RESOLUTION 41 (Istanbul, 2002)

E-health (including telehealth/telemedicine)

The World Telecommunication Development Conference (Istanbul, 2002),

considering

a) that the World Telecommunication Development Conference (Valletta, 1998) recommended that ITU continue to study the potential of using telecommunications for e-health in order to meet some of the needs of developing countries, and as a result adopted Question 14/2 “Fostering the application of telecommunications in health care”;

b) that the ITU-D has produced a report on “Telemedicine and developing countries – Lessons learned” which was approved by ITU-D Study Group 2 in September 2000, and a telemedicine directory which was approved in September 2001;

c) that the second World Telemedicine Symposium for developing countries convened by the Telecommunication Development Bureau (BDT) in Buenos Aires, 1998, recommended that BDT set aside a specific budgetary allocation from ITU TELECOM surpluses and from the BDT budget for supporting the telecommunication component of e-health pilot projects, e-health training, and missions by telemedicine experts to assist developing countries in the formulation of proposals, and that ITU-D continue its studies of telecommunication needs for e-health and, in particular, to identify pilot projects, provide an analysis of project results, and assist countries to define a policy and strategy towards telemedicine implementation,

considering further

a) the potential benefits identified in the report on “Telemedicine and developing countries – Lessons learned”;

b) the new Question on what measures should be taken to facilitate the introduction of e-health applications in developing countries,

recognizing

a) that the possibility of undertaking e-health applications will be enhanced if appropriate regulatory, legal and policy frameworks exist in the telecommunication and health sectors;

b) that sharing expensive communication infrastructures with other applications such as e-commerce, distance education and so on can improve the availability and sustainability of e-health applications;

c) that in order to deploy these applications, it is necessary to adopt a multidisciplinary approach and bring together expertise from the information and telecommunication technology and health sectors,

resolves that BDT

1 continue its efforts to raise the awareness of decision-makers, health professionals, partners, beneficiaries and other key players about the benefits of telecommunications for the e-health applications;

2 continue to support e-health projects in collaboration with government, public, private, national and international partners – in particular with the World Health Organization (WHO);

3 collaborate with international and national initiatives in e-health, such as the UN Millennium Project: Health InterNetwork, led by WHO;
4 encourage collaboration, and provide support using TELECOM surplus funds and other resources, on e-health projects on the national and regional level;

5 set up, within existing budgetary resources, a fund for telecommunication facilities for e-health, and introduce e-health training in the centres of excellence;

6 promote, facilitate and provide technical support and training in information and communication technologies for e-health;

7 work with the health sector to identify models for sustainability of e-health applications, particularly in remote and rural areas of developing countries, exploring possibilities for sharing infrastructure with other services and applications,

invites

1 Member States to consider the establishment of a national committee/task force comprising representatives from the telecommunication and health care sectors in order to assist with awareness-raising at national level and with the formulation of feasible telemedicine projects;

2 the international financial institutions and donor agencies to assist in developing telemedicine/telehealth applications, projects and programmes in developing countries.