Belarus

Country context*				
Population (000s)	9,357	Life expectancy at birth (years)	72
GNI per capita (PPP Int $)	16,940	Total health expenditure (% GDP)	6.1
Physician density (per 10 000 population)	3.93	ICT Development Index rank	41
Nurse & midwife density (per 10 000 population)	10.64	Mobile-cellular subscriptions (% population)	—
Hospital bed density (per 10 000 population)	111	Internet users (% population)	46.9

1. eHealth foundations

National policies or strategies			
	Country response	Global "yes" response§	Year adopted
National universal health coverage policy or strategy	Yes	75%	1993
National eHealth policy or strategy	No	58%	N/A
National health information system (HIS) policy or strategy	No	66%	N/A
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%
Private or commercial funding	No	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	—	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%	>75%
Health professionals – In-service training in eHealth	Yes	77%	>75%

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	No	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	Intermediate	Informal
Teledermatology	‡	‡
Telepathology	‡	‡
Telepsychiatry	‡	‡
Remote patient monitoring	‡	‡

4. Electronic Health Records (EHRs)

EHR country overview		
	Country response	Year introduced
National EHR system	Yes	2005
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	25-50%
Secondary care facilities (e.g. hospitals, emergency care)	Yes	25-50%
Tertiary care facilities (e.g. specialized care, referral from primary/secondary care)	Yes	25-50%
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	No	58%
Supply chain management information systems	No	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	Yes	58%
Dentistry	No	39%
Public health	Yes	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	Yes	34%

6. mHealth

mHealth programmes country overview		
Accessing/providing health services	**Health system level****	**Programme type****
Toll-free emergency	Intermediate	Informal
Health call centres	Intermediate	Informal
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	Local	‡
Patient records	‡	‡
mLearning	National	‡
Decision support systems	‡	‡
Collecting health information	**Health system level****	**Programme type****
Patient monitoring	Intermediate	Informal
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	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 campaigns		No	78%
Help manage patient appointments		No	24%
Seek feedback on services		No	56%
Make general health announcements		No	72%
Make emergency announcements		No	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		No	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

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