrance](#)
7. **SHOPS Plus regional page: Middle East and North Africa**

