Guinea-Bissau



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Population (000s)	1,704	Life expectancy at birth (years)	54
GNI per capita (PPP Int \$)	1,240	Total health expenditure (% GDP)	5.5
Physician density (per 10 000 population)	0.07	ICT Development Index rank	150
Nurse & midwife density (per 10 000 population)	0.59	Mobile-cellular subscriptions (% population)	63.07
Hospital bed density (per 10 000 population)	10	Internet users (% population)	2.9

1. eHealth foundations

National policies or strategies			
	Country response	Global "yes" response§	Year adopted
National universal health coverage policy or strategy	Yes	75%	2012
National eHealth policy or strategy	No	58%	N/A
National health information system (HIS) policy or strategy	No	66%	N/A
National telehealth policy or strategy	No	22%	N/A
Funding sources for eHealth			
	Country response	Global "yes" response§	Funding source %**
Public funding	No	77%	Zero
Private or commercial funding	No	40%	Zero
Donor/non-public funding	No	63%	Zero
Public-private partnerships	No	42%	Zero
Multilingualism in eHealth			
	Country response	Global "yes" response§	Year adopted
Policy or strategy on multilingualism	No	28%	N/A
Government-supported Internet sites in multiple languages	No	48%	
eHealth capacity building			
	Country response	Global "yes" response§	Proportion**
Health sciences students – Pre-service training in eHealth	No	74%	N/A
Health professionals – In-service training in eHealth	No	77%	N/A

2. Legal frameworks for eHealth

Policy or legislation – purpose	Country response	Global "yes" response
Defines medical jurisdiction , liability or reimbursement of eHealth services such as telehealth	No	31%
Addresses patient safety and quality of care based on data quality, data transmission standards or clinical competency criteria	No	46%
Protects the privacy of personally identifiable data of individuals irrespective of whether it is in paper or digital format	No	78%
Protects the privacy of individuals' health-related data held in electronic format in an EHR	No	54%
Governs the sharing of digital data between health professionals in other health services in the same country through the use of an EHR	No	34%
Governs the sharing of digital data between health professionals in health services in other countries through the use of an EHR	No	22%
Governs the sharing of personal and health data between research entities	No	39%
Allows individuals electronic access to their own health-related data when held in an EHR	No	29%
Allows individuals to demand their own health-related data be corrected when held in an EHR if it is known to be inaccurate	No	32%
Allows individuals to demand the deletion of health-related data from their EHR	No	18%
Allows individuals to specify which health-related data from their EHR can be shared with health professionals of their choice	No	28%
Governs civil registration and vital statistics	No	76%
Governs national identification management systems	No	65%



3. Telehealth

Telehealth programmes country overview			
	Health system level**	Programme type**	
Teleradiology	‡	‡	
Teledermatology	‡	‡	
Telepathology	‡	‡	
Telepsychiatry	‡	‡	
Remote patient monitoring	‡	‡	

4. Electronic Health Records (EHRs)

EHR country overview		
	Country response	Year introduced
National EHR system	No	N/A
Legislation governing the use of the national EHR system	‡	
Health facilities with EHR	Use EHR	Facilities with EHR %**
Primary care facilities (e.g. clinics and health care centres)	N/A	‡
Secondary care facilities (e.g. hospitals, emergency care)	N/A	‡
Tertiary care facilities (e.g. specialized care, referral from primary/secondary care)	N/A	‡
Other electronic systems	Country response	Global "yes" response§
Laboratory information systems	N/A	35%
Pathology information systems	N/A	18%
Pharmacy information systems	N/A	33%
PACS	N/A	26%
Automatic vaccination alerting system	N/A	10%
ICT-assisted functions	Country response	Global "yes" response§
Electronic medical billing systems	No	58%
Supply chain management information systems	No	58%
Human resources for health information systems	No	69%

5. Use of eLearning in health sciences

eLearning programmes country overview			
Health sciences students — Pre-service	Country response	Global "yes" response§	
Medicine	N/A	58%	
Dentistry	N/A	39%	
Public health	N/A	50%	
Nursing & midwifery	N/A	47%	
Pharmacy	N/A	38%	
Biomedical/Life sciences	N/A	42%	
Health professionals – In-service	Country response	Global "yes" response§	
Medicine	N/A	58%	
Dentistry	N/A	30%	
Public health	N/A	47%	
Nursing & midwifery	N/A	46%	
Pharmacy	N/A	31%	
Biomedical/Life sciences	N/A	34%	

6. mHealth



mHealth programmes country overview		
Accessing/providing health services	Health system level**	Programme type**
Toll-free emergency	‡	‡
Health call centres	‡	‡
Appointment reminders	‡	‡
Mobile telehealth	‡	‡
Management of disasters and emergencies	‡	‡
Treatment adherence	‡	‡
Accessing/providing health information	Health system level**	Programme type**
Community mobilization	‡	‡
Access to information, databases and tools	‡	‡
Patient records	‡	‡
mLearning	‡	‡
Decision support systems	‡	‡
Collecting health information	Health system level**	Programme type**
Patient monitoring	‡	‡
Health surveys	‡	‡
Disease surveillance	‡	‡

7. Social media

Social media and health	Country response	Global "yes" response§	Year adopted
National policy or strategy on the use of social media by government organizations	_	18%	N/A
Policy or strategy makes specific reference to its use in the health domain	‡	5%	
Health care organizations – use of social media		Country response	Global "yes" response§
Promote health messages as a part of health promotion car	mpaigns	Yes	78%
Help manage patient appointments		No	24%
Seek feedback on services		No	56%
Make general health announcements		Yes	72%
Make emergency announcements		Yes	59%
Individuals and communities – use of social media		Country response	Global "yes" response§
Learn about health issues		Yes	79%
Help decide what health services to use		No	56%
Provide feedback to health facilities or health professionals		No	62%
Run community-based health campaigns		Yes	62%
Participate in community-based health forums		Yes	59%

8. Big data

Policy or strategy – purpose	Country response	Global "yes" response§	Year adopted
Governing the use of big data in the health sector	No	17%	N/A
Governing the use of big data by private companies	No	8%	N/A

Regional level:

National level:

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* Country context indicators

ICT Development Index Rank. 2015 - https://www.itu.int/net4/ITU-D/idi/2015/ All other country indicators. Global Health Observatory. 2012-2014 http://www.who.int/gho

Glossary

Indicates the percentage of participating Member States responding "Yes"

N/A Not applicable

Indicates question was unanswered

Question not asked Zero No funding

Local or peripheral level: Health posts, health centres providing basic level of care Informal: Use of ICT for health purposes in the absence of formal processes and policies

Intermediate level: District or provincial facilities: public and private hospitals

Pilot: Testing and evaluating a programme

and health centres

International level: Health entities in different geographic regions

public, but also private)

Established: An ongoing programme that has been conducted for a

minimum of 2 years and is planned to continue

Health entities in countries in the same geographic region

Referral hospitals, laboratories and health institutes (mainly