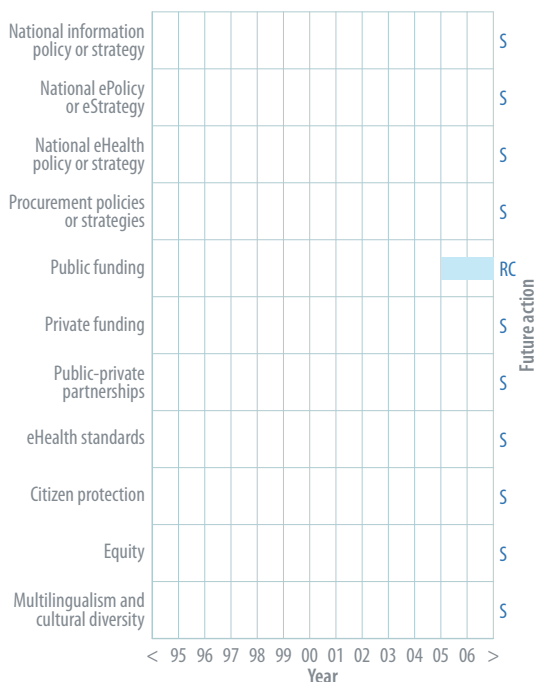


Cameroon

Enabling environment – policies and strategies to support the information society



Cameroon reports that policies and strategies to support the information society will be introduced by 2008. The country started providing ongoing public funding for information and communication technologies (ICT) support to programmes addressing national health priorities in 2005 and rates it as slightly effective. Most likely this action will be reviewed and continued within the next two years. The most effective action to build an enabling environment for the use of ICT in the health sector has been the development of a project proposal for eHealth by the Ministry of Posts and Telecommunications presented to the Ministry of Public Health for approval. The most significant challenge has been the coordination of action on eHealth between the Ministry of Posts and Telecommunication and the Ministry of Public Health.

Figure 1. Enabling environment for ICT in the health sector: actions taken or planned within 2 years and their effectiveness rating

Infrastructure – access to information and communication technologies

To date, none of the listed actions have been taken, however, Cameroon plans to introduce them by 2008. The creation of a computing facility at the Ministry of Public Health has been the most effective action in building infrastructure for the health sector. The most significant challenge has been the maintenance of the computing system and extending ICT infrastructure coverage.

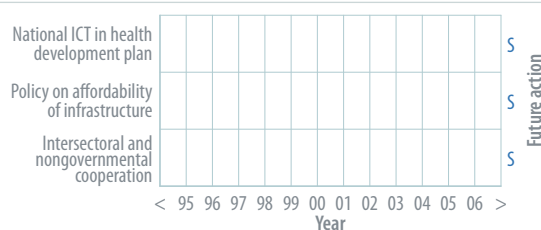
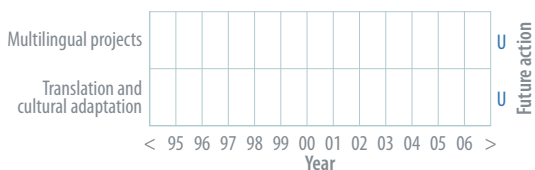


Figure 2. ICT infrastructure development for the health sector: actions taken or planned within 2 years and their effectiveness rating

Cultural and linguistic diversity, and cultural identity



To date, none of the specified actions have been taken and a decision remains to be made regarding future action in this area. Cameroon indicates that the most significant challenge in providing electronic multicultural health content has been the presence of many local languages.

Figure 3. Electronic multicultural health content: actions taken or planned within 2 years and their effectiveness rating

Country indicators	Population (000s)	15 749	OECD country	No	Main telephone lines*	0.59 [03]
	GDP per capita (Int \$)	1 516	World Bank category	4	Internet users*	1.02
	Total health expenditure (% of GDP)	4.2	ICT Diffusion Index	0.2079	Mobile phone subscribers*	9.43

Content – access to information and knowledge

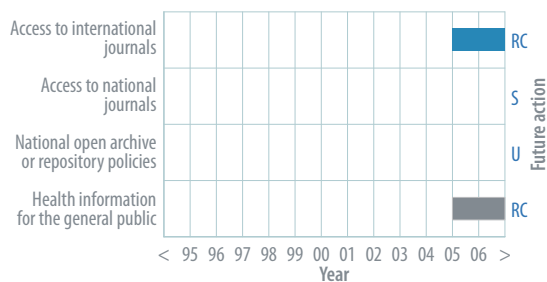


Figure 4. Online access to health content: actions taken or planned within 2 years and their effectiveness rating

Access to international electronic journals was introduced in 2005 and has been rated as very effective. It is anticipated that this action will be reviewed and continued over the next two years. Creating and providing health information for the general public in electronic format also started in 2005; it is too early to evaluate its effectiveness. Nonetheless, this is likely to be reviewed and continued over the next two years. Making online information available for the general public has been the most effective action to promote access to electronic health content but updating this information has proven to be a very significant challenge.

Capacity – human resources knowledge and skills

Undergraduate and postgraduate training in ICT was introduced for health sciences students in 2002 and has been rated as moderately effective. It is expected that these programmes will be reviewed and continued over the next two years. Continuing ICT education for health professionals was introduced in 1997 and stopped in 1999. It was rated as being moderately effective and will commence again in the next two years. eLearning courses in health sciences for professionals and students have been offered since 2003 and are moderately effective. This action is likely to be continued. A project of scholarships for health professionals for public health training including ICT components was highlighted as being very effective. Scholarships to postgraduates are noted as being one of the most effective actions to build ICT capacity in the health sector. Cameroon notes that funding for postgraduate training and establishing local training centres have been the most significant challenges in this field.

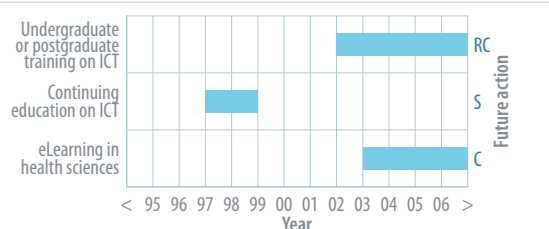


Figure 5. ICT capacity in the health sector: actions taken or planned within 2 years and their effectiveness rating

eHealth tools and eHealth services

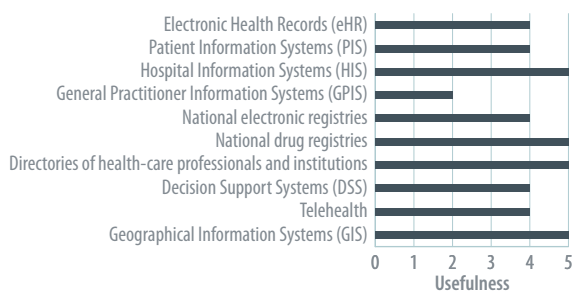


Figure 6. Preferred generic eHealth tools to be provided by WHO

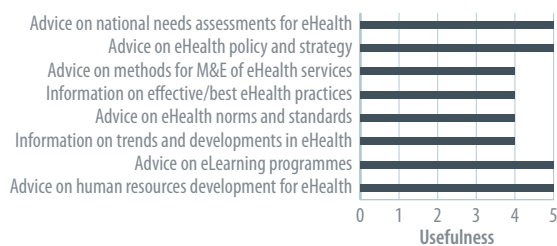


Figure 7. Preferred eHealth services to be provided by WHO

Cameroon reports that eHealth tools such as Hospital Information Systems (HIS), national drug registries, directories of healthcare professionals and institutions and Geographical Information Systems (GIS) would be extremely useful if the World Health Organization could offer these as generic prototypes for national adaptation. eHealth services that offer advice on national needs assessments for eHealth, eHealth policy and strategy, eLearning programmes, and Human resources development for eHealth would be welcomed and are considered extremely useful. All other listed eHealth services are rated as very useful by Cameroon.

Legend	Effectiveness	Future action	Usefulness
	Extremely effective	C To be continued	5 Extremely useful
Very effective	RC To be reviewed & continued	4 Very useful	
Moderately effective	S To be started	3 Moderately useful	
Slightly effective	P To be stopped	2 Slightly useful	
Not effective	U Undecided	1 Not useful	
Unknown effectiveness	O No data / No action	0 No data	
Start date unknown			
No data			

* per 100 inhabitants