Tunisia



	*	Population (000s)	10,997	Life expectancy at birth (years)	76
	₹¥	GNI per capita (PPP Int \$)	10,960	Total health expenditure (% GDP)	7.1
	unt Ite		1.22	ICT Development Index rank	91
S	\bar{o}	Nurse & midwife density (per 10 000 population)	3.28	Mobile-cellular subscriptions (% population)	118.08
	00	Hospital bed density (per 10 000 population)	21	Internet users (% population)	41.4

1. eHealth foundations

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

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	‡	31%
Addresses patient safety and quality of care based on data quality, data transmission standards or clinical competency criteria	‡	46%
Protects the privacy of personally identifiable data of individuals irrespective of whether it is in paper or digital format	‡	78%
Protects the privacy of individuals' health-related data held in electronic format in an EHR	‡	54%
Governs the sharing of digital data between health professionals in other health services in the same country through the use of an EHR	‡	34%
Governs the sharing of digital data between health professionals in health services in other countries through the use of an EHR	‡	22%
Governs the sharing of personal and health data between research entities	‡	39%
Allows individuals electronic access to their own health-related data when held in an EHR	‡	29%
Allows individuals to demand their own health-related data be corrected when held in an EHR if it is known to be inaccurate	‡	32%
Allows individuals to demand the deletion of health-related data from their EHR	‡	18%
Allows individuals to specify which health-related data from their EHR can be shared with health professionals of their choice	‡	28%
Governs civil registration and vital statistics	‡	76%
Governs national identification management systems	‡	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	‡	‡		
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)	No	N/A		
Secondary care facilities (e.g. hospitals, emergency care)	No	N/A		
Tertiary care facilities (e.g. specialized care, referral from primary/secondary care)	No	N/A		
Other electronic systems	Country response	Global "yes" response§		
Laboratory information systems	No	35%		
Pathology information systems	No	18%		
Pharmacy information systems	No	33%		
PACS	No	26%		
Automatic vaccination alerting system	No	10%		
ICT-assisted functions	Country response	Global "yes" response§		
Electronic medical billing systems	‡	58%		
Supply chain management information systems	‡	58%		
Human resources for health information systems	‡	69%		

5. Use of eLearning in health sciences

eLearning programmes country overview			
Health sciences students – Pre-service	Country response	Global "yes" response§	
Medicine	No	58%	
Dentistry	No	39%	
Public health	No	50%	
Nursing & midwifery	No	47%	
Pharmacy	No	38%	
Biomedical/Life sciences	No	42%	
Health professionals – In-service	Country response	Global "yes" response§	
Medicine	No	58%	
Dentistry	No	30%	
Public health	No	47%	
Nursing & midwifery	No	46%	
Pharmacy	No	31%	
Biomedical/Life sciences	No	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%	‡
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	‡	78%
Help manage patient appointments			24%
Seek feedback on services	ek feedback on services		56%
ake general health announcements		‡	72%
Make emergency announcements		‡	59%
Individuals and communities – use of social media		Country response	Global "yes" response§
Learn about health issues		‡	79%
Help decide what health services to use	elp decide what health services to use		56%
ovide feedback to health facilities or health professionals		‡	62%
un community-based health campaigns		‡	62%
Participate in community-based health forums		‡	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	‡	17%	‡
Governing the use of big data by private companies	‡	8%	‡

LEGEND

* 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"
 Don't know

N/A Not applicable

‡ Indicates question was unanswered

Question not asked

Zero No funding

International level: Health entities in different geographic regions

Regional level: Health entities in countries in the same geographic region

National level: Referral hospitals, laboratories and health institutes (mainly public, but also private)

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

and health centres

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

Pilot: Testing and evaluating a programme

Established: An ongoing programme that has been conducted for a

minimum of 2 years and is planned to continue