



World Summit
on the Information Society
Turning targets into action



Document Number: WSIS+10/4/28

Note: This Executive Summary captures the main achievements, challenges and recommendations of the Action Line during the 10-year period of WSIS Implementation; this has been submitted by the Action Line Facilitator in response to the request by the participants of the Third WSIS+10 MPP meeting. The complete report on the 10-Year Implementation of the Action line was submitted to the Third WSIS+10 MPP meeting held on 17-18 February 2014 and is available at the following url:

www.itu.int/wsis/review/reports/#actionline

10-Year WSIS Action Line Facilitator's Reports on the Implementation of WSIS Outcomes

WSIS Action Line – C7: E-health

Lead Facilitator: WHO

Executive Summary

1. Introduction

Priority areas in the action line include improving health information systems, facilitating access to knowledge and information, promoting international standards for exchange of health data, and strengthening systems for disaster response and communicable diseases monitoring and alert.

2. Achievements and challenges

Information and communication are essential to the delivery of health services, building health systems, and ensuring effective public health action. Every field mission, country office, health ministry, partnership and program depends on reliable and timely information to do their work. As a basis for health action and advocacy the world over, information gathering, analysis, reporting and exchange is fundamental. The WSIS called for participation of all stakeholders. In the health sector, this includes: governments; multilateral agencies; development partners; health care organizations and businesses; academic, research and public health institutions; standards development organizations; health workers and professional associations; information and communication technology (ICT) entities; nongovernmental organizations; and individuals, families and communities.

The action line aligns with World Health Assembly (WHA) resolutions in 2005¹ and 2013², which urged countries to develop long-term strategic plans for eHealth to guide policy development, plan for implementation, and address security, privacy, interoperability, cultural and linguistic issues, workforce development, infrastructure, financing and evaluation. In addition to WHA resolutions, other global initiatives have encouraged countries to integrate the use of ICTs in health³.

WHO's Global Observatory for eHealth monitors country progress, trends and developments in eHealth. Since 2005 there has been continued progress in building the foundations for eHealth. There is significant experimentation, even as countries build the information infrastructure and policy environment to support broader eHealth adoption. ICTs have become central to health security, services delivery, and the transformation of health systems worldwide. The Internet has far-reaching implications for public health including for the quality of information, data security and privacy, and the promotion and sales of medical products and services.

Public-private partnerships play an important role in eHealth implementation, combining knowledge and experience, and enabling new models of collaboration towards innovative solutions and impact on health. For example, responding to the call for *improving access to the world's health information*, initiatives such as the HINARI Access to Research in Health Programme⁴ set up by WHO and major publishers, enables over 5,700 institutions in 116 low- and low-middle-income countries to gain access to one of the world's largest collections of biomedical and health literature, with over 13,000 journals, 29,000 books and other resources online.

The adoption of eHealth standards is essential to health systems development. Effective and timely transmission of personal data or population data requires adherence to health data standards and related technology standards. There is growing commitment among stakeholders from the public and private sector to raise awareness, build capacity and promote the adoption of standards at all levels of health systems⁵.

The use of ICT in education and training of health personnel can help address critical shortages and gaps. There have been significant advances by universities, governments and civil society in making content available for audiences such as policy-makers, researchers, health personnel and agencies, and the public.

Improving access to *quality health information* for policy-makers, health care workers and the public is a shared goal of many stakeholders. Governments focus on policies for consumer protection, safety and privacy in the online world. Health professional and civil society initiatives advocate for inclusiveness and free access to health information in all its forms, including for open access to health research data and prospective research registration in publicly accessible research registries. Major challenges still include ensuring that information is accurate,

¹ http://www.who.int/qb/ebwha/pdf_files/WHA58/WHA58_28-en.pdf

² http://apps.who.int/qb/ebwha/pdf_files/WHA66/A66_R24-en.pdf

³ http://www.who.int/topics/millennium_development_goals/accountability_commission/en/

⁴ <http://www.who.int/hinari/en/>

⁵ <http://www.who.int/ehealth/en/>

complete, current and relevant to diverse cultures; leveraging the right technologies; and developing governance and business models for equitable, affordable, sustainable access.

The crucial importance of ICT in *systems for emergency preparedness and response* has been highlighted by global earthquake activity, cyclones and floods. ICT enables timely local reporting and mapping, the rapid and secure sharing of information, the use of web-based and mobile technologies alongside traditional media for public information exchange, the role of social media, and the connection of communities with front-line personnel for health action and response.

Public health reporting is addressed through the revised International Health Regulations (IHR)⁶, which entered into force in 2007 and were tested with the Influenza A (H1N1) pandemic in 2009. At that time, new media emerged as a factor in global health communication. The IHR commit all countries to collectively apply agreed rules for preventing and managing public health risks.

Developing a *national eHealth strategy* is a goal of many countries, as a basis for reaching health and development goals and improving *health information systems*. A national plan can make the best use of resources while providing a solid foundation for investment and innovation, and achieving longer-term goals such as health sector efficiency, reform or more fundamental transformation. Globally, 85 national eHealth strategies have been developed⁷.

In many countries, *barriers to scaling up eHealth* reflect the need for further evidence, including on the impact of eHealth for health systems development and universal health coverage. *Improving awareness and capacity of policy-makers and the health workforce* requires further efforts in advocacy, education and training. On-going challenges are ensuring an up-to-date *legal and regulatory landscape* as well as addressing gaps in the development and *adoption of health data standards and health information technology standards* to facilitate interoperability among systems and devices and provide for privacy and security in health information systems. Improving systems for monitoring disaster and emergency response requires *collaboration between countries, effective and durable public-private partnerships, and investment across sectors*. ICTs can contribute to safety, security and quality of life, yet further *innovation* is required to ensure that they are effective, appropriate, reliable and affordable in diverse country contexts. The WSIS process made it clear that the contribution of all stakeholders is needed to make the most of ICTs, so that they benefit all of society. This is true for health, where stakeholder consultation is essential to understanding people's priorities, needs and capabilities.

3. Recommendations

A decade after the first WSIS event, WHO as facilitator of the action line recognizes the growing scope and use of ICT in the health sector. However, a major effort is still required to meet the first WSIS commitments. The global economic scenario underscores that scarce funds must be invested strategically towards those commitments, including in research to guide eHealth policy and practice, particularly in emerging economies. It is important to assess how the changes in

⁶ www.who.int/ihr

⁷ www.who.int/qoe/en

communications platforms, applications and services impact health services and systems, and plan accordingly. Policy makers need to develop consensus around the pertinent policy problems and possible solutions. In this respect, all stakeholders have an essential contribution to make towards implementing this action line.