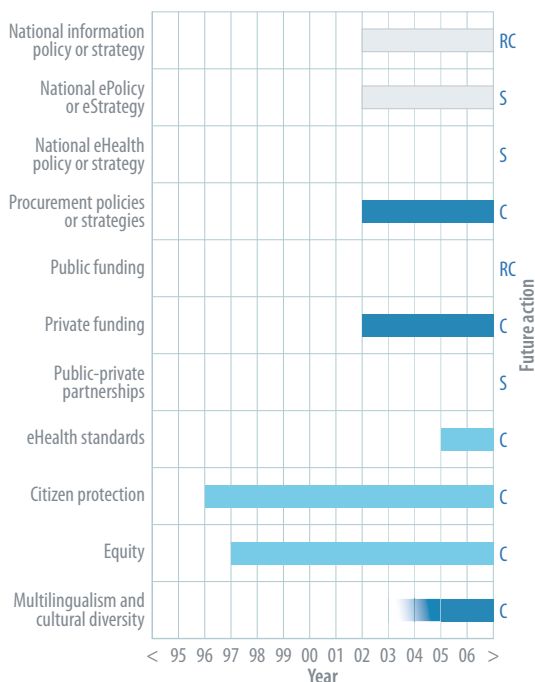


Zambia

Enabling environment – policies and strategies to support the information society



Zambia reports that the majority of the listed actions to promote an enabling environment for information and communication technologies (ICT) in the health sector have been taken. They are rated from moderately to very effective and will continue over the next two years. A national eHealth policy, public funding for ICT support and public-private partnerships to foster the use of ICT within the health sector are initiatives that are likely to be implemented by 2008. Most of the health-related programmes and the national health database at the Central Board of Health/Ministry of Health were computerized after the 1996/1997 health-care reform. Donor agencies have supported the development of the National Health database. Funding was insufficient, however, to implement the computerized health management information system.

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

A national plan for the development of ICT in health, which sets targets for health sector connectivity, was implemented in 2002 and rated as moderately effective. Intersectoral and nongovernmental cooperation commenced in 1995 and is considered very effective. Both actions will continue. Most of the current projects related to infrastructure have been funded by donors. A programme, implemented in 2004, to link all 72 districts in Zambia into a network is described as an important initiative. Lack of electricity in remote districts poses a challenge that the government is addressing with a project to provide rural areas with electricity.

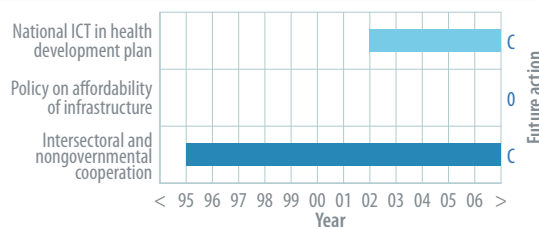
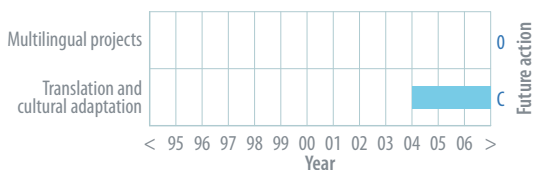


Figure 2. ICT infrastructure development for the health sector: actions taken or planned within 2 years and their effectiveness rating

Cultural and linguistic diversity, and cultural identity



The translation and cultural adaptation of existing high-quality health content (created either locally or abroad) has been successfully supported since 2004 and is expected to continue over the next two years.

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

Country indicators	Population (000s)	11 291	OECD country	No	Main telephone lines*	0.79 [03]
	GDP per capita (Int \$)	945	World Bank category	4	Internet users*	2.11
	Total health expenditure (% of GDP)	5.4	ICT Diffusion Index	0.2029	Mobile phone subscribers*	2.75

Content – access to information and knowledge

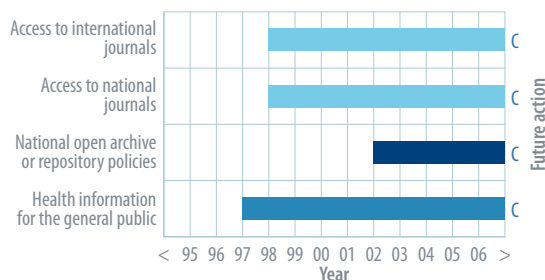


Figure 4. Online access to health content: actions taken or planned within 2 years and their effectiveness rating

Access to international and national electronic journals has been provided since 1998 and is rated as moderately effective. A policy for a digital national open archive for scientific research published within the country was implemented in 2002 and is considered extremely effective. In 1997, Zambia began creating and providing health information for the general public in electronic format, an initiative rated as very effective. All of these services are expected to continue. After the decentralization of the health sector in the mid-1990s, which led to the creation of health boards, a number of initiatives such as the Health Management Information System were developed.

Capacity – human resources knowledge and skills

Zambia has been providing ICT skills programmes in the ongoing training of health-care professionals since 2004. This is rated as very effective. Health sciences students will be offered ICT skills courses as a part of university curricula by 2008. Health sciences courses for health professionals through eLearning are also likely to be introduced in the next two years. The most effective action is described as the training of ICT instructors for health centres and health posts in the provinces (a train the trainers model).

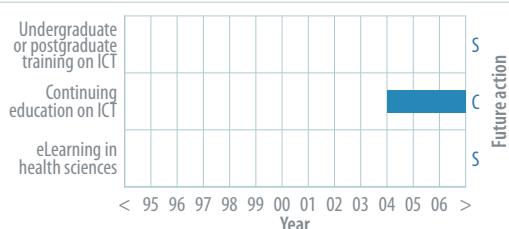


Figure 5. ICT capacity in the health sector: actions taken or planned within 2 years and their effectiveness rating

eHealth tools and eHealth services

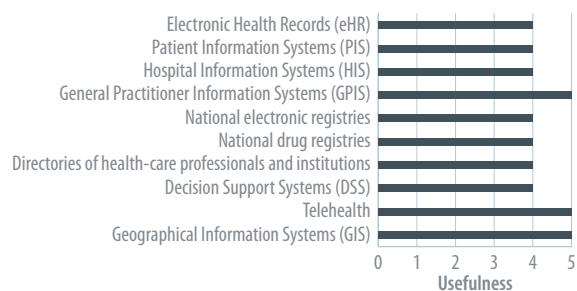


Figure 6. Preferred generic eHealth tools to be provided by WHO



Figure 7. Preferred eHealth services to be provided by WHO

Among eHealth tools, General Practitioner Information Systems (GPIS), telehealth and Geographical Information Systems (GIS) are considered extremely useful if the World Health Organization could offer these as generic prototypes for adaptation. The rest of the listed tools are rated as very useful. The specified eHealth services are considered very to extremely useful.

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