Draft WSIS+10 Vision for WSIS Beyond 2015

C7: ICT Applications E-Health

This document builds upon the input/ background documents and the contributions received during the WSIS+10 High-Level Event Open Consultation Process. It has been developed for the purposes of the First Physical meeting of the Open Consultation Process. This document is awaiting input from WHO.

Recognizing the central role of information and communication technologies (ICTs) in achieving sustainable development for implementation of WSIS Outcomes, in particular related to Action Line C7. Significant progress has been achieved and several emerging trends and challenges have been identified since the first Summit in 2003.

Despite the progress of the use of ICT for Health, the WSIS process must remind the world that core commitments have not fully been met, and that efforts should continue in this direction.

The following provides guidance and priorities for implementation of WSIS Action Line C7 beyond 2015.

1. Adopt **national e-health strategies** focusing on integrating ICTs to support the priorities of the health sector and to provide reliable and affordable Internet connectivity to health/medical centres to the benefit of all citizens including marginalized and disadvantaged groups, especially in rural areas.
2. Use ICT to **strengthen health services and access to medical information** especially for citizens in **remote and under-served areas in developing countries.**
3. Provide **access to e-health applications** to support health professionals working in remote areas.

4. Establish **networks for the exchange of medical information** among various entities including medical agencies, providers of services on telemedicine, home health care, nursing care and livelihood (e.g. online patients' records, remote medical care system, disease prevention, online visits registration systems, complaints, etc.).
5. Create systems like electronic records of drug prescription, and self-management of lifestyle diseases to access and manage medical and health information by patients and individuals themselves.
6. New technologies and services such as those that make up the "Internet of Things" and M2M Applications need to be adapted to ensure that developing countries can also benefit from them in the near future.
7. Ease access to the world's medical knowledge and locally-relevant content resources for strengthening public health research and prevention programs required for health experts in developing countries.
8. Integrate the existing e-**Health with e governance** process.
9. Increase and encourage the **use of mobile technologies** in health projects for greater reach and inclusiveness.
10. Ensure **privacy protection** in promoting e-health service.
11. Continue the need to ensure **affordable and reliable connectivity from remote areas to health centers**.
12. Develop **human capacity in e-Health.**
13. Grasp and analyze health conditions of **insurance subscribers, residents and employees by insurance companies, local governments and companies through data on medical examinations and health insurance claims**.
14. Create the **legal framework to promote the use of e-Health systems.**
15. **Measure the impact of e-Health**, through credible and replicable evaluation mechanisms and metrics.
16. Enhance **interoperability and networking** in e-Health systems.
17. Target **financial resources** specifically for e-Health services.
18. Seek innovative systems which connect people to information on health services, including mental health services, to improve issues of **accessibility, affordability and acceptability**.
19. Seek tools to better **inform about healthy lifestyles and health concerns**, which help us act on that information, especially in areas of sexual and reproductive health, and in dealing with issues of disability, including knowledge to reduce problems of stigma and fear associated with many diseases.

20. Provide widespread availability to **report and receive information, through ICTs**, of outbreaks, disasters, epidemics and/or other events which endanger our health.
21. Empower **young people to develop ICT tools** that improve the experience of health care while taking into account best practices and bioethics that are currently part of offline healthcare processes.