

Country context*	Population (000s)	33,765	Life expectancy at birth (years)	70
	GNI per capita (PPP Int \$)	15,220	Total health expenditure (% GDP)	5.2
	Physician density (per 10 000 population)	0.61	ICT Development Index rank	—
	Nurse & midwife density (per 10 000 population)	—	Mobile-cellular subscriptions (% population)	81.63
	Hospital bed density (per 10 000 population)	13	Internet users (% population)	7.1

1. eHealth foundations

National policies or strategies			
	Country response	Global "yes" response [§]	Year adopted
National universal health coverage policy or strategy	Yes	75%	‡
National eHealth policy or strategy	‡	58%	‡
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	—	77%	<25%
Private or commercial funding	—	40%	<25%
Donor/non-public funding	Yes	63%	‡
Public-private partnerships	—	42%	<25%
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	—	48%	
eHealth capacity building			
	Country response	Global "yes" response [§]	Proportion**
Health sciences students – Pre-service training in eHealth	No	74%	N/A
Health professionals – In-service training in eHealth	—	77%	N/A

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	Yes	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	—	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	—	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	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	‡	‡

4. Electronic Health Records (EHRs)

EHR country overview

	Country response	Year introduced
National EHR system	—	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	No	58%
Supply chain management information systems	No	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	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	Local	Pilot
Health call centres	Local	Pilot
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	‡	‡
Patient records	‡	‡
mLearning	‡	‡
Decision support systems	‡	‡
Collecting health information	Health system level**	Programme type**
Patient monitoring	‡	‡
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	—	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	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	No	79%	
Help decide what health services to use	No	56%	
Provide feedback to health facilities or health professionals	No	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	‡	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