



# WORLD HEALTH ORGANIZATION

FIFTY-EIGHTH WORLD HEALTH ASSEMBLY  
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## eHealth

### Report by the Secretariat

#### BACKGROUND

1. The emergence and growth of information and communication technologies, touching many spheres of life, have in the past decade brought opportunity and challenge to all countries. This is reflected in the Millennium Development Goals, especially target 18: “In cooperation with the private sector, make available the benefits of new technologies, especially information and communications”.
2. WHO has for many years undertaken activities on the use of information technology for health care and medical purposes. For example, an international consultation convened by WHO (December 1997) prepared input on “telematics” for WHO’s health-for-all policy for the twenty-first century.<sup>1</sup> Resolution WHA51.9 (1998) sets out lines of action in relation to cross-border advertising, promotion and sale of medical products through the Internet.
3. Today, eHealth – understood in this context to mean use of information and communication technologies locally and at a distance – presents a unique opportunity for the development of public health. The strengthening of health systems through eHealth may contribute to the enjoyment of fundamental human rights by improving equity, solidarity, quality of life and quality of care.
4. Member States and groups of Member States are drafting their own strategies for eHealth, and other organizations of the United Nations system have drawn up strategies for information and communication technologies in their domains. eHealth was one of the topics discussed at the World Summit on the Information Society (Geneva, December 2003).
5. In view of the foregoing, WHO’s Secretariat has prepared a draft strategy for eHealth that would serve as the basis for coordinating both eHealth policies internationally and WHO’s activities on eHealth.<sup>2</sup> It sets the general direction for work in this area, together with specific lines of action based on WHO’s goals and objectives. It indicates ways of providing support to Member States in the use of eHealth for public-health purposes, health-care delivery, capacity building, and governance. It also includes eLearning for the public, meaning, in this context, the use of any electronic technology and media in the support of learning.

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<sup>1</sup> See document EB101/INF.DOC./9.

<sup>2</sup> See document EGB/eHealth No.1, available in the meeting room.

## **POTENTIAL IMPACT ON HEALTH**

6. Extremely rapid changes are occurring because of the advances in information and communication technologies. eHealth may be expressed in terms of digitalized products, systems, and services for health. These technologies hold great promise for both low- and high-income countries, and some are already realizing the benefits. These benefits apply not only to health-care delivery, but also to public health governance, finance, education, research, and health-related economic activities.

7. eHealth should have an impact on health systems by making health services more efficient and improving access to care, especially in remote areas, for people with disabilities and for the elderly. It should benefit health-care providers, professionals, and final users through higher quality of care and health promotion. It should also affect the cost of care by reducing redundancy and duplication of examinations and making possible economies of scale.

## **GLOBAL AND NATIONAL CHALLENGES**

8. There are many partners involved in health who are not only the beneficiaries of, but also a driving force for, use of information and communication technologies in Member States. Thus, they should participate actively in international forums for collaboration on information and communication technologies so that their viewpoints are represented. Flow of health data no longer has any barriers. Although this situation needs regulating, it is also an opportunity for faster and more comprehensive epidemiological surveillance. A global approach to handling data flows will help to promote standardization and low-cost services.

9. Technological excellence is growing in low-income countries, which are developing their own expertise. However, for many the benefits expected of eHealth have not yet materialized, and it is difficult to predict the rate and extent to which information and communication technologies will affect diverse health systems. It is essential to evaluate and share experience in order to develop individualized cost-effective models and, in particular, to understand the determinants involved in the adoption and sustainability of eHealth. Prerequisites for the successful integration of eHealth into health-care systems include long-term government commitment, based on a strategic plan, national awareness of the benefits of eHealth, and availability of skilled human resources.

## **eHEALTH, RIGHTS AND ETHICS**

10. Inequalities exist in access to, and use of, information and communication technologies, within and between countries. Human rights and ethical, and legal issues are also involved, in particular the right to the highest attainable standard of health.

11. Efforts are needed to tackle the undue burden of ill-health borne by vulnerable and marginalized groups. It is essential to invest in development of infrastructure for information and communication technologies for health, and to ensure equitable, affordable, and universal access to their benefits.

12. Ethical issues concern all countries in respect of confidentiality of information, dignity, and privacy. Respect for the principles of equity is vital, considering differences in culture, education, language, geographical location, physical and mental ability, age and sex. Information and communication technologies should maximize the use of scarce resources, rather than divert resources from meeting people's basic health needs.

13. eHealth issues pose new legal challenges. Many applications of eHealth are currently unregulated, unlike other aspects of the health systems. Legislation governing confidentiality, privacy, access, and liability is necessary with the transfer of information internally and externally. There is a growing interdependence and closer collaboration between the public sector and the private and non-profit sectors in information and communication technologies. Although public and private partnerships are welcome, the maintenance of minimum public services for health must be guaranteed.

## **OPPORTUNITY FOR WHO**

14. As the United Nations specialized agency for health, WHO has a constitutional role to act as the directing and coordinating authority on international health work. It can thus engage in, and serve as convenor for, any area or endeavour that can be of benefit to global health. As such, it can provide an interface between public and private bodies, draw up relevant standards and guidelines, and develop methods for assessment.

15. Advances in information and communication technologies have raised expectations of Member States, partners, and other international organizations, which provides an opportunity for WHO to respond to demands and to be a driving force for active collaboration.

## **COMPONENTS OF WHO'S DRAFT eHEALTH STRATEGY**

16. In response to the growing demand of Member States for advice and guidance on eHealth, WHO's Secretariat has drafted a strategy in the context of the Charter of the United Nations and the core functions of WHO as set out in Article 2 of its Constitution. The strategy will be finalized after further consultation with public and private stakeholders and Member States.

17. The main lines of the strategy are:

- to participate in the development and promoted the use of norms, standards, guidelines, information and training materials
- to strengthen the ability of Member States to address health problems by integrating eHealth applications into health systems in order to improve performance, care delivery, and information mechanisms
- to foster public-private partnerships in research and development for priority eHealth systems and applications for the benefit of Member States
- to support capacity building and to provide technical support and policy guidance on implementation of eHealth applications
- to investigate, analyse, and document the impact on the health of populations of policies and interventions, including social and economic, related to information and communication technologies.

## FRAMEWORK FOR ACTION

18. To put the foregoing into effect, Member States need to formulate cost-effective eHealth strategies reflecting principles of transparency, ethics, and equity. This implies collaboration with sectors other than health in order to develop infrastructure and to strengthen information and communication technologies for public health, health-care delivery, health education and training, within a multilingual and multicultural approach.

19. Transparent, equitable and ethical public-private partnerships may have to be created in order to gain access to resources for improving eHealth content, and to build capacity and infrastructure. Monitoring of achievements towards internationally agreed targets and goals related to eHealth could be achieved through collaboration with other organizations of the United Nations system and partners.

20. Member States will need to ensure that eHealth for citizens, patients and health professionals meets quality, safety and ethical standards. This may be supported by mobilizing multisectoral collaboration for determining evidence-based eHealth standards and norms. Further, best use should be made of eHealth for sharing health information between health-care professionals, for collecting data, including from sentinel systems, controlling quality and identifying best practices for prevention.

21. WHO's Secretariat intends to establish a networked global eHealth observatory to document and analyse development and trends, inform policy and practice in countries, and report regularly on the use of eHealth worldwide. Drawing on national centres and promoting networks of excellence in eHealth, the observatory will help to identify best practices and opportunities for policy coordination, and identify needs for the provision of technical support and capacity building.

22. Other actions include extension of such mechanisms as the Health Academy to and within Member States in order to promote awareness of health and healthy lifestyles through eLearning; analyse the evolution of eHealth and its impact on health; anticipate emerging challenges and opportunities; and provide evidence, information, and guidance in support of policy, best practice, and management of eHealth services.

23. At its 115th session the Executive Board discussed the subject of eHealth and reviewed a draft resolution which was adopted with amendments.<sup>1</sup>

## ACTION BY THE HEALTH ASSEMBLY

24. The Health Assembly is invited to consider the draft resolution contained in resolution EB115.R20.

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<sup>1</sup> See document EB115/2005/REC/2, summary records of the tenth meeting, section 2, and twelfth meeting, section 7.