

*	Population (000s)	91,729	Total health expenditure (%GDP)	4.7
×s.	GNI per capita (PPP Int \$)	1,110	ICT Development Index rank	151
둗矣	Physician density (per 10 000 population)	0.03	Mobile-cellular subscriptions (% inhabitants)	22.37
<u>i</u>	Nurse and midwife density (per 10 000 population)	0.25	Internet users (% of individuals)	1.5
٥٩	Hospital bed density (per 10 000 population)	63	Maternal mortality ratio (per 100 000 live births)	350
.=	Life expectancy at birth (years)	60	Infant mortality rate (per 100 000 live births)	29 [17-47]

eHealth policy/strategy Status of eHealth and women's and children's health policy/strategy		
National eHealth policy/strategy exists	No	
Year adopted		
Implementation status	No	
Refers to the use of eHealth in women's and children's health policy/strategy	Yes	
Special funding allocated for implementation	Yes	
Women's and children's health		
National policy/strategy for women's and children's health exists	Yes	
Policy/strategy refers to the use of eHealth, mHealth or social media	No	

An overview of the types of eHealth systems in place, their purpose and level	
Electronic information system collects and reports births, deaths and causes of death data	Yes – partial coverage
Year introduced	2011
At least one electronic information system exists at the district level to collect and report health data	Yes
Resource tracking system in place to report total health expenditure by financing source, per capita	Yes
Type of resource tracking system	Electronic
Resource tracking system level	National level
Resource tracking system in place to report total reproductive, maternal, newborn, and child health (RMNCH) expenditure by financing source, per capita	Yes
Type of resource tracking system	Electronic
Resource tracking system level	Regional/District level

Monitoring the status of women's and children's health An overview of the measurement of the 11 ColA indicators by monitoring frequency and format

Indicator measured	Monitor	Frequency	Format: Paper, Electronic, or Both
Maternal mortality ratio	Yes	Every 5 years	Both
Under 5 child mortality with the proportion of newborn deaths	Yes	Every 5 years	Both
Children under 5 who are stunted	Yes	Every 5 years	Both
Met need for contraception	Yes	Every 5 years	Both
Antenatal care coverage	Yes	Every 5 years	Both
Prevention of mother-to-child HIV transmission (PMTCT)	Yes	Every year	Both
Skilled attendant at birth	Yes	Every year	Both
Postnatal care for mothers and babies	Yes	Every year	Both
Exclusive breastfeeding for six months	Yes	Every year	Both
3 doses of the combined diphtheria, pertussis and tetanus vaccine	Yes	Every year	Both
Antibiotic treatment for pneumonia	Yes	Every year	Both

eHealth initiatives – national overview			
eHealth supports major women's and children's health initiatives	Yes		
Funding sources	Public funding, Donor funding		



Yes

Possible barriers to implementing eHealth services The most important barriers hindering the implementation of eHealth services	
Legal - lack of legal frameworks to support implementation of eHealth services	Yes
Infrastructure - not yet adequate, accessible, or cost-effective to support desired services	Yes
Human resources - lack of suitably qualified or experienced professionals who can develop and implement eHealth projects and promote their use	Yes
Financial - limited or no reimbursement by insurance companies for services; business models not yet developed for broad and sustainable eHealth delivery	Yes

Continuing education in ICT for health professionals	No
Internet health information quality Approaches taken to ensure quality of health-related content on the Internet	
Voluntary compliance - by content providers or website owners to quality criteria for health-related sites	Yes
Dedicated website(s) - concerning women's & children's health	No

Online safety for children Approaches taken by government to protect children in the online environment		
Government provides information and education to citizens on internet safety and literacy	Do not know	
Some initiatives are aimed specifically to protect children		
Safety tools and security technologies are required by law for schools, libraries and other public places where children have Internet access	Yes	
ISPs are legally mandated to provide online safety tools to protect children	Yes	

Privacy and security of personal and health-related data Legislation to protect women and children	
Privacy laws exist to protect citizens' personal identifiable data irrespective of format (paper or digital)	Yes
Privacy laws exist to protect citizens' health data held in digitized format in an Electronic Medical Record (EMR) or Electronic Health Record (EHR)	Yes
Parental consent required for the creation of a child's EMR/EHR	Yes
Parental access to a child's EMR/EHR is possible	
Correction of errors in a child's EMR/EHR is possible	Do not know
Legislation exists enabling the sharing of EMR/EHR between health care entities within the same country	
Parental consent is required	
Legislation exists enabling the sharing of EMR/EHR between health care entities in other countries	
Parental consent is required	
Legislation exists which grants a child the right to control over its EMR/EHR	No
From age (years)	

Social media Countries are recognizing the benefit of using social media for health	
Some health programmes use social media (eg. Facebook, Twitter, YouTube)	Yes

ICT training

Tertiary institutions offer ICT training for students of health sciences