Tajikistan

Country context*				
Population (000s)	8,208	Life expectancy at birth (years)	69
GNI per capita (PPP Int $)	2,500	Total health expenditure (% GDP)	6.8
Physician density (per 10 000 population)	1.92	ICT Development Index rank	—
Nurse & midwife density (per 10 000 population)	5.02	Mobile-cellular subscriptions (% population)	81.51
Hospital bed density (per 10 000 population)	52	Internet users (% population)	14.5

1. eHealth foundations

National policies or strategies			
	Country response	Global "yes" response§	Year adopted
National universal health coverage policy or strategy	Yes	75%	2010
National eHealth policy or strategy	‡	58%	‡
National health information system (HIS) policy or strategy	Yes	66%	2011
National telehealth policy or strategy	No	22%	N/A
Funding sources for eHealth			
	Country response	Global "yes" response§	Funding source %**
Public funding	Yes	77%	25-50%
Private or commercial funding	No	40%	Zero
Donor/non-public funding	Yes	63%	25-50%
Public-private partnerships	No	42%	Zero
Multilingualism in eHealth			
	Country response	Global "yes" response§	Year adopted
Policy or strategy on multilingualism	—	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%	25-50%
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 **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	Yes	46%
Protects the **privacy of personally identifiable data** of individuals irrespective of whether it is in **paper or digital format**	Yes	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**	Yes	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	Regional, National	Informal

4. Electronic Health Records (EHRs)

EHR country overview		
	Country response	Year introduced
National EHR system	Yes	2013
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)	Yes	<25%
Secondary care facilities (e.g. hospitals, emergency care)	Yes	<25%
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	Yes	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	Yes	69%

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	Yes	39%
Public health	Yes	50%
Nursing & midwifery	Yes	47%
Pharmacy	No	38%
Biomedical/Life sciences	No	42%
Health professionals – In-service	**Country response**	**Global "yes" response§**
Medicine	Yes	58%
Dentistry	Yes	30%
Public health	Yes	47%
Nursing & midwifery	Yes	46%
Pharmacy	No	31%
Biomedical/Life sciences	Yes	34%

6. mHealth

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

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 campaigns	‡	78%	
Help manage patient appointments	Yes	24%	
Seek feedback on services	Yes	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	Yes	56%	
Provide feedback to health facilities or health professionals	Yes	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

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