

Country context*	Population (000s)	1,133	Life expectancy at birth (years)	67
	GNI per capita (PPP Int \$)	6,410	Total health expenditure (% GDP)	1.3
	Physician density (per 10 000 population)	0.07	ICT Development Index rank	—
	Nurse & midwife density (per 10 000 population)	1.11	Mobile-cellular subscriptions (% population)	55.74
	Hospital bed density (per 10 000 population)	59	Internet users (% population)	0.9

## 1. eHealth foundations

National policies or strategies			
	Country response	Global "yes" response <sup>§</sup>	Year adopted
National universal health coverage policy or strategy	Yes	75%	2010
National eHealth policy or strategy	No	58%	N/A
National health information system (HIS) policy or strategy	Yes	66%	2012
National telehealth policy or strategy	No	22%	N/A
Funding sources for eHealth			
	Country response	Global "yes" response <sup>§</sup>	Funding source %**
Public funding	Yes	77%	‡
Private or commercial funding	Yes	40%	‡
Donor/non-public funding	Yes	63%	‡
Public-private partnerships	Yes	42%	‡
Multilingualism in eHealth			
	Country response	Global "yes" response <sup>§</sup>	Year adopted
Policy or strategy on multilingualism	—	28%	N/A
Government-supported Internet sites in multiple languages	—	48%	
eHealth capacity building			
	Country response	Global "yes" response <sup>§</sup>	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 <sup>§</sup>
Defines <b>medical jurisdiction, 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 <b>EHR</b>	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 <b>sharing of personal and health data between research entities</b>	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 <b>individuals to demand the deletion of health-related data</b> from their <b>EHR</b>	No	18%
Allows <b>individuals to specify which health-related data</b> from their <b>EHR</b> can be <b>shared with health professionals</b> of their choice	No	28%
Governs <b>civil registration and vital statistics</b>	Yes	76%
Governs <b>national identification management systems</b>	—	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	Yes	‡
Legislation governing the use of the national EHR system	No	
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)	Yes	<25%
Other electronic systems	Country response	Global "yes" response§
Laboratory information systems	Yes	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	No	58%
Supply chain management information systems	Yes	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	National	Established
Health call centres	National	Established
Appointment reminders	Intermediate	Established
Mobile telehealth	‡	‡
Management of disasters and emergencies	National	Established
Treatment adherence	‡	‡
Accessing/providing health information	Health system level**	Programme type**
Community mobilization	Intermediate	Established
Access to information, databases and tools	‡	‡
Patient records	‡	‡
mLearning	‡	‡
Decision support systems	‡	‡
Collecting health information	Health system level**	Programme type**
Patient monitoring	‡	‡
Health surveys	Local	Pilot
Disease surveillance	‡	‡

## 7. Social media

Social media and health	Country response	Global "yes" response <sup>§</sup>	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 <sup>§</sup>	
Promote health messages as a part of health promotion campaigns	Yes	78%	
Help manage patient appointments	—	24%	
Seek feedback on services	—	56%	
Make general health announcements	Yes	72%	
Make emergency announcements	—	59%	
Individuals and communities – use of social media	Country response	Global "yes" response <sup>§</sup>	
Learn about health issues	Yes	79%	
Help decide what health services to use	Yes	56%	
Provide feedback to health facilities or health professionals	—	62%	
Run community-based health campaigns	—	62%	
Participate in community-based health forums	—	59%	

## 8. Big data

Policy or strategy – purpose	Country response	Global "yes" response <sup>§</sup>	Year adopted
Governing the use of big data in the health sector	—	17%	N/A
Governing the use of big data by private companies	—	8%	N/A

### 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