

Country context*	Population (000s)	11,777	Life expectancy at birth (years)	65
	GNI per capita (PPP Int \$)	1,430	Total health expenditure (% GDP)	11.1
	Physician density (per 10 000 population)	0.06	ICT Development Index rank	141
	Nurse & midwife density (per 10 000 population)	0.69	Mobile-cellular subscriptions (% population)	49.67
	Hospital bed density (per 10 000 population)	16	Internet users (% population)	8

1. eHealth foundations

National policies or strategies			
	Country response	Global "yes" response [§]	Year adopted
National universal health coverage policy or strategy	‡	75%	‡
National eHealth policy or strategy	Yes	58%	2015
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%	25-50%
Private or commercial funding	No	40%	Zero
Donor/non-public funding	Yes	63%	25-50%
Public-private partnerships	Yes	42%	<25%
Multilingualism in eHealth			
	Country response	Global "yes" response [§]	Year adopted
Policy or strategy on multilingualism	Yes	28%	2015
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 medical jurisdiction, liability or reimbursement of eHealth services such as telehealth	‡	31%
Addresses patient safety and quality of care based on data quality, data transmission standards or clinical competency criteria	‡	46%
Protects the privacy of personally identifiable data of individuals irrespective of whether it is in paper or digital format	‡	78%
Protects the privacy of individuals' health-related data held in electronic format in an EHR	‡	54%
Governs the sharing of digital data between health professionals in other health services in the same country through the use of an EHR	‡	34%
Governs the sharing of digital data between health professionals in health services in other countries through the use of an EHR	‡	22%
Governs the sharing of personal and health data between research entities	‡	39%
Allows individuals electronic access to their own health-related data when held in an EHR	‡	29%
Allows individuals to demand their own health-related data be corrected when held in an EHR if it is known to be inaccurate	‡	32%
Allows individuals to demand the deletion of health-related data from their EHR	‡	18%
Allows individuals to specify which health-related data from their EHR can be shared with health professionals of their choice	‡	28%
Governs civil registration and vital statistics	‡	76%
Governs national identification management systems	‡	65%

3. Telehealth

Telehealth programmes country overview

	Health system level**	Programme type**
Teleradiology	Intermediate	Established
Teledermatology	‡	‡
Telepathology	‡	‡
Telepsychiatry	‡	‡
Remote patient monitoring	Intermediate	Pilot

4. Electronic Health Records (EHRs)

EHR country overview

	Country response	Year introduced
National EHR system	‡	‡
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)	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)	No	N/A
Other electronic systems	Country response	Global "yes" response [§]
Laboratory information systems	No	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	‡	58%
Supply chain management information systems	‡	58%
Human resources for health information systems	‡	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	Yes	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	Yes	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	Established
Health call centres	National	Established
Appointment reminders	National	Established
Mobile telehealth	‡	‡
Management of disasters and emergencies	National	Established
Treatment adherence	‡	‡
Accessing/providing health information	Health system level**	Programme type**
Community mobilization	National	Established
Access to information, databases and tools	‡	‡
Patient records	National	Established
mLearning	‡	‡
Decision support systems	National	Established
Collecting health information	Health system level**	Programme type**
Patient monitoring	National	Established
Health surveys	‡	‡
Disease surveillance	National	Established

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%	‡
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	‡	24%	
Seek feedback on services	‡	56%	
Make general health announcements	‡	72%	
Make emergency announcements	‡	59%	
Individuals and communities – use of social media	Country response	Global "yes" response [§]	
Learn about health issues	‡	79%	
Help decide what health services to use	‡	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 [§]	Year adopted
Governing the use of big data in the health sector	‡	17%	‡
Governing the use of big data by private companies	‡	8%	‡

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