1. eHealth foundation actions

eHealth foundation actions build an enabling environment for the use of ICT for health. These include supportive eHealth policies, quality assurance approaches to health-related Internet content, Internet safety, legislation for sharing health-related data between health care staff through EMR/EHR, legislation on personal and health-related data, and national eHealth policy.

II. Legal and ethical frameworks for eHealth

Legislation on personal and health-related data, To ensure privacy of personally identifiable data, To protect personally identifiable data specifically in EHR or EMR, Legislation for sharing health-related data between health care staff through EMR/EHR, Within the same health care facility and its network of care providers, With different health care entities within the country, With health care entities in other countries, Internet pharmacies, Legislation that allows/prohibits Internet pharmacy operations, National regulation/accreditation/certification of Internet pharmacy sites, Legislation that allows/prohibits Internet pharmacy operations from other countries, Internet safety, Government sponsored initiatives about Internet safety and literacy, Security tools required by law for facilities used by children, Quality assurance approaches to health-related Internet content, Voluntary compliance by content providers or web site owners, Technology through filters and controls, Government intervention through laws or regulations, Education programmes for consumers and professionals, Official approval through certification, accreditation, or quality seals.

III. eHealth expenditures and their funding source

Expenditure | Public funding | Private funding | Donor/non-public funding | Public-private partnerships funding | Country response | Global response (%)
---|---|---|---|---|---|---
ICT equipment | — | 78 | — | — | No | 47
Software | — | 76 | — | — | No | 28
Pilot projects | — | 69 | — | — | No | 28
Skills training | — | 61 | — | — | No | 28
Organic growth | — | 61 | — | — | No | 28
Scholarships | — | 28 | — | — | No | 28

IV. Capacity building

Country response | Global response (%)
---|---
ICT education | Yes | 73
ICT training for students in health sciences at tertiary institutions | Yes | 77
Institutions offer continuing education in ICT for health professionals | Yes | 75
Professional groups offered ICT continuing education | Medical | Yes | 73
Nursing | Yes | 62
Public health | Yes | 60
Dentistry | No | 54
Pharmacy | No | 54

I. Policy framework

Country response | Global response (%)
---|---
National eGovernment policy | Yes | 65* | Yes | 2007
National eHealth policy | No | 55* | — | —
National ICT procurement policy for health sector | No | 37* | — | —
National multiculturalism policy for eHealth | No | 37* | — | —
National telemedicine policy | Yes | 25* | — | —

II. mHealth

Country response | Global response (%)
---|---
mHealth initiatives | Yes | 63
Formal evaluation and/or publication of mHealth initiatives | No | 12
Barriers to implementing mHealth initiatives | No | 44
Competing priorities | No | 47
Lack of knowledge of applications | Yes | 40
Lack of legal policies/regulation | Yes | 40
Lack of demand | Yes | 29
Lack of technical expertise | Yes | 26
Underdeveloped infrastructure | Yes | 23
Availability of suitable courses | No | 42
Lack of demand | No | 21

III. eLearning

Country response | Global response (%)
eLearning in health sciences at the tertiary level | Yes | 72
Used in teaching health sciences | Yes | 69
Used in training health professionals | Yes | 64
Barriers to eLearning | Yes | 63
Underdeveloped infrastructure | Yes | 55
Lack of policy framework | Yes | 46
Lack of skilled course developers | Yes | 45
Lack of knowledge of applications | Yes | 44
Perceived costs too high | Yes | 43
Availability of suitable courses | No | 42
Lack of demand | No | 21

IV. ICT education

Country response | Global response (%)
---|---
ICT education | Yes | 68
Public health | No | 52
Nursing | No | 50
Pharmacy | No | 45
Dentistry | No | 39

V. eHealth applications

eHealth applications surveyed in 2009 include telemedicine (the delivery of health care services using ICT where distance is a barrier to care), mHealth (the use of mobile devices in delivering health care services), and eLearning (use of ICT for learning).

L. Telemedicine

Country response | Global response (%)
---|---
Telemedicine enabling actions | National telemedicine policy | Yes | 25
Implemented national telemedicine policy | No | —
Formal evaluation and/or publication of telemedicine initiatives since 2006 | No | 22
Barriers to implementing telemedicine policies | Yes | 60
Perceived costs too high | Yes | 40
Lack of legal policies/regulation | Yes | 39
Organizational culture not supportive | Yes | 38
Underdeveloped infrastructure | Yes | 37
Lack of policy frameworks | Yes | 31
Competing priorities | Yes | 26
Lack of demand by health professionals | Yes | 25
Lack of nationally adopted standards | Yes | 17
Lack of technical expertise | Yes | 17

Information most needed in country to support telemedicine development | Cost and cost effectiveness | Yes | 69
Clinical possibilities | No | 58
Infrastructure | Yes | 52
Evaluation | No | 46
Legal and ethical | Yes | 46
Effect on human resources | No | 40
Patients’ perception | No | 30

mHealth initiatives | mHealth initiatives are conducted in country | No | 53
Formal evaluation and/or publication of mHealth initiatives | No | 12
Barriers to implementing mHealth initiatives | No | 44
Competing priorities | No | 47
Lack of knowledge of applications | Yes | 40
Lack of policy framework | Yes | 38
Cost effectiveness unknown | Yes | 37
Lack of legal policies/regulation | Yes | 29
Lack of demand | Yes | 28
Underdeveloped infrastructure | Yes | 26
Lack of technical expertise | Yes | 25

eLearning in health sciences at the tertiary level | Yes | 72
Used in teaching health sciences | Yes | 69
Used in training health professionals | Yes | 64
Barriers to eLearning | Yes | 63
Underdeveloped infrastructure | Yes | 55
Lack of policy framework | Yes | 46
Lack of skilled course developers | Yes | 45
Lack of knowledge of applications | Yes | 44
Perceived costs too high | Yes | 43
Availability of suitable courses | No | 42
Lack of demand | No | 21

L. eLearning

Country response | Global response (%)
eeLearning in health sciences at the tertiary level | Yes | 72
Used in teaching health sciences | Yes | 69
Used in training health professionals | Yes | 64
Barriers to eLearning | Yes | 63
Underdeveloped infrastructure | Yes | 55
Lack of policy framework | Yes | 46
Lack of skilled course developers | Yes | 45
Lack of knowledge of applications | Yes | 44
Perceived costs too high | Yes | 43
Availability of suitable courses | No | 42
Lack of demand | No | 21

Profession | Students | Global response (%)
---|---|---
Medical | Yes | 68
Public health | No | 52
Nursing | No | 50
Pharmacy | No | 45
Dentistry | No | 39

Profession | Professionals | Global response (%)
---|---|---
Medical | Yes | 71
Public health | Yes | 55
Nursing | Yes | 37
Pharmacy | Yes | 37
Dentistry | Yes | 37

* n=113
* n=112
* n=114

Indicates the percentage of participating Member States responding "Yes".