



| *         | Population (000s)                               | 15,302 | Life expectancy at birth (years)             | 57    |
|-----------|---|--------|--|-------|
| <b>₹</b>  | GNI per capita (PPP Int \$)                     | 1,540  | Total health expenditure (% GDP)             | 7.1   |
| uni       | Physician density (per 10 000 population)       | 0.08   | ICT Development Index rank                   | 144   |
| $\bar{O}$ | Nurse & midwife density (per 10 000 population) | 0.43   | Mobile-cellular subscriptions (% population) | 98.38 |
| 00        | Hospital bed density (per 10 000 population)    | 1      | Internet users (% population)                | 2.2   |

# 1. eHealth foundations

| National policies or strategies                             |                  |                        |                    |  |
|---|------------------|------------------------|--------------------|--|
|   | Country response | Global "yes" response§ | Year adopted       |  |
| National universal health coverage policy or strategy       | Yes              | 75%                    | 2009               |  |
| National eHealth policy or strategy                         | Yes              | 58%                    | 2013               |  |
| National health information system (HIS) policy or strategy | Yes              | 66%                    | 1998               |  |
| National telehealth policy or strategy                      | Yes              | 22%                    | 2013               |  |
| Funding sources for eHealth                                 |                  |                        |                    |  |
|   | Country response | Global "yes" response§ | Funding source %** |  |
| Public funding  | Yes              | 77%                    | 50-75%             |  |
| Private or commercial funding                               | Yes              | 40%                    | Zero               |  |
| Donor/non-public funding                                    | Yes              | 63%                    | <25%               |  |
| 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   | Yes              | 48%                    |                    |  |
| eHealth capacity building                                   |                  |                        |                    |  |
|   | Country response | Global "yes" response§ | Proportion**       |  |
| Health sciences students – Pre-service training in eHealth  | Yes              | 74%                    | <25%               |  |
| Health professionals – In-service training in eHealth       | Yes              | 77%                    | <25%               |  |

# 2. Legal frameworks for eHealth

| Policy or legislation – purpose  | Country response | Global "yes" response§ |
|--|------------------|------------------------|
| Defines <b>medical jurisdiction</b> , <b>liability or reimbursement of eHealth services</b> such as telehealth                                 | No               | 31%                    |
| Addresses <b>patient safety and quality of care</b> based on data quality, data transmission standards or clinical competency criteria         | No               | 46%                    |
| Protects the <b>privacy of personally identifiable data</b> of individuals irrespective of whether it is in <b>paper or digital format</b>     | No               | 78%                    |
| Protects the <b>privacy of individuals' health-related data</b> held in electronic format in an <b>EHR</b>                                     | No               | 54%                    |
| Governs the <b>sharing of digital data between health professionals in other health services</b> in the same country through the use of an EHR | No               | 34%                    |
| Governs the <b>sharing of digital data between health professionals in health services</b> in other countries through the use of an <b>EHR</b> | No               | 22%                    |
| Governs the sharing of personal and health data between research entities  | No               | 39%                    |
| Allows <b>individuals electronic access to their own health-related data</b> when held in an <b>EHR</b>  | No               | 29%                    |
| Allows <b>individuals to demand their own health-related data be corrected</b> when held in an <b>EHR</b> 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  | _                | 76%                    |
| Governs national identification management systems   | Yes              | 65%                    |



## 3. Telehealth

| Telehealth programmes country overview |                       |                  |  |
|--|-----------------------|------------------|--|
|  | Health system level** | Programme type** |  |
| Teleradiology                          | National              | Pilot            |  |
| Teledermatology                        | ‡                     | ‡                |  |
| Telepathology                          | National              | Pilot            |  |
| 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   | Yes              | 58%                     |
| Supply chain management information systems  | Yes              | 58%                     |
| sopply chairmanagement information systems   | 100              | /-                      |

# 5. Use of eLearning in health sciences

| eLearning programmes country overview  |                  |                        |  |
|--|------------------|------------------------|--|
| Health sciences students — Pre-service | Country response | Global "yes" response§ |  |
| Medicine                               | Yes              | 58%                    |  |
| Dentistry                              | No               | 39%                    |  |
| Public health                          | No               | 50%                    |  |
| Nursing & midwifery                    | No               | 47%                    |  |
| Pharmacy                               | No               | 38%                    |  |
| Biomedical/Life sciences               | Yes              | 42%                    |  |
| Health professionals – In-service      | Country response | Global "yes" response§ |  |
| Medicine                               | Yes              | 58%                    |  |
| Dentistry                              | No               | 30%                    |  |
| Public health                          | Yes              | 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                        | National              | Informal         |
| Health call centres                        | National              | Pilot            |
| Appointment reminders                      | National              | Informal         |
| Mobile telehealth                          | Regional              | Pilot            |
| Management of disasters and emergencies    | National              | Pilot            |
| Treatment adherence                        | National              | Pilot            |
| Accessing/providing health information     | Health system level** | Programme type** |
| Community mobilization                     | National              | Informal         |
| Access to information, databases and tools | Regional, National    | ‡                |
| Patient records                            | National              | Pilot            |
| mLearning                                  | National              | Pilot            |
| Decision support systems                   | National              | Pilot            |
| Collecting health information              | Health system level** | Programme type** |
| Patient monitoring                         | ‡                     | ‡                |
| Health surveys                             | National              | Established      |
| Disease surveillance                       | National              | Pilot            |

#### 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 | No                               | 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   | lelp manage patient appointments |                        | 24%                    |
| Seek feedback on services  | ek feedback on services          |                        | 56%                    |
| Make general health announcements  | ake general health announcements |                        | 72%                    |
| Make emergency announcements   | ike emergency announcements      |                        | 59%                    |
| Individuals and communities – use of social media                                  |                                  | Country response       | Global "yes" response§ |
| Learn about health issues  | arn about health issues          |                        | 79%                    |
| elp decide what health services to use   |                                  | No                     | 56%                    |
| rovide feedback to health facilities or health professionals                       |                                  | No                     | 62%                    |
| un community-based health campaigns  |                                  | Yes                    | 62%                    |
| Participate in community-based health forums                                       |                                  | No                     | 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:

Informal:

#### **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"

N/A Not applicable

Indicates question was unanswered

Question not asked Zero No funding

processes and policies Testing and evaluating a programme Established: An ongoing programme that has been conducted for a

**Local or peripheral level:** Health posts, health centres providing basic level of care

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

Pilot:

and health centres

International level: Health entities in different geographic regions

public, but also private)

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

Use of ICT for health purposes in the absence of formal