

GLOBAL RESEARCH MAP OF DIGITAL HEALTH

Research and Development landscaping and National Strategies' benchmarking

2021



GLOBAL RESEARCH MAP OF DIGITAL HEALTH

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Archimedes is reported to have said "Give me a lever long enough and a fulcrum on which to place it, and I shall move the world." At the International Digital Health and Artificial Intelligence Research Collaborative (I-DAIR), we believe that inclusive R&D is that lever and transdisciplinary collaboration that fulcrum, which can move the world on digitally-enabled health.

Knowledge-making is not a solitary pursuit and builds incrementally on the efforts of many. It is essential to understand the existing knowledge landscape, who the knowledge makers are, and what the direction of investments and policy is. For emerging knowledge domains such as digital health and AI, it is also important to have a truly global picture. This helps to address emerging inequities and gaps, identify opportunities for collaboration and to link research to innovation for addressing urgent public health challenges.

It is for good reason that the Global Research Map (GRM) of digital health and artificial intelligence in health is I-DAIR's very first Pathfinder. Without situational awareness, we would be flying blind. It is also for good reason that of the nine regions that the GRM covers, three are in Africa. Existing digital divides would deepen further if researchers and innovators from the emerging geographies of innovation are left in the shadows. The GRM shines a light on incipient trends and policies, green shoots if you will, which global policy forums must take into account. It also underlines technology development trends that national regulators and international forums such as the World Health Organization (WHO) will find useful.

The I-DAIR team followed a twin track approach to developing the GRM. It used AI to survey publications and patents from 2011, when the term digital health began to trend, right up till 2020. However, we all know that data can

mislead and big data can mislead in big ways. In parallel, therefore, we did a qualitative survey of digital health trends across the globe with the help of partners from academia, private sector and digital health experts. A dashboard was developed to present the results and integrated into a microsite. A taxonomy emerged and is in the process of validation.

As the data analysis got underway, we decided to add a national digital health strategy component to the GRM with a first group of 23 countries. This would facilitate peer-to-peer learning and eventually benchmarking with the WHO's Digital Health Strategy. From the R&D perspective, it would permit a longitudinal assessment of how investments and policies are getting reflected in research and innovation. There are other potential applications that we have started to explore with our philanthropic, national and international organization partners.

I would like to felicitate the entire I-DAIR team for their hard work and creativity in producing the 2021 edition of the GRM in twelve months. I would also like to thank our partners from industry, academia and civil society. Last but not least, I would like to acknowledge the generous support of Fondation Botnar that made this work possible.

Amandeep S Gill, PhD Project Director/CEO, I-DAIR







In data science, and particularly in DataViz, besides explorative and communicative dimensions, we have a complementary rhetorical objective: the persuasion. A consensual and persuasive visualization essentially depends on the quality of the data, their contexts, the bias that is induced and finally, the cultural convention of the chosen visual models.

While developing the current version of the GRM, our main focus was onthe intensification of this persuasion dimension: maximising range of data sources, consolidation of the quality of data assets, reduction of the complexity of representations, fluid navigation and finally, increasing exploitation and the utility of the output.

To achieve our goals, we have built our methodology with a final goal in mind: Knowing that there is a growing number of existing mature indexes in the space of Digital Health and AI, we need to move away from the production of a YANDEX (Yet Another Index). Naturally we agreed to reconstruct the geography of the world through a representation of the maturity level of digitalization (present and future) of health services in the selected countries to be included. In fact, maps are a form of rhetoric that uses conventions to guide readers to conclusions based on cultural, political, and religious viewpoints. They are not the actual land structures, but rather illustrations of them. Maps are a sort of visualisation that are naturally used either to discover and comprehend our data, or to communicate the sense of the data.

Once we have got the final visual in our mind, the different steps of the methodology were clear enough, building the taxonomies of Research and Development and the National Digital Health Strategy is essential for our understanding and for covering the domain. The taxonomy serves as the basis of

our Natural Languages Processing scripts (NLP) that will search, collect and validate required data and populate the landscape. Finally, the visual should bring this clarity of representation.

I am proud and happy to present to you the GRM, this is the result of team effort, and I hope that you will enjoy reading and using it as much as we have enjoyed working on it.

Dr. Mehdi Snène Research Director **Mehdi Snene**





METHODOLOGY & OBJECTIVES

The Global Research Map (GRM) is a comprehensive and multi-faceted map that provides a clear landscape of Research and Development (R&D) activities across different world regions and the state of maturity of various National Digital Health Strategies (NDHS). The GRM is a powerful tool capable of providing a clear situational awareness to countries, regions, funders and multilateral organisations to visualise, analyse and act according to identified gaps and needs in different settings. It will provide an inclusive vision that explicitly underlines the dual link between the integration of the Research and Development landscape in the national digital health strategy and the impact of national digital health strategy on the evolution of the national research and development outputs.

The overall vision of the GRM is to provide a global landscape that can serve for the identification of existing international research and development networks, reinforcement of cooperation and collaboration and the nature and scope of exchanges between developed countries and the LMICs. This will underline the potential of different countries in producing their own research and development and the roadmap to achieve their national vision. It will also help in the establishment of regional joint research capacity and to quickly identify major actors, trends and important investigational subjects at the regional and national level. The GRM will also help in the identification of best practices for the shaping of National Digital Health strategy that can match better with the regional or the country profile. These best practices will constitute a practical and living guide for the development of efficient and up to date national strategies.

This dual benchmarking provides a comprehensive vision that addresses both the strategic and the executive levels. The developed GRM brings a better clarity to address, in a holistic approach, the full spectrum of digital health and AI development from the ground to the policy makers. The GRM could provide a floor to discussions in global policy bodies. Relevant stakeholders can use it in conjunction with the detailed customised report to identify policy and governance gaps in AI and digital health for the achievement of universal health care and the sustainable development goal (SDG.3). It also helps donors, development agencies and other digital health actors to quickly identify areas of interest for investment and development.



- Based on existing and publicly available data, reports and documents.
- Classified into axes: the present (readiness, availability) and the future (Development strategy and Capacity building roadmap).
- Composed from 13 indexes (Digital Strategy, Health Strategy and Digital Health strategy).
- Development of a neutral evaluation methodology based on NLP and similarity clustering approach.
 - Detection of best practices and patterns of strategies development.
 - Annual analytics report and digital map releases.

IMPACT OF
NATIONAL STRATEGY
ON RESEARCH AND
DEVELOPMENT

- Based on published research, scientific funding, Meta data of clinical trials, Patents and Grey Literature.
- Classified by origin and domain.
- Based on developed DH corpus and classification.
- Development of analytics service for trend detection, research funding allocation and prioritised areas.

 Collaborative index space for international research and development networking and development of a network of cooperation based on predefined values of exchange (data, knowledge, services, tools, funds, etc.).

INTEGRATION OF RESEARCH IN NATIONAL DH STRATEGY

 Annual intelligence report and monthly updated digital Dashboard releases.

R&D in Digital Health Methodology

I-DAIR has developed a taxonomy that is applicable for both publications and patents in the Digital Health field. All attributes and classes of interest are grouped in 5 top level categories - type of medical device/software, purpose of medical device/software, healthcare information technology, healthcare analytics and enabling technologies. Each category has at least 5 sub-categories with several of them branching into smaller individual classes - for example, there are 16 classes in the disease/disorder targeted category within the purpose of medical device/software category. The taxonomy currently has a total of three tiers. Papers and patents both can belong to multiple categories in each tier, making this taxonomy overlapping in nature.

In order to connect the data points to the geographical (9 regions with individual countries), socioeconomic (LMIC or not) and taxonomic categories, I-DAIR has partnered with PatSnap. This company takes the data from the free available databases of patents and publications, structures and cleans it using manual curation and proprietary AI. The added semantic layer is added to select a subset of 142 million data points and connect them to I-DAIR's taxonomy and dashboards.

NDHS maturity benchmarking

I-DAIR structured the digital health strategy as a dual problem - on one side, it is affected by the individual state of IT and Healthcare, and the joint digital health on the other. Further on, by recognizing that the present state should be considered separately from the prospective development, I-DAIR defined a number of indicators in both the present and the future states. Present indicators are evaluated according to availability and readiness, while the future ones are evaluated for development strategy and capacity building. Each of these individual evaluations are performed through a number of yes/no questions translating to different scores and yielding a total score from 0-100 for each indicator aspect. The questions belonging to an indicator aspect are frequently scored with groups of chained value logic - if the first (main) question in a group is negative, no others can be answered. For example, in the Healthcare Governance Availability indicator there is a group of 4 questions concerning Health Insurance for Citizens and offering a maximum of 25 points. Answering "no" to the question "Is there a Federal Health Insurance Fund Available?" gives 0 score for the group, while answering "yes" contributes 6 points and unlocks additional questions like "Is the Health Insurance Available only to low income group/elderly people?" and others.

The taxonomy classes for each country were populated in a collaboration between I-DAIR and Xlpat. Online sources of information were researched and all the questions were answered with "yes", "no" or "no data available" if the online search didn't provide results. At this point the latter category is treated as a negative answer regarding the score, but is open to additional research.

All the results are grouped per country into two groups taken as axes for the new digital strategy world map - present and future development, each with its own indicators. An appropriate simple similarity measure is used to quantify the level of agreement between individual countries, and are then clustered according to it into 6 groups ("continents") which represent countries with similar level of present and future development, thus enabling comparison and systematic review of healthcare systems and possible improvements. Within this perspective, the GRM developed within I-DAIR essentially provides the following features:

National Digital Health Strategy benchmarking

- + Based on existing and publicly available data, reports and documents.
- + Classified into two axes: the present (readiness, availability) and the future (Development strategy, Capacity building roadmap)
- + Composed from 13 indexes (Digital Strategy, Health Strategy and Digital Health strategy).
- + Development of DH development strategies Taxonomy and classification.
- + Detection of best practices and patterns of strategies development.
- + Annual analytics report and digital map releases.

Research and development landscape

- +Based on published research, scientific funding, Meta data of clinical trials, Patents and Grey Literature.
- +Classified by origin and domain
- +Based on developed DH corpus and classification.
- +Development of analytics service for trends detection, research funding allocation and privileged areas for investment.
- +Collaborative index space for international research and development networking and





development of a network of cooperation based on predefined values of exchange (data, knowledge, services, tools, funds, etc.).

+ Annual Intelligence report and monthly updated digital Dashboard releases.

Given the actual disparities in investment, capacity and resources, the GRM has been thought, designed and developed with a similarity clustering approach rather than the classical ranking approaches and methodologies. To achieve our goals, our development of the national strategy map is based on a neutral and automatized approach that makes use of advanced Natural Language Processing techniques for the evaluation and the clustering of different national strategies by making use of a national strategy taxonomy and corpus (See Fig.2). Concretely, we have created a dictionary of keywords and concepts relative to a National Digital Health Strategy. The available national strategies are then compared to the defined dictionary to estimate the level of readiness of a country (present) and the adequacy of its future development (Future).

For the R&D landscape analysis a similar work has been conducted. Firstly, a global Taxonomy and corpus of the Digital Health and AI space was defined. The taxonomy supplemented corpus was then used to search, collate and display via a web based platform (Fig.1), the findings relevant to Digital Health and AI in Health research, funding and development. Finally, the results and reports generated by the GRM were tested and verified by end users and relevant stakeholders.

At the current state of development, we have a Beta release of the R&D landscape and we have included a first batch of 23 countries in the NHDS database. The validation is a flexible process from which we would like to know more about our potential end users expectations and needs from such tools, specific data and details for the specific regional customisation if any, and their feedback on the actual status of development. We are also in the continuous process of data sources collection and curation and our end users are often our first identifiers of local sources given their knowledge of the regional ecosystem.



Fig.1: The R&D landscape Web tool



Fig. 2: The National digital health Map





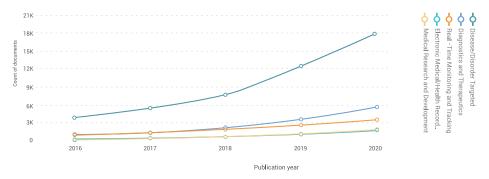
Major Findings

1.Research and Development Findings 2.National Digital Health Strategies

3.1. Research & Development Findings

3.1.1 - Overview

Publications across the world have seen an exponential growth with the predominance of disorder/disease subject. Still, it is interesting to see that the number of patents in this group is a bit smaller than the number of patents in the therapy/diagnostics group which is the second group according to the number of publications. In numbers, diagnostics/therapy has approximately two papers per patent, while the disorder disease has eight papers per patent when summing across all the years. On average, one patent follows every four publications overall. Interestingly enough, LMICs constitute less than one third of research publications but over one half of patents. Both categories are mostly in the EMR/EHR and diagnostics/therapeutics areas. USA and Chinese universities dominate the publication world.



SADC-EA Publications Subject Trends

Region	Top Country	Region(Global(Region	Top Country	Region(Global(
Africa SADC and East Africa	South Africa	75%	0.02%	Africa SADC and East Africa	South Africa	60.49%	0.21%
Africa Central and West Africa	Sudan	100%	0.01%	Africa Central and West Africa	Nigeria	70.3%	0.12%
MENA	Israel	89.07%	0.98%	MENA	Iran	38.23%	1.87%
Asia Central and East Asia	China	80.03%	47.32%	Asia Central and East Asia	China	66.79%	14.82%
Asia South East, South, Western	India	67.31%	2.93%	Asia South East, South, Western	India	48.68%	8.45%
Americas North America	United Stat	95.41%	23.48%	Americas North America	United Stat	87.73%	24.74%
Americas Latin America and Car	Colombia	39%	0.28%	Americas Latin America and Car	Brazil	61.93%	1.19%
Europe Northern, South and We	Germany	28.14%	2.46%	Europe Northern, South and We	United Kin	24.28%	5.42%
Eastern Europe and Russia	Russian Fe	69.34%	0.54%	Eastern Europe and Russia	Russian Fe	28.14%	0.72%

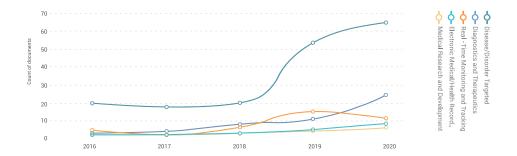
Distribution of Patent by Country and by Region

Distribution of Patent by Country and by Region



3.1.2 - SADC and East Africa (SADC-EA)

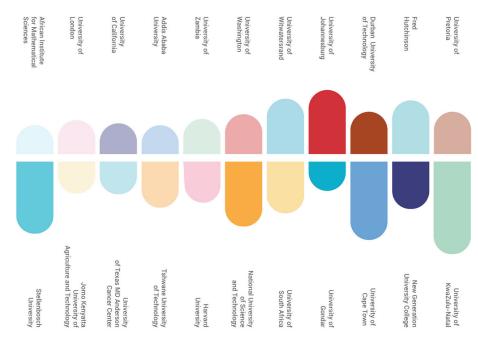
Compared to the global trends, SADC-EA does not have the gradually exponential growth of publications. After a period of stagnation from the beginning of the collection period (2011) until 2018 there is a constant number of publications, and then there is a marked jump consisting mostly of disease/disorder targeted publications.



Disease/Disorder Targeted	6	10	10	5	10	19	17	21	54	65
Diagnostics and Therapeutics	1	4	3		2	2	3	8	10	24
Real -Time Monitoring and T.	3	1	1	2	2	3	1	5	14	10
Medical Research and Dev	1	1				1	1	2	4	7
Electronic Medical/Health R		1		1		1	1	2	3	5
On-Body Medical Devices	3	1				1	3		1	2
Data Governance				1			3		5	4
Healthcare Facility (hospit			2			1		2	6	2
Big Data Analytics						1		1	2	6
Robotics						1	1	2	2	3
	2011	2012	2013	2014	2015	2016	2017	2018	2019	20202

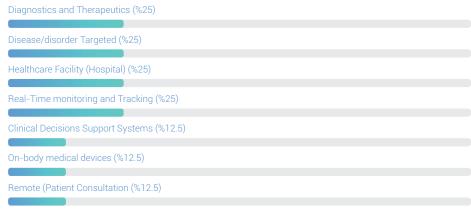
SADC-EA R&D Domain Evolution

South Africa is by far the biggest local contributor to the research and development landscape. Out of 12 largest university contributors, 10 are located in South Africa (the remaining two being in Ethiopia and Zimbabwe) - note that some multi-national organizations have their branches in South Africa.



SADC-EA Major Actors

3 out of 4 approved patents are from there, in the areas of disease/disorder and diagnostics/therapeutics. Note that there aren't any patents in EHR and information, contrary to the world trend, but this is likely due to the small number of overall patents.



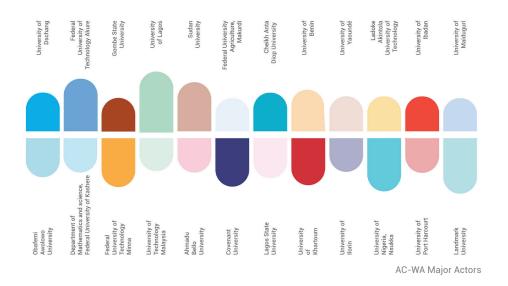
SADC-EA Trends in Patents



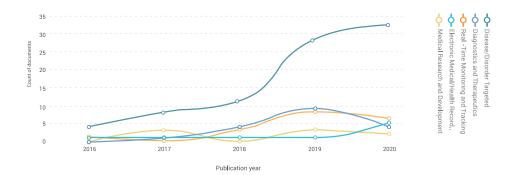


3.1.3 - Central Africa and West Africa

This region has a relatively small number of publications (0.17% of Global) and only 2 patents, both in Sudan. Interestingly enough, the country with over 70% of publications is a different one - Nigeria, originating from many of the country's universities. Top publishing universities in Sudan are Khartoum and Sudan universities.

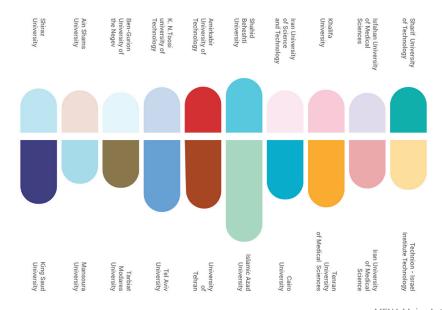


Recent increase in the number in the disease/disorder targeted papers started in 2018.



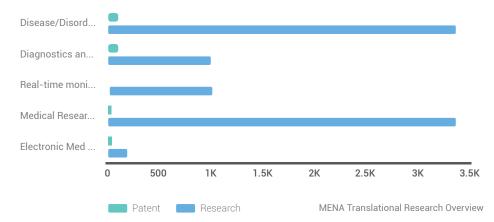
3.1.4 - Middle East and North Africa (MENA)

Looking at publications, the exponential growth seems to mimic the global one. Still, the patents are not following the publications like on a global scale - patent/publication ratio is around 4 times smaller. This is even more prominent for the LMICs, which hold a total of 6 patents and 1304 publications.



MENA Major Actors

General sparsity of patents across the region leads to a notable majority (89.07%) being held by Israel. A third of all publications come from Iran, with the Islamic Azad University being the most fruitful in the region.

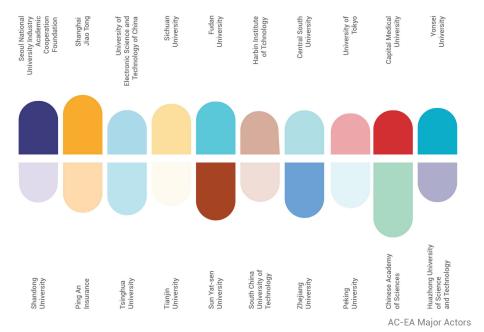




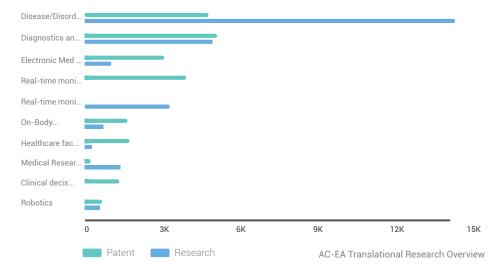


3.1.5 - Central Asia and East Asia

This region excels in translational research, as the number of patents (16,220) nearly reaches the number of publications (20824).

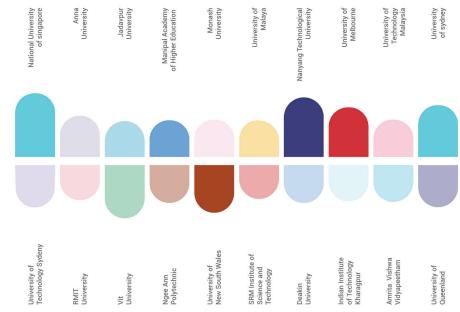


Apart from disease/disorder group, the number of patents in individual groups even exceeds the number of papers. It is of note that in the Electronic Medical/Health Records group there are three times more patents than publications.



China is the regional leader in both types of research, the largest source of patents globally (47.32%) and the second largest source of publications (14.82%). Outside of China, one should mention the universities in Tokyo and Seoul.

3.1.6 - Asia Southeast, South, West and Australasia



ASE-SWA Asia Translational Research Overview

In this region the leader of both patents and publications is India, but the translation of research is under the global average - one patent comes for every 14 publications, with no difference in ratio between LMICs and others.

Interestingly, top universities from this region according to the amount of research come from Australia and Singapore, showing that India contributes a large amount with smaller universities.

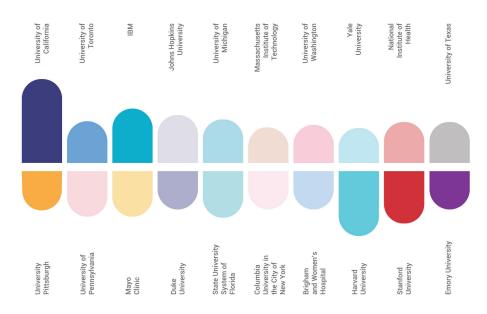
Disease/Disorder Targeted	102	123	166	171	211	219	283	393	596	880
Diagnostics and Therapeutics	25	40	27	37	57	71	85	125	221	311
Real-Time Monitoring and Tr	31	34	41	51	51	71	76	108	152	198
Medical Research and Dev	6	5	8	10	20	16	15	32	52	62
Electronic Medical/Health R	6	4	19	10	10	9	19	36	56	63
On-Body Medical Devices	2	3	10	8	14	22	19	24	34	36
Internet of Things (IoT)				2			2	21	33	57
Clinical Decisions Support	3	5	10	15	6	7	16	11	28	25
Real -Time Monitoring and T	5	4	6	11	12	17	11	25	16	3
Big Data Analytics				1	2	5	2	12	30	40
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020

MENA Translational Research Overview



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3.1.7 -North America



North America Major Actors

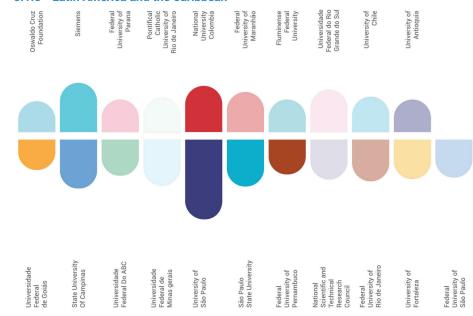
This region is dominated by the USA in both types of research - globally, it has the highest number of publications (24.74%) and the second highest number of patents (23.48%). Translational trends follow the global ones.

There is very little contribution from the LMICs, that too solely in publications. Largest amount of research comes from the University of California, followed by some Ivy League schools.

Disease/Disorder Targeted	632	699	767	955	1.2K	1.4K	2K	2.7K	3.9K	4.9K
Diagnostics and Therapeutics	202	234	271	304	373	545	704	1K	1.2K	1.3K
Electronic Medical/Health R	142	156	216	227	292	398	574	797	972	801
Real-Time Monitoring and Tr	145	140	140	193	207	242	320	496	625	822
Medical Research and Dev	72	64	74	98	123	151	235	375	469	562
On-Body Medical Devices	75	81	106	110	149	199	231	328	368	216
Healthcare Facility (hospit	53	69	77	96	157	165	225	297	367	216
Real -Time Monitoring and T	54	75	111	118	133	181	252	296	208	14
Clinical Decisions Support	20	36	31	45	55	56	70	102	195	245
Data Governance	21	23	32	42	46	57	73	164	198	231

North America R&D Domain Evolution

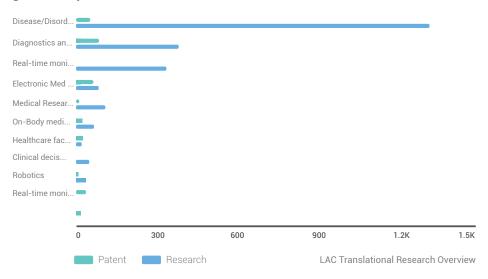
3.1.8 - Latin America and the Caribbean



LAC Major Actors

This region is dominated by the patents from Colombia (39%) and publications from Brazil (61.93%), but both have relatively small global contributions.

Translation of research is on the low side, one patent for every 9 publications. Proportion of LMICs contributions is very small in both areas of research. Research is mostly generated by the universities in São Paulo.

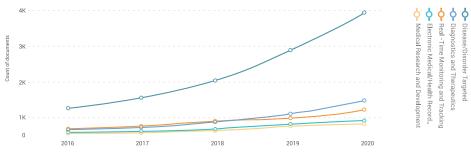






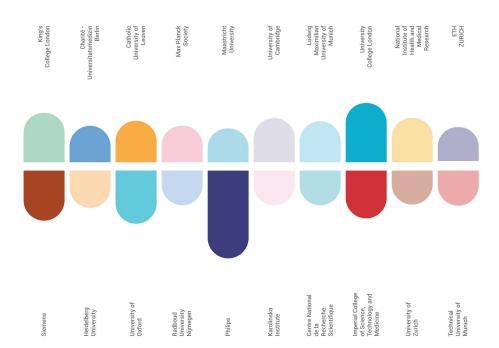
3.1.9 - South, North and West Europe

Publications per year follow the global trend, but translation of research is lower, one patent for every 9 publications.



SNW Europe Publications Trends

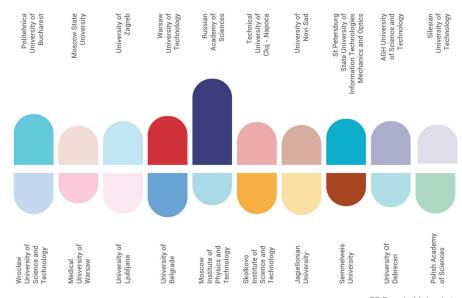
Most publications come from the UK and its leading universities, while most patents come from Germany. There are important contributions from Swiss universities as well. Interestingly enough, the most research from an individual university comes from the Philips university in Cyprus.



3.1.10 - Eastern Europe and Russia

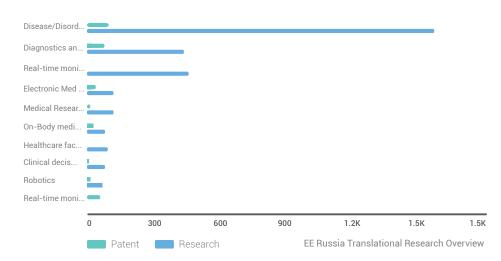
Russian Federation is the clear leader in providing research in both patent (69.34%) and publication (28.14%) areas.

In addition to Russian universities, one can notice Polish and universities from ex-Yugoslav Republics. Still, the global contribution is very small.



EE Russia Major Actors

Translation is on the low side (a patent for 11 publications). LMICs contribution is moderate.







3.2 National Digital Health Strategies

GRM uses the original methodology to map the individual country to a 2D-model showing the present and future development. The new national digital health strategy (NDHS) map groups the countries into 6 new continents according to the development distance, and facilitates comparison of policies, metrics and solutions. There is generally a strong positive correlation between current and future development. Four continents essentially lie on the line connecting the same values on both axes, showing an incremental growth of development for both the present and the future. One continent has a higher future readiness compared to their current situation, while another continent has invested more into the current readiness then the future one.

3.2.1 - Low balanced continent

The low balanced continent encompasses two countries which are below 50 percent on both accounts - Bangladesh and Colombia. The present values for these two countries are marked by a very low availability in several categories of digital health (DH) - workforce, Funding & Research and literacy. These values are followed by medium or even high readiness levels, providing a clear action point. In general, other categories in DH and Health & IT present overview are mediocre.

The prospective development values for Bangladesh and Colombia diverge, and Bangladesh has around 20 points more on the scale. The biggest difference is in the DH prospective development where Colombia has very low values in almost all categories, primarily due to the values not being available. Regardless of these internal differences, this example continent faces overall the problem of low data availability for prospective development.

3.2.2 - Medium balanced continent

Both present and future development are marked by overall medium values. Brazil and Saudi Arabia have a very low funding & research availability at present, while Israel is very good in that aspect. Saudi Arabia and Israel the prospective development of rank low on prospective development of digital health literacy. That being said, capacity building seems to lag behind the development strategy for multiple future development categories and for all the countries.

3.2.3 - Medium high balanced continent

The countries in this group have both their present and future development scores close to 70, thus having a balanced present and future development.

The present development is medium or better in all the Health & IT categories. DH is solid but seems to be problematic for all three countries in the Workforce and Literacy categories, with the availability being worse than readiness.

Future development for Health & IT in all three countries is medium or better in all categories. For DH, all three countries lack the capacity for literacy. New Zealand lacks the capacity building for legal rules as well. UAE and New Zealand have exceptionally good IT governance and Funding & Research.

3.2.4 - High balanced continent

5 countries in this group (India, Australia, Australia, UK, USA) score very well in all the Health & IT categories, and mostly well in all the DH categories in both the present and the future. Most of them have missing data in literacy causing occasional bad scores.

3.2.5 - Present high balanced continent

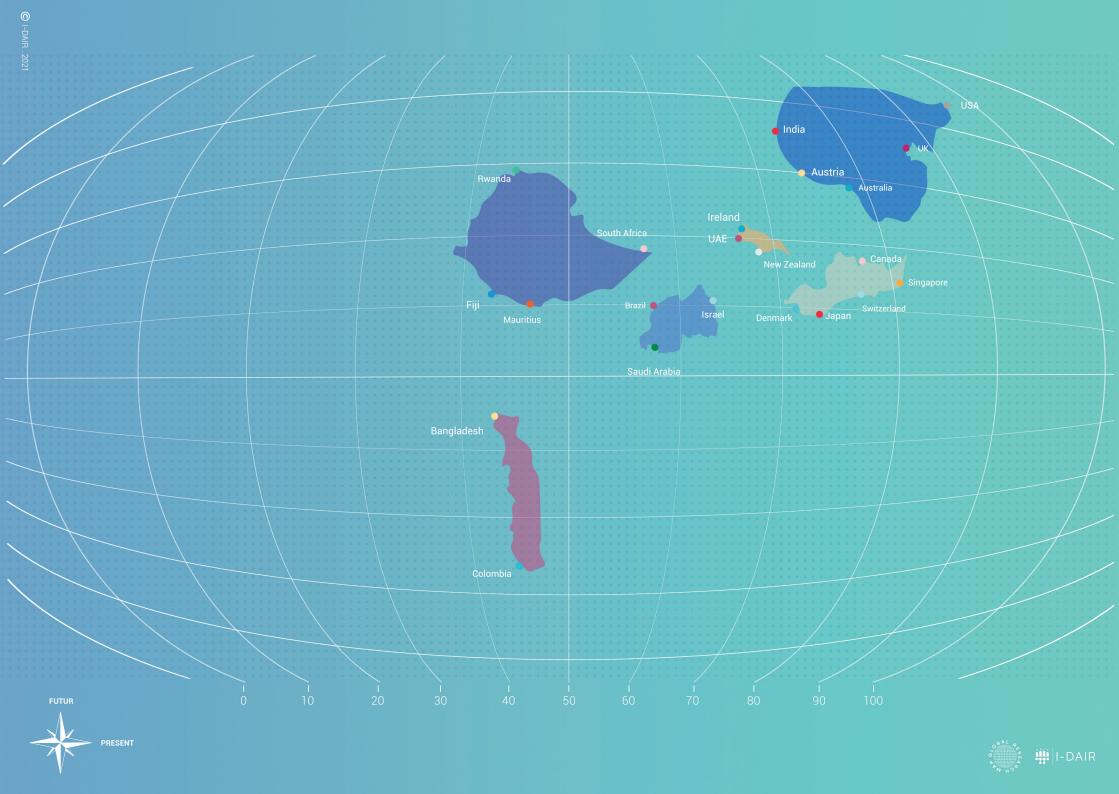
Diverging from the line of balanced present and future development scores, these 5 countries (Denmark, Canada, Singapore, Japan, Switzerland) showcase a present development score better than the future one. Most present categories are exceptionally good, apart from the workforce which is ranging from poor to moderate. Conversely, future development scores range from medium to good, with some cases of bad scores e.g. literacy for all, workforce for Japan and Denmark etc.

3.2.6 - Future high balanced continent

Rwanda, Fiji, Mauritius and South Africa have a prospective development above the current development level. Most indicators for the present development are medium or better, with the workforce in DH being below average and problematic literacy. On the other hand, the future development looks bright - medium to good scores in most categories, and an overall tendency of improvement from the current scores.







Analysis

1. Data sources

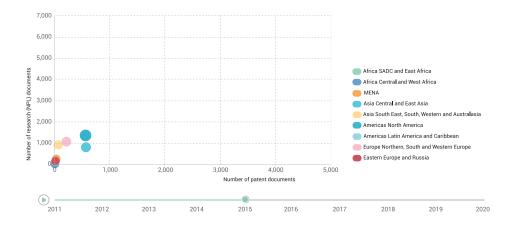
For this first study, we decided to limit our ontological field of research and development of digital health. Based on existing definitions of Digital health, we have carefully chosen subdomains strongly associated with these definitions, namely: Health Informatics, Health Information Management, AI in health, medical devices, Electronic Health Records, Big data in health and Bioengineering for a total of approximately 1,480,000 publications and 180,000 patents. the second set of subdomains included is essentially composed of: General medicine, Public Health, Environmental and Occupational Health, Communicable disease, Radiology, Nuclear Medicine and imaging, Pulmonary and Respiratory Medicine and Oncology for a total of 22,000,000 scientific publications and 640,000 patents. The goal of this selection was to produce a draft version of our taxonomy which will serve as a basis for the future development of the ontological foundation of digital health as well as for the construction of a classifier. A total of 93,000 publications and 27,000 patents corresponded to our research and were included in this landscaping.

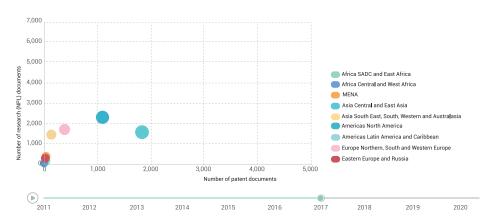
1.1 Translational Research

At first glance, the distribution of patents between LMIC countries and HIC countries seems to be a fair distribution with respectively 13,843 patents and 13,591 patents. However, almost all of the LMIC countries' patents are filed by Central and East Asian countries: 12,984, and mainly filed by China: 10,387. In comparison, the total number of patents filled in Africa and MENA region is 14 which represent 0.21 patent/country while the total number of patents in Europe (North, South Western and Eastern) and Russia is 2607.

Moreover, translational research and the number of patents filed by China over the past 5 years has experienced a record development, exceeding in 2020 the total of all patents filed by the rest of the HIC and LMIC countries combined. This development was also distinguished by an acceleration in the number of scientific publications reaching 14% of the total world publications, whereas it represented less than 4% of total of publications 10 years earlier (Fig.1).







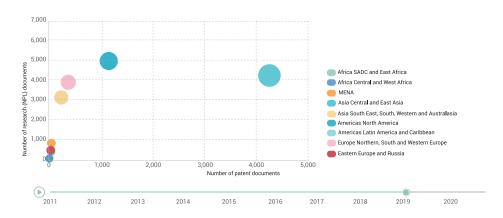


Fig.1. The evolution of number of patents/number of published research from 2015 to 2019.

This development shows a recent desire for the transformation of the production sector of medical devices, biotechnology and medical AI, from a manufacturing sector to an innovation sector. An examination of trends in this region confirms this finding. In fact, since 2015, there is an almost annual doubling of scientific production and patents in the previous fields, namely disease / Disorder targeted and Diagnostics and Therapeutics (Fig.2). Despite of a growth of interest in scientific production in these sub-fields in other sub-regions, this exponential growth is only visible in Central and East Asia.

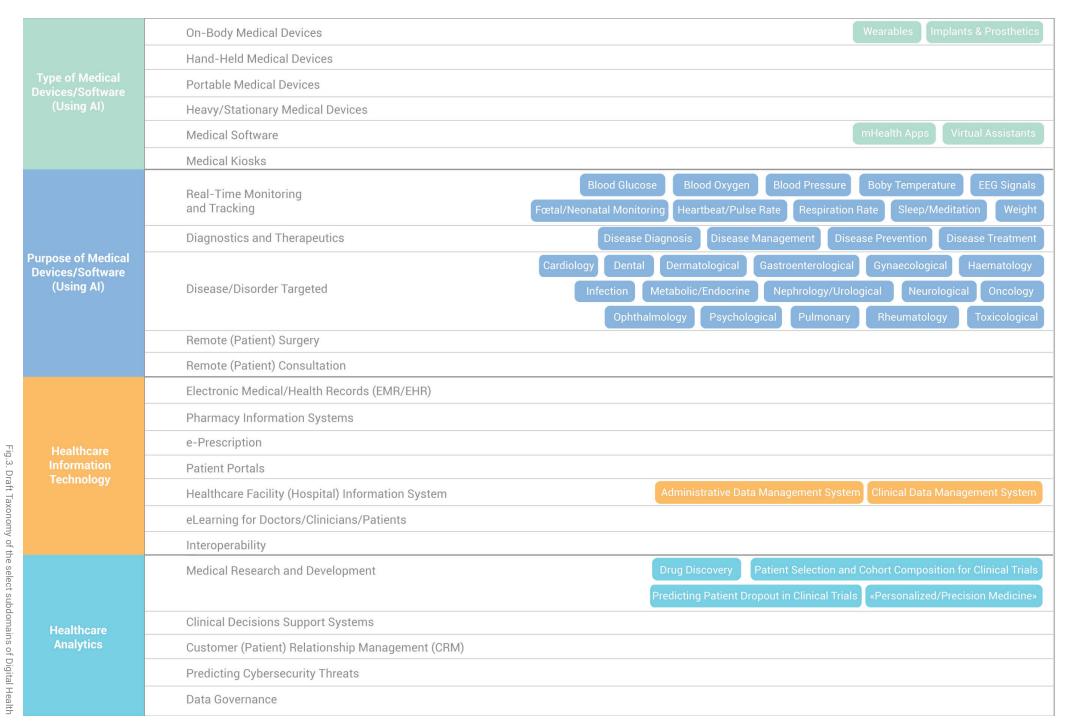
										_
Disease/disorder			523	538	654	850	1.5	2.7K	4.2K	5.7K
Diagnostics and Therapeutics	126	142	180	206	277	421	837	1.8K	2.5K	3.1K
Electronic Medical/Health R	25	41	53	56	91	178	400	799	1.1K	1.3K
Real-Time Monitoring and Tracking	54	56	61	105	201	332	496	820	975	811
Real-Time Monitoring and Tr	109	102	130	148	200	189	290	426	630	795
On-Body Medical Devices	42	55	61	79	129	153	247	419	582	551
Healthcare Facility (Hospit	24	33	39	25	66	101	207	457	505	574
Medical Research and develo	46	29	48	48	59	81	130	238	354	491
Clinical Decisions Support Systems	5	9	8	13	23	50	133	313	405	386
Robotics	19	32	43	29	50	64	130	209	273	331
	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020

Fig. 2. Concentration of patent and publications in Central and Est Asia

1.2 Preliminary Taxonomy

As explained above, the resulting taxonomy is a draft taxonomy which was used for a quick investigation of the definition of the domain on the basis of a reduced scope. This Taxonomy follows our discovery spaces and our landscaping environment (Fig.3). It is essentially made up of a vision of the use of digital in health rather than a cross-disciplinary vision where digital and health merge. Through this taxonomic draft, we hope to be able to lay the foundations for the future development of an ontological and dynamic definition of the field of Digital health. This clarity is from our point of view an urgent need in order to be able to better structure this space, to define a multi-user vision and above all to avoid redundancies and duplication of efforts.

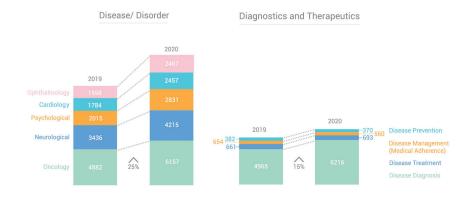




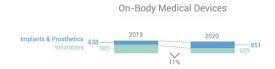




With this result in mind, we have developed a more detailed evolutionary vision of the subdomains that appear to be the most important. This approach aims to more precisely determine current trends and to allow us to better understand the evolution of digital health in the years to come. For example, we can clearly see that oncology as a field of application and digital study has grown by more than 25% in one year (Fig.4). At the same time, we can see an equivalent growth in the medical diagnosis. This can be attributed to the increased research and development of diagnostic tools and expert systems in oncology or diagnostic radiology.







2. Future Trends

Overall, there is a common trend in terms of development and research across the different regions. In translational research it is generally Diagnostics and Therapeutics and in basic research it is Disease/ Disorder Targeted. This trend should continue over the next few years, driven by a need for reliable and rapid diagnostics while having fewer human resources. However, there is a growing interest in analytical tools and clinical decision support systems. In fact, with the increasing number of deployed EHR through healthcare institutions, the interest in decision support systems coupled with predictive systems could significantly increase the proportion of research and development in these fields. If their growth continues at this rate, we could see them in the next 5 years among the top three areas.

Finally, and despite the important role played by non-clinical monitoring tools and devices for the popularization of real time monitoring, it is clear that we are moving quickly towards the use of «medical grade» type devices rather than the existing ones. in order to be able to use the data at the clinical level(Fig.5.). This trend should be seen in conjunction with the growing interest in Digital biomarkers as well as distributed clinical trials. We can therefore clearly distinguish two major trends for the next few years: the use of medical data by predictive systems within health institutions and the transformation of the passive patient into a point of care.

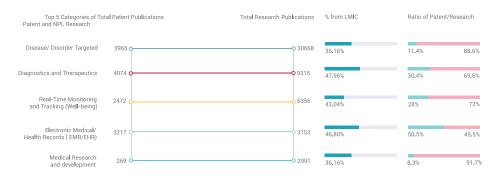


Fig.5. General trends in research and development





Country landscape

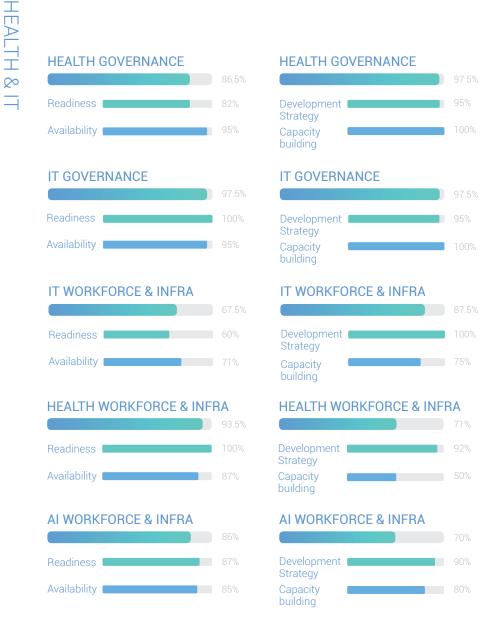
(By Alphabetic order)

AUSTRALIA AUSTRIA BANGLADESH BRAZIL CANADA COLOMBIA DENMARK FIJI **INDIA IRELAND ISRAEL JAPAN MAURITIUS NEW ZEALAND RWANDA SAUDI ARABIA SINGAPORE SOUTH AFRICA SWITZERLAND** UAE UK **USA**



Australia



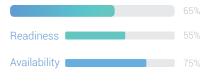




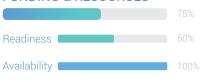
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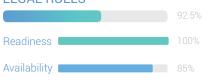
WORKFORCE (TECH & HEALTH)



FUNDING & RESOURCES



LEGAL RULES



DH GOVERNANCE



DH INFRA.



WORKFORCE (TECH & HEALTH)



FUNDING & RESOURCES



LEGAL RULES

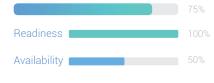




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IEALTH (DH

☐ ☐ FUNDING & RESEARCH



LITERACY (PATIENT & WORKFORCE)



FUNDING & RESEARCH



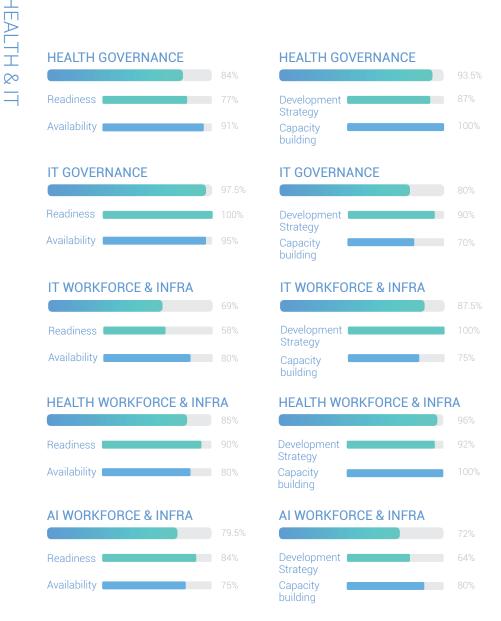
) NO date
Development	No data
Strategy	
Capacity	No data
building	





Austria







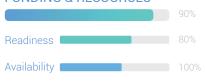
Availability |

70%

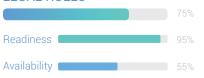
Readiness 55%

Availability 10%

FUNDING & RESOURCES



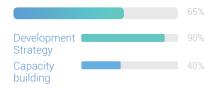
LEGAL RULES



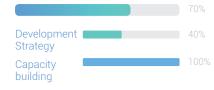
DH GOVERNANCE



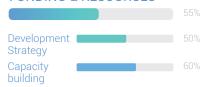
DH INFRA.



WORKFORCE (TECH & HEALTH)



FUNDING & RESOURCES

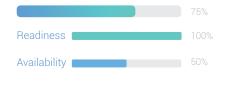


LEGAL RULES

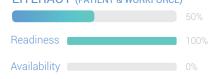


DIGITAL HEALTH (DH

FUNDING & RESEARCH



LITERACY (PATIENT & WORKFORCE)



FUNDING & RESEARCH









PRESENT DEVELOPMENT

Bangladesh

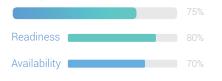




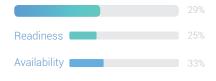








IT WORKFORCE & INFRA



HEALTH WORKFORCE & INFRA



AI WORKFORCE & INFRA



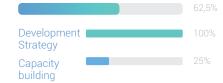
HEALTH GOVERNANCE

Development Development	95%
Strategy	
Capacity	75%
building	

IT GOVERNANCE



IT WORKFORCE & INFRA



HEALTH WORKFORCE & INFRA

	72,5%
Development Strategy	95%
Capacity building	50%

AI WORKFORCE & INFRA

Development	
Strategy	
Capacity	40
building	

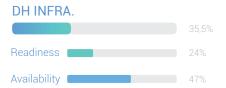






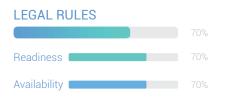
PRESENT DEVELOPMENT















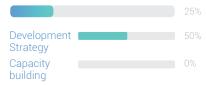




WORKFORCE (TECH & HEALTH)



FUNDING & RESOURCES



LEGAL RULES



DIGITAL HEALTH (DH)

FUNDING & RESEARCH







FUNDING & RESEARCH









Brazil















HEALTH GOVERNANCE



IT GOVERNANCE



IT WORKFORCE & INFRA



HEALTH WORKFORCE & INFRA





		40%
Development Strategy		20%
Capacity building		60%





DH GOVERNANCE

PRESENT DEVELOPMENT



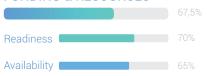




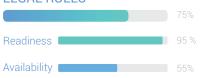
WORKFORCE (TECH & HEALTH)



FUNDING & RESOURCES



LEGAL RULES



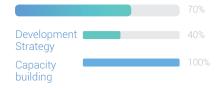
DH GOVERNANCE



DH INFRA.



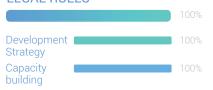
WORKFORCE (TECH & HEALTH)



FUNDING & RESOURCES

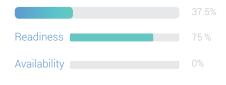


LEGAL RULES



HEALTH (DH)





LITERACY (PATIENT & WORKFORCE)



FUNDING & RESEARCH







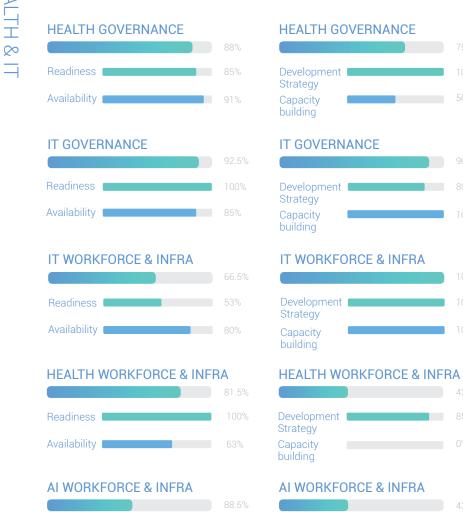


Development 24%

Readiness

Availability





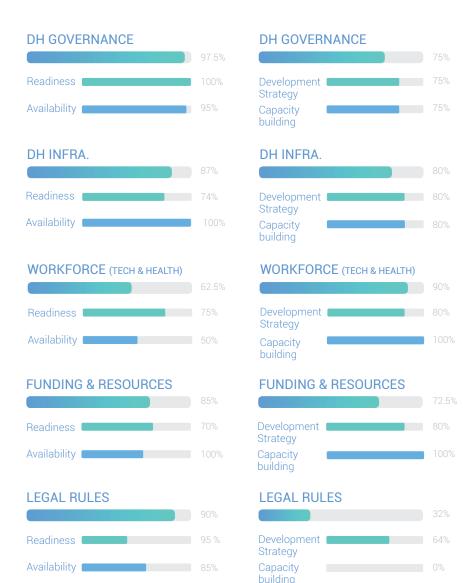






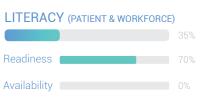
Strategy

Capacity building











	65%
Development	50%
Strategy	
Capacity	
building	

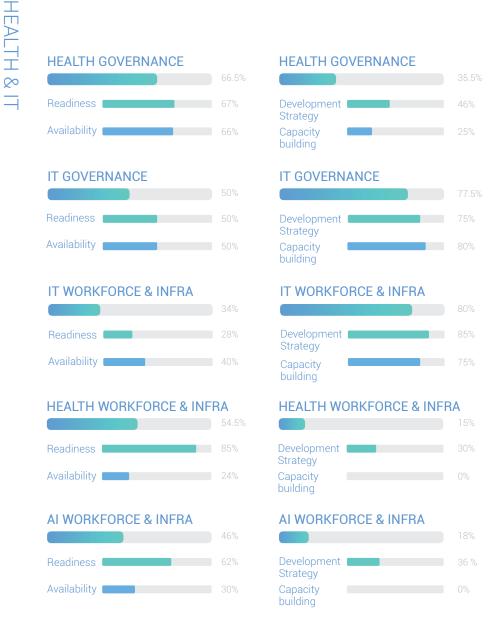
	No data
Development	No data
Strategy	
Capacity building	No data





Colombia





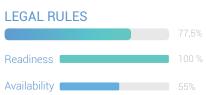


PRESENT DEVELOPMENT

DH INFRA. Readiness 39% Availability 70%











DH INFRA.



WORKFORCE (TECH & HEALTH)



FUNDING & RESOURCES

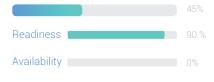
	No dat	a
Development Strategy	No dat	a
Capacity building	No dat	a

LEGAL BULES

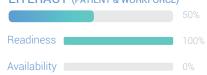
LLO/ (L I (OLLO	
	No data
Development Strategy	No data
Capacity	No data

HEALTH (DH)

FUNDING & RESEARCH







FUNDING & RESEARCH

	No data
Development	No data
Strategy	
Capacity building	No data

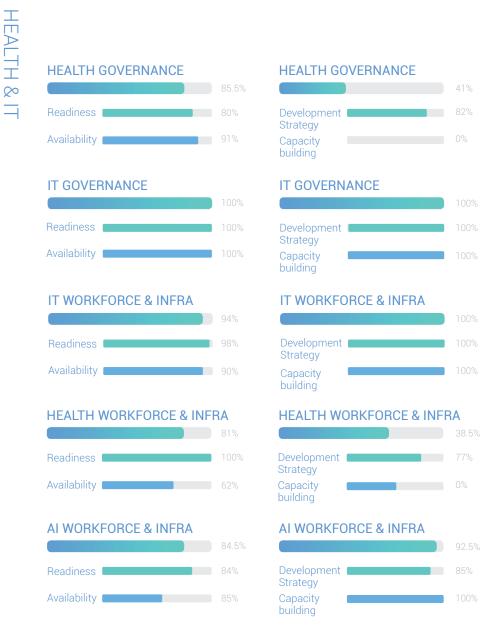






Denmark







PRESENT DEVELOPMENT

DH INFRA.

Readiness

Availability 10%

FUNDING & RESOURCES Readiness 80% Availability

LEGAL RULES Readiness Availability 55%

DH GOVERNANCE



DH INFRA.



WORKFORCE (TECH & HEALTH)



FUNDING & RESOURCES



LEGAL RULES





HEALTH (DH

DIGITAL **FUNDING & RESEARCH**



LITERACY (PATIENT & WORKFORCE)

	No data
Readiness	No data
Availability	No data

FUNDING & RESEARCH

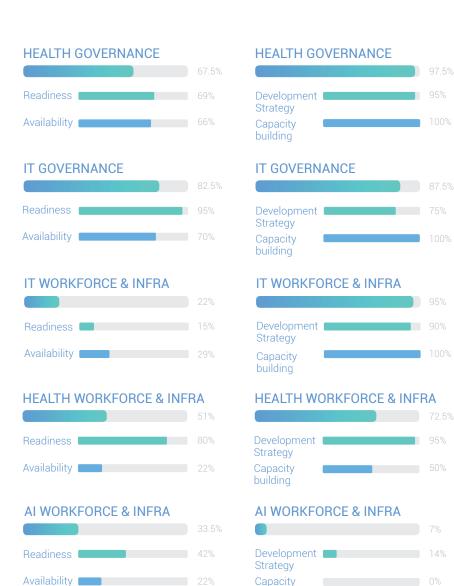


	110 dati
Development	No data
Strategy	
Capacity	No data
building	











9



building

FUNDING & RESEARCH

Strategy

Capacity

PRESENT DEVELOPMENT









LITERACY (PATIENT & WORKFORCE)

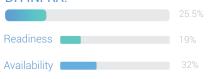
Readiness 65%

Availability 0%



Development 50%





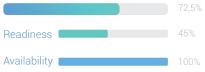


DH INFRA.





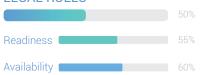




















PRESENT DEVELOPMENT

India

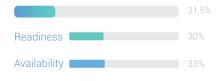
HEALTH GOVERNANCE



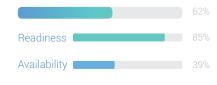




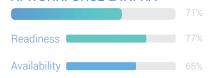
IT WORKFORCE & INFRA



HEALTH WORKFORCE & INFRA



AI WORKFORCE & INFRA



HEALTH GOVERNANCE

Development	1009
Strategy	
Capacity	1009
building	

IT GOVERNANCE



IT WORKFORCE & INFRA



HEALTH WORKFORCE & INFRA

	100%
Development Strategy	100%
Capacity building	100%

AI WORKFORCE & INFRA

	95%
Development (Strategy	90%
Capacity building	1009





DIGITAL HEALTH (DH

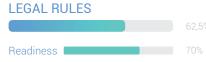






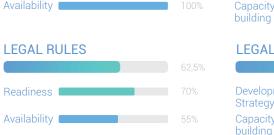






Readiness 80%

Availability

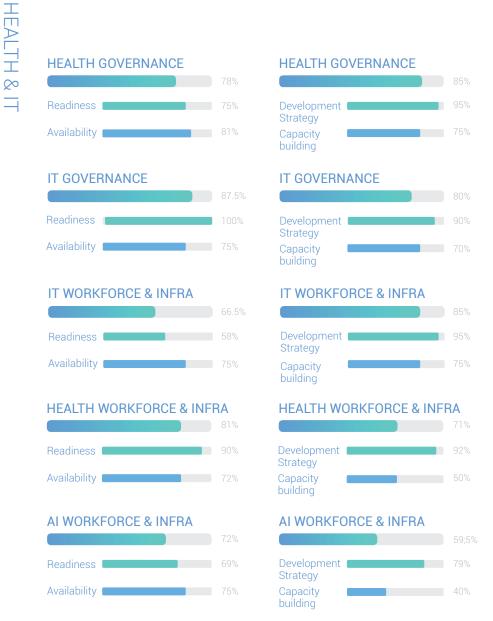






Ireland







DH GOVERNANCE

DH GOVERNANCE

Development _____

Strategy

Capacity

building

Strategy

Capacity

building

DH INFRA.













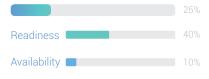
Availability



Readiness 90%

70%

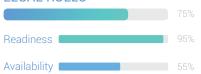
WORKFORCE (TECH & HEALTH)



FUNDING & RESOURCES



LEGAL RULES



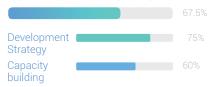
WORKFORCE (TECH & HEALTH)



Development 80%

60%

FUNDING & RESOURCES



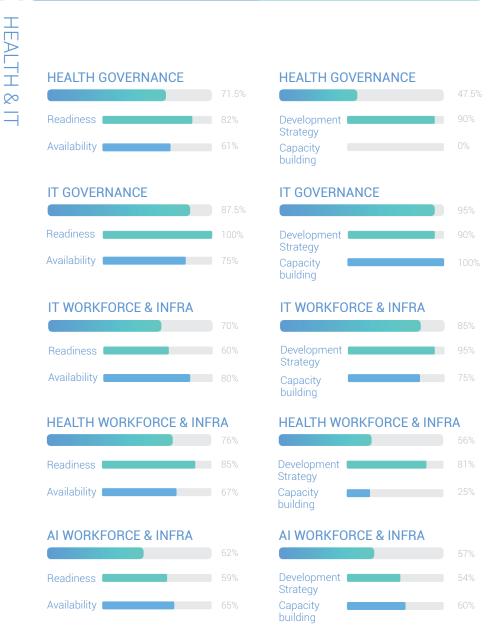
LEGAL RULES



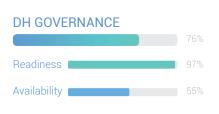


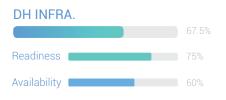
Israel

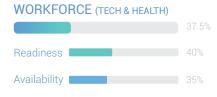




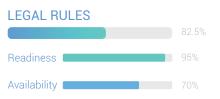






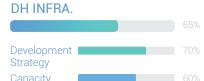








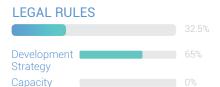










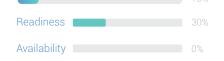


DIGITAL HEALTH (DH)

FUNDING & RESEARCH







FUNDING & RESEARCH



LITERACY (PATIENT & WORKFORCE)

	No data
Development	No data
Strategy	
Capacity building	No data





building

Japan









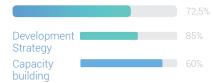








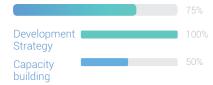




IT WORKFORCE & INFRA







HEALTH WORKFORCE & INFRA



HEALTH WORKFORCE & INFRA

	70%
Development Strategy	65%
Capacity building	75%

AI WORKFORCE & INFRA

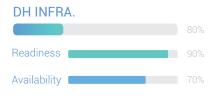


AI WORKFORCE & INFRA



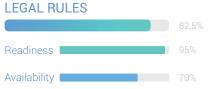


PRESENT DEVELOPMENT









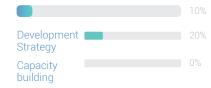




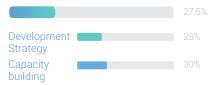




WORKFORCE (TECH & HEALTH)



FUNDING & RESOURCES



LEGAL RULES



DIGITAL HEALTH (DH

FUNDING & RESEARCH 85% Readiness 100% Availability 70%



FUNDING & RESEARCH



LITERACY (PATIENT & WORKFORCE)

1 TO data
No data
No data





PRESENT DEVELOPMENT

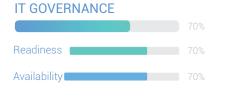
Mauritius

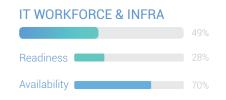




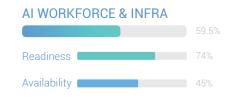












HEALTH GOVERNANCE

	100%
Development Development	100%
Strategy	
Capacity	100%
building	

IT GOVERNANCE



IT WORKFORCE & INFRA



HEALTH WORKFORCE & INFRA



AI WORKFORCE & INFRA

		47.5
Development Strategy		
Capacity building		60%



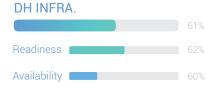




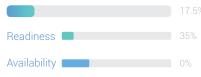


Availability _____

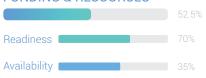
PRESENT DEVELOPMENT



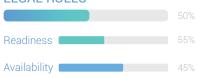




FUNDING & RESOURCES



LEGAL RULES



DH GOVERNANCE



DH INFRA.



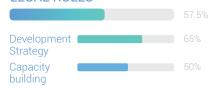
WORKFORCE (TECH & HEALTH)



FUNDING & RESOURCES



LEGAL RULES



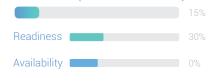
 \perp

EALTH (DH)

G FUNDING & RESEARCH



LITERACY (PATIENT & WORKFORCE)



FUNDING & RESEARCH

	No data
Development Strategy	No data
Capacity building	No data

LITERACY (PATIENT & WORKFORCE)

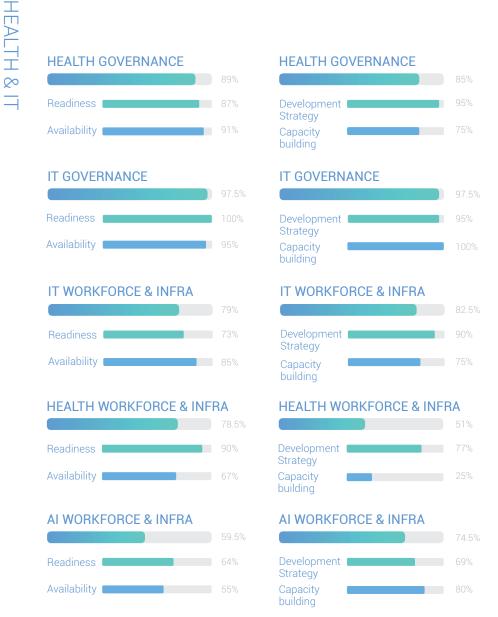






New Zealand







FUNDING & RESEARCH

LITERACY (PATIENT & WORKFORCE)

Readiness 30%

Availability 0%

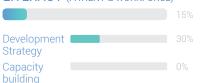
Readiness

Availability





FUNDING & RESEARCH Development _____ Strategy Capacity building LITERACY (PATIENT & WORKFORCE)





LEGAL RULES

Readiness -

Availability 55%



LEGAL RULES

Strategy

Capacity building

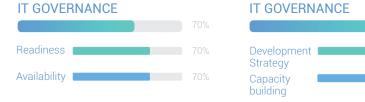
Development 85%

Rwanda





HEALTH GOVERNANCE HEALTH GOVERNANCE Readiness === Development ____ Strategy Availability Capacity building



Availability 20%

Readiness 47%

Availability 35%

AI WORKFORCE & INFRA





Capacity building	100%
AI WORKFORCE & INFRA	A
	10%
Development Strategy	20%
Capacity building	





FUNDING & RESEARCH

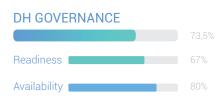
Readiness 75%

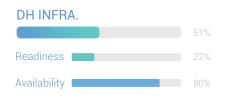
Availability 40%

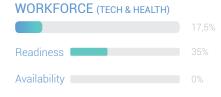
Readiness No data

Availability No data

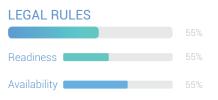
LITERACY (PATIENT & WORKFORCE)























FUNDING & RESOURCES







DIGITAL HEALTH (DH)

ELINIE



LITERACY (PATIENT & WORKFORCE)















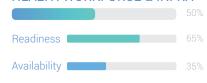




IT WORKFORCE & INFRA



HEALTH WORKFORCE & INFRA



AI WORKFORCE & INFRA



HEALTH GOVERNANCE

	007
Development Development	959
Strategy	
Capacity	259
building	

IT GOVERNANCE



IT WORKFORCE & INFRA



HEALTH WORKFORCE & INFRA

		54.59
Development Strategy		59%
Capacity building		50%

AI WORKFORCE & INFRA

		59.5
Development Strategy		39%
Capacity building		





FUNDING & RESEARCH

LITERACY (PATIENT & WORKFORCE)

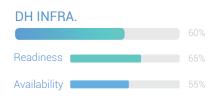
Readiness 100%

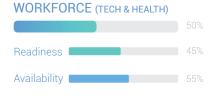
Availability 0%

DIGITAL

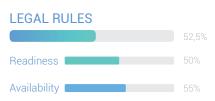
HEALTH (DH

DH GOVERNANCE Readiness 80% Availability 80%



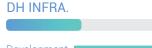










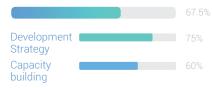
















DIGITAL HEALTH (DH)



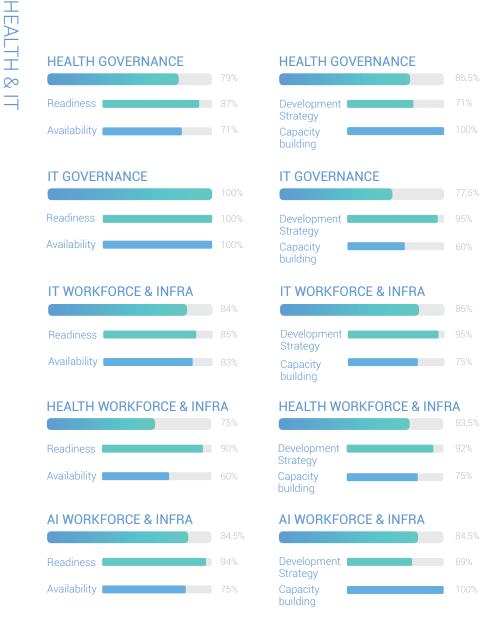


	No dat
Development	No dat
Strategy	
Capacity building	No dat

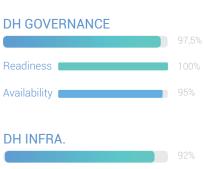








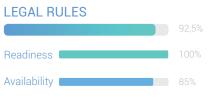






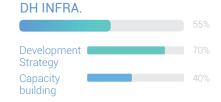


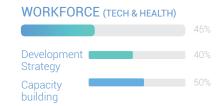




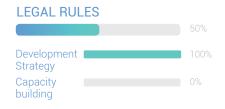






















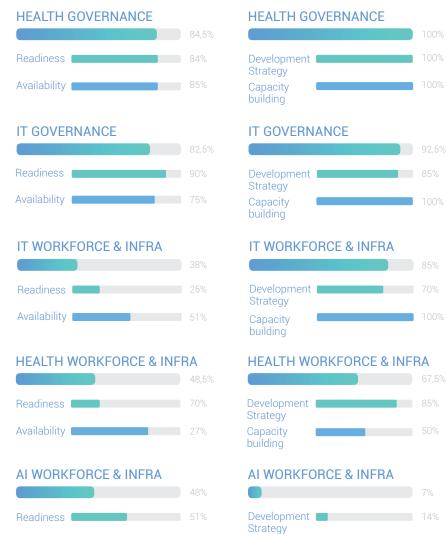
LITERACY (PATIENT & WORKFORCE)

	No data
Development	No data
Strategy	
Capacity	No data
building	











South Africa

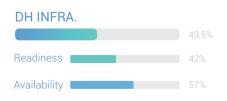


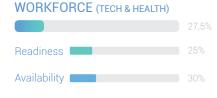


Capacity building

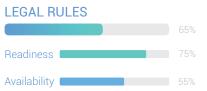
Availability 45%























FUNDING & RESOURCES







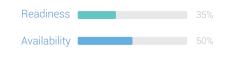












FUNDING & RESEARCH



LITERACY (PATIENT & WORKFORCE)







Switzerland

200











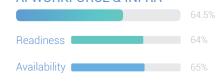
IT WORKFORCE & INFRA



HEALTH WORKFORCE & INFRA



AI WORKFORCE & INFRA



HEALTH GOVERNANCE



IT GOVERNANCE



IT WORKFORCE & INFRA



HEALTH WORKFORCE & INFRA

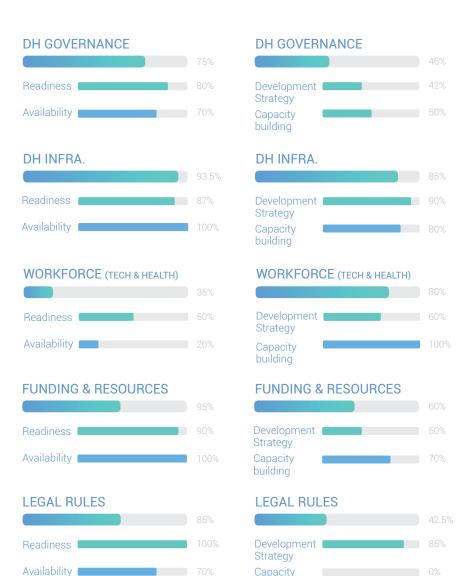
		51%
Development Strategy		77%
Capacity building		25%

AI WORKFORCE & INFRA

		39.5
Development Strategy		59%
Capacity building		20%







building







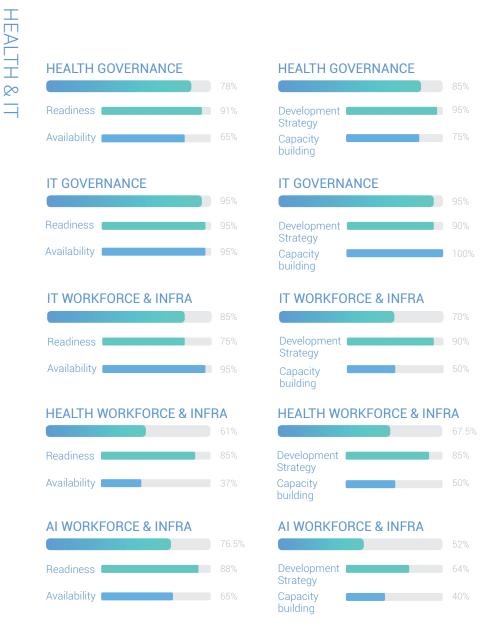














FUNDING & RESEARCH

Readiness 85%

Availability 40%

LITERACY (PATIENT & WORKFORCE)

Readiness 30%

Availability 0%

PRESENT DEVELOPMENT

Availability

DH INFRA.

Readiness 78% Availability 45%

95%

WORKFORCE (TECH & HEALTH) Readiness 70% Availability

FUNDING & RESOURCES

Readiness 70% Availability 100%

LEGAL RULES

77.5% Readiness Availability 55%

DH GOVERNANCE

Development 57% Strategy 25% Capacity building

DH INFRA.

Development 80% Strategy Capacity 40% building

WORKFORCE (TECH & HEALTH)

Development 40% Strategy Capacity building

FUNDING & RESOURCES

Development 75% Strategy Capacity 60% building

LEGAL RULES



DIGITAL 工 EALTH (DH



FUNDING & RESEARCH



LITERACY (PATIENT & WORKFORCE)

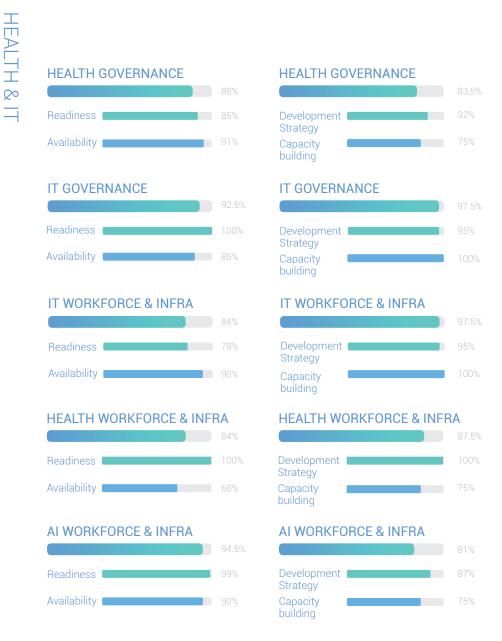






UK

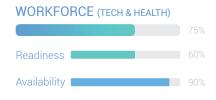














Readiness

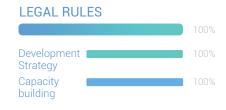
Availability 85%



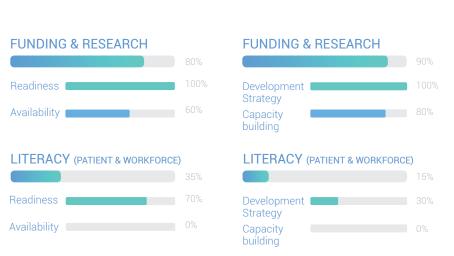










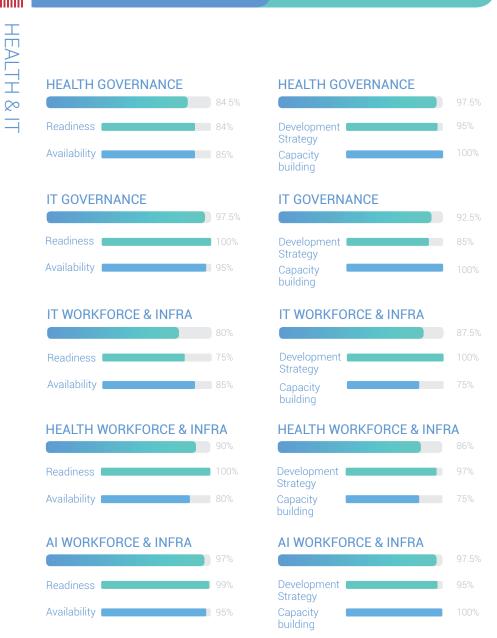






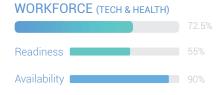
USA



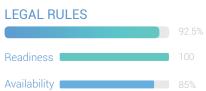








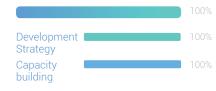








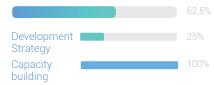
DH INFRA.



WORKFORCE (TECH & HEALTH)



FUNDING & RESOURCES



LEGAL RULES











FUNDING & RESEARCH



LITERACY (PATIENT & WORKFORCE)







Annex.I

TAXONOMY - WEIGHTAGE HEALTHCARE GOVERNANCE - READINESS - 100 INDICATORS -QUESTIONS WEIGHTAGE WEIGHTAGE **National Healthcare** Does the country have a National Healthcare **Policy / National** Healthcare Act - 25 Is the National Healthcare Strategy updated? Is it a Short Term Strategy (duration <= 5)? Does the National Healthcare Strategy Focus on Strengthening Digital Dimensions in Healthcare? Does the Government provide Healthcare Financial Health financing strategies & plans - 20 Is Healthcare financed only by the Government? Is the Healthcare both publicly and privately financed? Country has adopted Has the country achieved Universal Health Coverage? **Universal Health** Does the Country have a Universal or Federal Health Coverage as policy Insurance Plan for achieving Universal Health Coverage? Is the country working towards achieving Universal Health Coverage? Laws on Health-data Does the country have a law to protect Personal, privacy and confiden-Sensitive or Health Data of its citizens? tiality - 15 **Policy for Controlling** Does the Country have National Strategy for Control-Diseases/Disease ling Diseases? prevention - 15 Does the Strategy focus on both the Communicable and Non-Communicable Diseases? Does the Strategy focus on either Communicable or Non-Communicable Diseases? Is there a Central Agency for Drug and Medical De-Agency for new drug regulations and apvices Regulation and Approval in the Country? proval - 10 **TAXONOMY - WEIGHTAGE HEALTHCARE GOVERNANCE - READINESS - 100 INDICATORS** -QUESTIONS WEIGHTAGE WEIGHTAGE **Agency for monitoring** Is there a National agency monitoring the policy policy enforcement enforcement?

Dedicated workforce to monitor develop- ment at local/regional level - 5	Is there a dedicated workforce for enforcement at state/local/municipal level?	5
Percentage of GDP	Total GDP expenditure value range >8	15
Spent on Public Health - 30	Total GDP expenditure value range 5-8	10
I suiting 50	Total GDP expenditure value range <5	5
	4. Domestic general government health expenditure (% of GDP) value >5	15
	5. Domestic general government health expenditure (% of GDP) value 3-5	10
	6. Domestic general government health expenditure (% of GDP) value <3	5
Availability of Web based National Health portals - 10	Does the Country have Web based National Health Portals?	10
Health Insurance for Citizens - 25	Is the Health Insurance Available in an Equitable Manner (To every Citizen of the Country)	10
	Is the Health Insurance for all citizen is in plan?	5
	Is the Health Insurance Available only to low income group/elderly people?	4
	Is there a Federal Health Insurance Fund Available?	6
Government's Engage- ment with the Private Sector for Stronger Implementation of the National Health Policy - 20	Has the country adopted the PPP for better imple- mentation of national health policy?	20
	TAXONOMY - WEIGHTAGE	
HEALTHCARE G	OVERNANCE - DEVELOPMENT STRATEGY - 100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Any Improvement strategy for the better	Is there any plan to improve quality of primary health- care?	15
quality of the health- care - 35	Is there any plan to develop mental health strategy?	10
	Is there plan to establish new medical treatment?	10
Any strategy to	Any plan for re-orientation of public hospitals?	8
strengthen and reform health institutions, laws and regula- tions, including legal frameworks for uni- versal health coverage - 18	Any plan for successful implementation/amendment of health law	10

Health and IT Taxonomy

Any Strategy for	Any plan for improved access to MRI/ CT scanning?	5
developing latest me- dical advancement/ eradicate any specific	Is there any plan to improve the treatment of non-communicable disease?	6
disease - 17	Is there any plan to improve the treatment/eradicate of communicable disease?	6
Strategy for building digital healthcare - 20	Is there any strategy to introduce E-health pro- gramme?	12
	Any plan to improve efficiency of infrastructure by deployment of digital tools?	8
Funding development in healthcare sector - 20	Is there any strategy to increase public health expen- diture?	20
	TAXONOMY - WEIGHTAGE	
HEALTHCARE	GOVERNANCE - CAPACITY BUILDING - 100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Dedicated budget/fun-	Is there any fund to support healthcare projects?	25
ding - 50	Is there any fund for workforce development?	25
Upskilling of workforce for the Na- tional Agency - 25	Is there any training programme to upskill the health- care workforce?	25

IT (GOVERNANCE - READINESS - 100	
INDICATORS - WEIGHTAGE	WEIGHTAGE	
National ICT Policy	Does the Country have a National ICT Policy?	15
- 30	Is the National ICT Policy Updated?	7
	Is it a Short Term Strategy (duration <=5)?	5
	Does the National ICT Strategy Focus on strengthening network infrastructure?	3
General Data Pro-	Is there any existing Data Protection Law?	15
tection Regulation - GDPR/Personal Data Protection Laws - 30	Does the Country update/amend the Data protection law?	10
Troccolon Laws 30	Is there any equivalent standard available in the system?	5
Interoperability Framework- 10	Does the ICT strategy have the Interoperability Framework?	10

Law of Cybersecurity,	Is there any existing Cyber security Law?	10
cyberspace- 15	Does the system follow privacy and encryption me- thodologies? Is it updated?	5
Governance principles by which all IT initia- tives will be governed - 10	Does the country have Governance principles for all IT initiatives?	10
Strategy for applica- tion of IT in different sectors - 5	Is there any strategy for IT applications in various sectors?	5
	TAXONOMY - WEIGHTAGE	
IT GO	OVERNANCE - AVAILABILITY - 100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
National agency monitoring the policy enforcement - 15	Is there a National agency monitoring the policy enforcement	15
Dedicated workforce to monitor locally/ regionally - 5	Is there any dedicated workforce for enforcement in state/local/municipal level?	5
Availability of Govern- ment Online Services	Is there any official website for the Government ser- vices /E-service portal?	15
- 50	OSI Index >0.95	35
	OSI Index is 0.9-0.95	30
	OSI Index 0.8-0.89	20
	OSI Index 0.7-0.79	10
	OSI Index <0.7	5
Government Open Data Portal - 15	Is there any official open data portal? (15)	15
Agencies to monitor Laws/Acts - 15	Is there any National agency monitoring the Law enforcement?	10
	Does the country have a Cyber security centre?	5
	TAXONOMY - WEIGHTAGE	
IT GOVERN	IANCE - DEVELOPMENT STRATEGY - 100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE

Regulatory and Security Framework	Does the country have guidelines to ensure ICT secu- rity and maintaining standards?	10
Strengthening - 30	Does the country have a plan to establish/promote a comprehensive data protection for digital communications?	10
	Does the country have a plan to establish/promote the International Data Centres?	10
Integration of digital dimension in future	Does the country aim to create robust Digital Com- munications Infrastructure?	15
strategies - 25	Does the country have a plan to adopt modern tech- nology for digital development?	10
E-Gov Strategies and ranking - 35	Does the country have a plan to adopt/promote E-Government?	10
	EGDI Index >0.95	25
	EGDI Index 0.9-0.95	20
	EGDI Index 0.8-0.89	15
	EGDI Index 0.6-0.79	10
	EGDI Index <0.6	5
Identified require- ments - 10	Does the country have already identified the fields of development?	10
	TAYONOMY WEIGHTAGE	
	TAXONOMY - WEIGHTAGE	
IT GOVER	NANCE - DEVELOPMENT STRATEGY - 100	
IT GOVERN INDICATORS - WEIGHTAGE		WEIGHTAGE
INDICATORS - WEIGHTAGE Dedicated budget/fun-	NANCE - DEVELOPMENT STRATEGY - 100	WEIGHTAGE 20
INDICATORS - WEIGHTAGE	NANCE - DEVELOPMENT STRATEGY - 100 QUESTIONS	
INDICATORS - WEIGHTAGE Dedicated budget/fun-	NANCE - DEVELOPMENT STRATEGY - 100 QUESTIONS Is there any fund to support IT projects?	20
INDICATORS - WEIGHTAGE Dedicated budget/fun- ding - 40	NANCE - DEVELOPMENT STRATEGY - 100 QUESTIONS Is there any fund to support IT projects? Is there any fund for IT workforce development?	20
INDICATORS - WEIGHTAGE Dedicated budget/fun- ding - 40	Is there any fund to support IT projects? Is there any fund for IT workforce development? TAXONOMY - WEIGHTAGE	20
INDICATORS - WEIGHTAGE Dedicated budget/funding - 40 IT WORKFOR INDICATORS - WEIGHTAGE IT Workforce - Num-	Is there any fund to support IT projects? Is there any fund for IT workforce development? TAXONOMY - WEIGHTAGE CE & INFRASTRUCTURE - READINESS - 100	20 20
INDICATORS - WEIGHTAGE Dedicated budget/funding - 40 IT WORKFOR INDICATORS - WEIGHTAGE IT Workforce - Number of IT graduates	NANCE - DEVELOPMENT STRATEGY - 100 QUESTIONS Is there any fund to support IT projects? Is there any fund for IT workforce development? TAXONOMY - WEIGHTAGE CE & INFRASTRUCTURE - READINESS - 100 QUESTIONS	20 20 WEIGHTAGE
INDICATORS - WEIGHTAGE Dedicated budget/funding - 40 IT WORKFOR INDICATORS - WEIGHTAGE IT Workforce - Num-	Is there any fund to support IT projects? Is there any fund for IT workforce development? TAXONOMY - WEIGHTAGE CE & INFRASTRUCTURE - READINESS - 100 QUESTIONS Current Percentage of STEM graduates >30%	20 20 WEIGHTAGE
INDICATORS - WEIGHTAGE Dedicated budget/funding - 40 IT WORKFOR INDICATORS - WEIGHTAGE IT Workforce - Number of IT graduates - 10 IT Workforce - ICT	Is there any fund to support IT projects? Is there any fund for IT workforce development? TAXONOMY - WEIGHTAGE CE & INFRASTRUCTURE - READINESS - 100 QUESTIONS Current Percentage of STEM graduates >30% Current Percentage of STEM graduates <20-30%	20 20 WEIGHTAGE
INDICATORS - WEIGHTAGE Dedicated budget/funding - 40 IT WORKFOR INDICATORS - WEIGHTAGE IT Workforce - Number of IT graduates - 10	Is there any fund to support IT projects? Is there any fund for IT workforce development? TAXONOMY - WEIGHTAGE CE & INFRASTRUCTURE - READINESS - 100 QUESTIONS Current Percentage of STEM graduates >30% Current Percentage of STEM graduates <20-30% Current Percentage of STEM graduates <20%	20 20 WEIGHTAGE 10 8 5
INDICATORS - WEIGHTAGE Dedicated budget/funding - 40 IT WORKFOR INDICATORS - WEIGHTAGE IT Workforce - Number of IT graduates - 10 IT Workforce - ICT	Is there any fund to support IT projects? Is there any fund for IT workforce development? TAXONOMY - WEIGHTAGE CE & INFRASTRUCTURE - READINESS - 100 QUESTIONS Current Percentage of STEM graduates >30% Current Percentage of STEM graduates <20-30% Current Percentage of STEM graduates <20% Rank as per ICT skill<=10	20 20 WEIGHTAGE 10 8 5 20
INDICATORS - WEIGHTAGE Dedicated budget/funding - 40 IT WORKFOR INDICATORS - WEIGHTAGE IT Workforce - Number of IT graduates - 10 IT Workforce - ICT	Is there any fund to support IT projects? Is there any fund for IT workforce development? TAXONOMY - WEIGHTAGE CE & INFRASTRUCTURE - READINESS - 100 QUESTIONS Current Percentage of STEM graduates >30% Current Percentage of STEM graduates <20-30% Current Percentage of STEM graduates <20% Rank as per ICT skill <=10 Rank as per ICT skill is 11-20	20 20 WEIGHTAGE 10 8 5 20

Employment in ICT	Rank as per ICT development Index is 1-10	20
Sector - 20	Rank as per ICT development Index is 11-20	15
	Rank as per ICT development Index is 21-40	10
	Rank as per ICT development Index is 41-60	8
	Rank as per ICT development Index >60	5
Network Readiness	NRI rank is 1-10	25
Index - 25	NRI rank is 11-20	20
	NRI rank is 21-40	15
	NRI rank is 41-60	10
	NRI rank >60	5
Telecommunications	TII, UN data >0.95	25
Infrastructure Index - 25	TII, UN data 0.90-0.95	20
- 23	TII, UN data 0.80-0.89	15
	TII, UN data 0.70-0.79	10
	TII, UN data <0.70	5
	TAXONOMY - WEIGHTAGE	
	CE & INFRASTRUCTURE - AVAILABILITY - 100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
	QUESTIONS Fixed broadband subscriptions (per 100 people) >35	WEIGHTAGE 25
WEIGHTAGE Broadband Connecti-		
WEIGHTAGE	Fixed broadband subscriptions (per 100 people) >35	25
WEIGHTAGE Broadband Connecti-	Fixed broadband subscriptions (per 100 people) >35 Fixed broadband subscriptions (per 100 people) 25-35	25 20
WEIGHTAGE Broadband Connecti-	Fixed broadband subscriptions (per 100 people) >35 Fixed broadband subscriptions (per 100 people) 25-35 Fixed broadband subscriptions (per 100 people) 15-24	25 20 15
WEIGHTAGE Broadband Connectivity - 25 Mobile Subscriptions	Fixed broadband subscriptions (per 100 people) >35 Fixed broadband subscriptions (per 100 people) 25-35 Fixed broadband subscriptions (per 100 people) 15-24 Fixed broadband subscriptions (per 100 people) 5-14	25 20 15
WEIGHTAGE Broadband Connectivity - 25	Fixed broadband subscriptions (per 100 people) >35 Fixed broadband subscriptions (per 100 people) 25-35 Fixed broadband subscriptions (per 100 people) 15-24 Fixed broadband subscriptions (per 100 people) 5-14 Fixed broadband subscriptions (per 100 people) <5	25 20 15 10 5
WEIGHTAGE Broadband Connectivity - 25 Mobile Subscriptions	Fixed broadband subscriptions (per 100 people) >35 Fixed broadband subscriptions (per 100 people) 25-35 Fixed broadband subscriptions (per 100 people) 15-24 Fixed broadband subscriptions (per 100 people) 5-14 Fixed broadband subscriptions (per 100 people) <5 Mobile cellular subscriptions (per 100 people) >140 Mobile cellular subscriptions (per 100 people) 130-	25 20 15 10 5
WEIGHTAGE Broadband Connectivity - 25 Mobile Subscriptions	Fixed broadband subscriptions (per 100 people) >35 Fixed broadband subscriptions (per 100 people) 25-35 Fixed broadband subscriptions (per 100 people) 15-24 Fixed broadband subscriptions (per 100 people) 5-14 Fixed broadband subscriptions (per 100 people) <5 Mobile cellular subscriptions (per 100 people) >140 Mobile cellular subscriptions (per 100 people) 130- 140 Mobile cellular subscriptions (per 100 people) 120-	25 20 15 10 5 25 20
WEIGHTAGE Broadband Connectivity - 25 Mobile Subscriptions	Fixed broadband subscriptions (per 100 people) >35 Fixed broadband subscriptions (per 100 people) 25-35 Fixed broadband subscriptions (per 100 people) 15-24 Fixed broadband subscriptions (per 100 people) 5-14 Fixed broadband subscriptions (per 100 people) <5 Mobile cellular subscriptions (per 100 people) >140 Mobile cellular subscriptions (per 100 people) 130- 140 Mobile cellular subscriptions (per 100 people) 120- 129 Mobile cellular subscriptions (per 100 people) 100-	25 20 15 10 5 25 20
WEIGHTAGE Broadband Connectivity - 25 Mobile Subscriptions	Fixed broadband subscriptions (per 100 people) >35 Fixed broadband subscriptions (per 100 people) 25-35 Fixed broadband subscriptions (per 100 people) 15-24 Fixed broadband subscriptions (per 100 people) 5-14 Fixed broadband subscriptions (per 100 people) <5 Mobile cellular subscriptions (per 100 people) >140 Mobile cellular subscriptions (per 100 people) 130- 140 Mobile cellular subscriptions (per 100 people) 120- 129 Mobile cellular subscriptions (per 100 people) 100- 119	25 20 15 10 5 25 20 15
WEIGHTAGE Broadband Connectivity - 25 Mobile Subscriptions - 25 Availability of Disruptive Technologies - IoT and Al Services	Fixed broadband subscriptions (per 100 people) >35 Fixed broadband subscriptions (per 100 people) 25-35 Fixed broadband subscriptions (per 100 people) 15-24 Fixed broadband subscriptions (per 100 people) 5-14 Fixed broadband subscriptions (per 100 people) <5 Mobile cellular subscriptions (per 100 people) >140 Mobile cellular subscriptions (per 100 people) 130- 140 Mobile cellular subscriptions (per 100 people) 120- 129 Mobile cellular subscriptions (per 100 people) 100- 119 Mobile cellular subscriptions (per 100 people) <100 Has the country already started to integrate IOT and	25 20 15 10 5 25 20 15

Internet Usage - 25	Individuals using the Internet (% of population) >90	25
	Individuals using the Internet (% of population) 80-90	20
	Individuals using the Internet (% of population) 70-79	15
	Individuals using the Internet (% of population) 60-69	10
	Individuals using the Internet (% of population) <60	5
5G Network - 7	Is 5G network available in good extent?	7
	Is 5G network just launched in 2020?	2
IT research hubs/ labs - 5	Does the country pose the number of Government research labs?	5
	TAXONOMY - WEIGHTAGE	
IT WORKFORCE & IN	FRASTRUCTURE - DEVELOPMENT STRATEGY - 100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Creating IT / ICT workforce - 20	Is there any plan to increase the number of IT workforce?	10
	Is there any plan to train/educate people to create suitable workforce?	10
Enhancing Broadband Connectivity - 20	Is there any plan to promote/enhance broadband connectivity?	10
	Does the country have plan to create universal access of Broadband?	10
Developing 5G In-	Does the country focus on developing 5G network?	15
frastructure - 20	Does the country have separate strategy document for development of 5G?	5
Promoting Cyberse- curity Policy - 10	Is there any plan to promote/enhance cybersecurity policy?	10
Promoting IoT and AI - 10	Does the country focus on promoting the disruptive technologies?	5
	Does the country have separate strategy document for development/promotion of AI?	5
Promoting ICT Application in Education, Medicine, and Other Fields - 10	Does the country promote ICT application in various fields?	10
Digital Literacy Initia- tives - 10	Does the country have a plan to promote/enhance the Digital literacy initiatives?	10
IT WORKFORCE &	INFRASTRUCTURE - CAPACITY BUILDING - 100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
	· · · · · · · · · · · · · · · · · · ·	

Introducing ICT Curri- culum or Programmi- ng - 25	Is there any ICT curriculum in schools and universi- ties?	25
Promoting ICT Re- search and Develop- ment - 25	Does the country promote ICT Research / innovation ?	25
Dedicated budget for Capacity Building in IT - 25	Is there any dedicated budget for capacity building in IT?	25
Public-Private Partnerships - 25	Is there any plan to develop PPP in ICT?	25

TAXONOMY - WEIGHTAGE		
HEALTHCARE WORKFORCE AND INFRASTRUCTURE - READINESS		
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Primary care - 30	Does the country have strong primary care unit?	20
	Does the country have vaccination unit, free medicine in primary care level?	10
Emergency Healthcare Access - 20	Does the country have strong emergency healthcare access? RUral 24*7 critical care service? centralised hub? medicine , hospital	20
Ranking on Global	As per GHS index, country score >=70	25
Health Security Index - 25	As per GHS index, country score 60-69	20
	As per GHS index, country score 50-59	15
	As per GHS index, country score 40-49	10
	As per GHS index, country score <40	5
Existing Strategy for Increasing Skilled Professionals and Infrastructure - 25	Does the country have a strategy to increase skilled workforce and infrastructure?	25

TAXONOMY - WEIGHTAGE

HEALTHCARE WORKFORCE AND INFRASTRUCTURE - AVAILABILITY		
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Practicing Doctors / 1000 People - 15	Number of Practicing Doctors / 1000 People range >4	15
	Number of Practicing Doctors / 1000 People range 3-4	10
	Number of Practicing Doctors / 1000 People range 2-2.9	8

Health and IT Taxonomy

	Number of Practicing Doctors / 1000 People range <2	3
Practicing Nurses /	Number of Nurses / 1000 People range >12	15
1000 People - 15	Number of Nurses / 1000 People range 10-12	10
	Number of Nurses / 1000 People range 7-9.9	8
	Number of Nurses / 1000 People range 5-6.9	5
Number of Hospitals	Number of Hospitals and clinics >1000	15
and clinics - 15	Number of Hospitals and clinics 500-1000	10
	Number of Hospitals and clinics 200-499	8
	Number of Hospitals and clinics 50-199	5
Availability of Hospi-	Number of Hospital Beds/1000 populations >10	15
tal Beds - 15	Number of Hospital Beds/1000 populations 5-10	12
	Number of Hospital Beds/1000 populations 3-4.9	10
	Number of Hospital Beds/1000 populations 2-2.9	5
	Number of Hospital Beds/1000 populations <2	2
Digital Data Access in Health Care Facilities	Does the country use digital healthcare data in good extent?	7
- 10	Country just launched digital healthcare facilities?	3
Access to Critical Care, surgery, inten- sive - 5	Does the country have strong critical care unit?	5
Medical/Imaging	Number of Medical Technology units >50	15
devices - 15	Number of Medical Technology units <50	10
Healthcare Research Hubs - 10	Healthcare research hubs are present?	10
	TAXONOMY - WEIGHTAGE	
HEALTHCARE WORKFORCE AND INFRASTRUCTURE - DEVELOPMENT STRATEGY -100		
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Long Term Or Short	Is it a Short Term Strategy (duration <=5 yr) ?	8
Term Development Strategy - 8	Is it a Long Term Strategy (duration 5-10 yr) ?	5
Strategy for Regulating Healthcare	Does the country have plan to promote medical infrastructure?	14
Infrastructure - 32	Does the country focus on increasing hospital beds?	10
	Does the country have plan to improve availability of medical products/equipment?	8

Increasing / Regula- ting Public Healthcare Spending / Establi- shing Sustainable Funding Sources - 10	Is the country increasing the sustainable healthcare funding?	10
Private Sector Colla- boration - 5	Is there any plan to develop PPP in healthcare?	5
Promoting Skilled Manpower in Remote Regions - 5	Does the country have a plan to promote the skilled workforce in remote/rural area (introducing quota, remuneration)	5
Integration of Digital Dimension - 25	Does the country promote Electronic health record/ Electronic patient card ?	12
	Does the country promote Telemedicine?	8
	Does the country promote the healthcare software?	5
Creating More Workforce - 10	Is there any plan to increase the number of health- care worker?	5
	Is there any plan to train/educate people to create suitable health worker	5
Strengthening Prima- ry Healthcare - 5	Does the country have plan to strengthen the primary healthcare units?	5
	TAXONOMY - WEIGHTAGE	
HEALTHCARE WORKF	ORCE AND INFRASTRUCTURE - CAPACITY BUILDING -100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Integration of advanced technologies - 25	Does the country integrate advanced technologies in healthcare ?	25
Public Funding of Me- dical Education - 25	Does the country have public funding for medical education/ free medical education ?	25
Funding develop- ment for Healthcare research - 25	Does the country promote/develop funding for healthcare research?	25
Increasing Number of Graduate Schools Teaching Medical Science or Public Health- adequacy of graduates with respect to market/ country need - 25	Does the country produce more healthcare gra- duates?	25

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	TAXONOMY - WEIGHTAGE	
AI WORKFO	RCE/INFRASTRUCTURE - READINESS - 100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
National Al Strategy	Does the Country have a National AI strategy?	15
- 25	Does the country have plan to publish Al strategy?	5
	Does the National AI Strategy Focus on Strengthe- ning Digital Dimensions of the country?	5
Framework for Ethical use of AI - 8	Does the strategy have the guidelines of ethical use of Al?	5
	Creating guidelines of ethical use is in progress	3
Data Protection and	Is there any existing Data Protection Law?	10
Privacy Legislation - 17	Does the Country update/amend the Data protection law?	5
	Is the law up to date as per global standard?	2
Existing Cybersecu-	Is there any existing Cybersecurity Law?	10
rity Initiatives - 15	Does the Country cybersecurity centre?	5
Overall Al Index - 20	As per Government AI readiness index, score >75	20
	As per Government AI readiness index, score 70-75	18
	As per Government AI readiness index, score 60-69	15
	As per Government AI readiness index, score 50-59	10
	As per Government AI readiness index, score <50	5
Al infrastructure-	Country is having National data centre	7
data centres, high speed performing	Number of supercomputers >15	15
computers - 15	Number of supercomputers 4-15	10
	Number of supercomputers	1-3
	TAXONOMY - WEIGHTAGE	
AI WORKFO	RCE/INFRASTRUCTURE - READINESS - 100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
National agency monitoring the policy enforcement - 10	Is there a National agency monitoring the policy enforcement?	10
Al expertise in exis- ting IT workforce - 10	As per government report, huge number of Al experts are present?	10
	As per government report, country is lacking Al experts	5

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Digital Infrastructure	5G network is available in good extent?	10
for AI - 35	5G network is just launched?	5
	TII, UN data >0.95	25
	TII, UN data 0.90-0.95	20
	TII, UN data 0.80-0.89	15
	TII, UN data 0.70-0.79	10
	TII, UN data <0.70	5
Availability of data for Al Models - Open Data - 10	Does the country have open data source of AI mo- dels?	10
Al Research Hubs - 10	Does the country have AI research hub?	10
Number of compa-	Number of AI startups >1000	25
nies working in Al field - 25	Number of Al startups 500-1000	20
	Number of AI startups 200-499	15
	Number of AI startups 50-199	10
	Number of AI startups <50	5
	TAXONOMY - WEIGHTAGE	
	FRASTRUCTURE - DEVELOPMENT STRATEGY- 100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Creation of data trusts /transparen-	Does the country focus on promoting data trust/ethi- cal use of AI?	10
cy - 10		
cy - 10 Digital Infrastructure	Does the country focus on developing 5G network?	10
cy - 10	Does the country focus on developing 5G network? Does the country have separate strategy document for development of 5G?	10 6
cy - 10 Digital Infrastructure - 5G and Full Fibre	Does the country have separate strategy document	
cy - 10 Digital Infrastructure - 5G and Full Fibre	Does the country have separate strategy document for development of 5G? Does the country focus on developing full fibre	
cy - 10 Digital Infrastructure - 5G and Full Fibre Networks - 20	Does the country have separate strategy document for development of 5G? Does the country focus on developing full fibre networks? Does the country promote infrastructure for Al	6
cy - 10 Digital Infrastructure - 5G and Full Fibre Networks - 20	Does the country have separate strategy document for development of 5G? Does the country focus on developing full fibre networks? Does the country promote infrastructure for Al research? Does the country promote the possession of super-	6 4 10
cy - 10 Digital Infrastructure - 5G and Full Fibre Networks - 20 Al Infrastructure - 15 Open source software libraries and toolkits	Does the country have separate strategy document for development of 5G? Does the country focus on developing full fibre networks? Does the country promote infrastructure for Al research? Does the country promote the possession of supercomputers? Does the country focus on building/promotion of	6 4 10 5

Health and II Taxonom

Supporting AI Start- ups and Technology Unicorns - 10	Does the country invest in research and innovation?	10
Private Sector Enga- gement - 5	Is there any plan to develop PPP in Al development?	5
Attracting AI experts from abroad - 5	Does the country invest in AI research and innova- tion?	5
Availability of data- sets - 10	Does the country have any plan to promote the availability of datasets?	10
AI WORKFORCE	/INFRASTRUCTURE -CAPACITY BUILDING - 100	
INDICATORS - WEIGHTAGE	WEIGHTAGE	
Funding in AI field - 40	Does the country invest in research and innovation in Al field?	20
	Does the country invest developing the Al workforce?	20
Promoting AI Research/ Training programme - 20	Does the country promote AI research/training programme ?	20
Al Curriculum in Schools & Universi- ties - 20	Is there any Al curriculum in schools and universi- ties?	20
Public-Private Partnerships for AI based projects - 20	Is there any PPP for country's Al projects?	20

TAXONOMY - WEIGHTAGE		
DIGITAL HEALTH - DH GOVERNANCE- READINESS -100		
INDICATORS - QUESTIONS WEIGHTA		WEIGHTAGE
	Does the Country have a National Digital Health Strategy?	15
National Digital Health Strategy / e-health strate- gy - 25	Is the National Digital Health Strategy Updated?	5
	Does the National Digital Health Strategy Focus on strengthening Telemedicine/Teleconsultation?	5
	Is there any existing Data Protection Law?	10
Legal Framework for Data Protection - 20	Is the law up to date as per global standard?	6
	Is there any legal guidelines which country's health department follows?	
EHR Standards - 10	Does the country have any EHR standard?	7
LFIN Stallualus - 10	Does the system have HL7 / SNOMEDCT / ICD 10/11?	3
Interoperability Framework - 10	Does the DH strategy have the Interoperability Framework?	10
Existing Cybersecurity	Is there any existing Cybersecurity Law/strategy?	10
Laws and Initiatives - 15	Does the Country update/amend the Cyber security law?	5
Funding Allocated for Digital Health - 20	Is there any specific funds allocated for Digital Health?	20
TAXONOMY - WEIGHTAGE		
DIGITAL HEALTH - DH GOVERNANCE- AVAILABILITY -100		

INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
National agency monitoring the policy enforcement - 15	Is there a National agency monitoring the policy enforcement?	15
Dedicated workforce to monitor locally/ regionally - 10	Is there any dedicated workforce for enforcement in state/local/municipal level?	10
National Digital Health Web Portal - 15	Is there any National Digital Health web portal?	15
Presence of Government	Does the Government have COVID related app?	15
Medical Apps - 40	Does the Government have other (except COVID) health service related app?	25
Health Analytics Platform / Big Data - 20	Is there any Health data hub/platform?	20

DIGITAL HEALTH - DH GOVERNANCE- DEVELOPMENT STRATEGY -100

INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Public-Private Partnership - 15	Is there any plan for PPP for the improvement of DH?	15
Long Term Or Short Term Development Strategy- 10	Is there a short term strategy (<=5 yrs)?	10
Global Collaboration - Collaboration between Countries and Exchange of Knowledge on DH - 12	Does the Government have plan to collaborate with others for knowledge sharing?	12
Promoting Remote Monitoring of Patients / Telehealth - 15	Does the Government promote Telehealth?	15
Strategy for strengthening Data Security - 15	Is there any strategy for strengthening data security?	15

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Strategy for Reimburse- ment models - 8	Does the country provide any DH Reimbursement model?	8
Identified market needs for investment - 10	Could the Government identify the market need for investment?	10
Development of e-health apps/ medical education apps - 15	Does the Government have plan to develop e-health app?	15

TAXONOMY - WEIGHTAGI

DIGITAL HEALTH - DH GOVERNANCE- CAPACITY BUILDING -100

INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Education and Training of government stakeholders, social workers on Digital Technology - 25	Is there any education/training organised for govern- ment stakeholders and social workers?	25
Investment - Research and development program - 25	Does the Government invest for DH research and development?	25
Dedicated budget /funding - 25	Does the government allot a dedicated budget for DH?	25
Upskilling of Workforce for the National Agency - 25	Is there any programme to upskill the workforce for the national agency?	25

Digital Health Taxonom

TAXONOMY - WEIGHTAGE		
DH INFRASTRUCTURE READINESS -100		
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Data Centers - 2	Does the country have a National Data centre?	2
Medical Technology	Number of Medical Technology units >50	6
units - MRI+CT+- PET+Gamma camera,	Number of Medical Technology units <50	3
EHR - 10	Does the country have Electronic Health Record for the citizens?	4
Rules for data exploitation - ethical, privacy, security - 3	Are there any guidelines/rules for data exploitation?	3
Network Readiness	NRI rank <=20	10
Index - 10	NRI rank 21-50	8
	NRI rank 50-70	5
	NRI rank >70	2
Broadband Connecti-	Fixed broadband subscriptions per 100 people >35	25
vity - 25	Fixed broadband subscriptions per 100 people >25-35	20
	Fixed broadband subscriptions per 100 people >15-24	15
	Fixed broadband subscriptions per 100 people >5-15	10
	Fixed broadband subscriptions per 100 people<5	5
Mobile Subscriptions	Mobile cellular subscriptions per 100 people >140	25
- 25	Mobile cellular subscriptions per 100 people 130 -140	20
	Mobile cellular subscriptions per 100 people 120- 129	15
	Mobile cellular subscriptions per 100 people 100- 119	10
	Mobile cellular subscriptions per 100 people <100	5
Application of AI and IoT in Healthcare Ser- vices - 2	Does the country use disruptive technologies in Healthcare?	2
Cloud Services Usage - 4	Has the country already adopted/launched the cloud computing service?	2
	Does the country focus on growing the cloud storage?	2

Internet Usage - 15	Individuals using the Internet % of population >=90	15
	Individuals using the Internet % of population 80- 90	12
	Individuals using the Internet % of population 70- 79	8
	Individuals using the Internet % of population 60- 69	
	Individuals using the Internet % of population <50	
5G Network - 4	5G network is available in good extent?	4
	5G network is just launched?	
	TAXONOMY - WEIGHTAGE	
	DH INFRASTRUCTURE AVAILABILITY -100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Number of Healthcare professionals/hospitals	Number of Physicians/hospitals have adopted EHR >70%	20
adopting digital health technology - 20	Number of Physicians/hospitals have adopted EHR 50%-70%	10
	Number of Physicians/hospitals have adopted EHR <50%	
Secure and Updated Digital health Software - 10	Are the DH software secured/updated?	20
Digital Health Services	EHR	15
Available at National & Regional Levels - 60	Telehealth/Telemedicine	10
riegional Ecreio 00	Mobile health (mHealth)	10
	ePharmacy / electronic prescription services	8
	wireless medical devices	
	use of AI in healthcare	10
	Taxonomy - Weightage	
DH INI	FRASTRUCTURE - DEVELOPMENT STRATEGY -100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Improving Inter- net Connectivity	Is there any plan to promote/enhance overall inter- net connectivity?	15
Throughout a Country (25)	Does the country have plan to create universal access to Broadband?	10
Improving 5G Connec-	Does the country focus on developing 5G network?	10
tivity Throughout a Country - 15	Does the country have separate strategy document for development of 5G?	5
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Integration of AI, Robotics, IoT, Machine Learning, Virtual Reality in Healthcare - 20	Does the country focus on promoting the disruptive technologies?	10
	Does the country have separate strategy document for development/promotion of AI?	10
Promoting Cloud Ser- vices usage - 10	Does the country focus on promoting the cloud service?	10
Government policies to promote Apps - 10	Does the Government have policy to promote apps?	10
Data protection/ Cyber- security - 10	Is there any plan to promote/enhance cybersecu- rity policy?	10
Sustainability plans - Updatation - 10	Is there any sustainability plan for promoting DH?	10

TAXONOMY - WEIGHTAGE

DH INFRASTRUCTURE - CAPACITY BUILDING -100		
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Integration of advanced digital technologies for health - 20	Is there any plan for the advancement of the inte- gration of technology and health?	20
Public - Private Partnerships - 20	Is there any plan for the PPP for advancement of DH infrastructure?	20
Dedicated budget/fun- ding - 20	Is there any dedicated budget for the advancement of DH infrastructure?	20
Upskilling of workforce - 20	Is there any plan for the upskilling of the workforce for the betterment of DH infrastructure?	20
Research in Digital health/ Al in health - 20	Is there any plan for the DH/AI research for the advancement of infrastructure?	20

TAXONOMY - WEIGHTAGE		
WORKFORCE - TECHNICAL AND HEALTH CARE READINESS - 100		
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
IT Workforce - Num-	Current Percentage of STEM graduates >30%	35
ber of current STEM Graduates - 35	Current Percentage of STEM graduates <20-30%	25
Craudates 00	Current Percentage of STEM graduates <20%	15
Community Health Workers Trained in Digital Health - 10	Community Health Workers Trained in Digital Health	10

ICT Skill rank - 25	Rank as per ICT skill<=10	25
	Rank as per ICT skill 11-20	20
	Rank as per ICT skill 21-30	15
	Rank as per ICT skill 31-40	10
	Rank as per ICT skill >40	
Human Capital as per	Human Capital Score >70	20
Al Index - 30	Human Capital Score 60-70	15
	Human Capital Score 50-59	10
	Human Capital Score <50	
	TAXONOMY - WEIGHTAGE	
WORKFORCE - TEC	HNICAL AND HEALTH CARE AVAILABILITY - 100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Percentage of health-	Percentage of healthcare professionals >80%	50
care professionals who currently use digital	Percentage of healthcare professionals 70%-80%	40
health technology or	Percentage of healthcare professionals 60%-69%	30
mobile health apps - 50	Percentage of healthcare professionals <60%	20
Number of compa-	Number of AI startups work in healthtech >1000	50
nies working in AI, development of digital	Number of AI startups work in healthtech 500-1000	35
technology - 50	Number of AI startups work in healthtech 200-499	20
	Number of AI startups work in healthtech 50-199	10
	Number of AI startups work in healthtech <50	5
	TAXONOMY - WEIGHTAGE	
WORKFORCE - TECHNIC	CAL AND HEALTH CARE - DEVELOPMENT STRATEGY - 100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Training of Healthcare professionals - 20	Is there any training programme for healthcare professional?	20
Training Community Workers on Digital Health - 20	Is there any training programme organised for healthcare community workers?	20
Collaboration for Knowledge Exchange - Knowledge Networks, Hubs, Partnerships - 20	Is there any Government collaboration for knowledge exchange?	20

Incentivising Digital Health Providers - 20	Is there any plan for incentivising of DH providers?	20
Recruitment plan for DH and AI specialist - 20	Is there any Recruitment plan for DH and AI specia- lists?	20
	Taxonomy - Weightage	
Workforce - Tech	nical and Health care -Capacity Building - 100	
Indicators - Weightage	Weightage	
Education of Health- care Providers on Digi- tal Technology - 50	Is there any education programme organised for healthcare providers on technology?	50

	TAXONOMY - WEIGHTAGE	
FUNDING AND RESOURCES - READINESS - 100		
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Government's funding	Does the Government invest for EHR?	15
in digital healthcare - 50	Does the Government invest for E-medication/Tele consultation?	10
	Does the Government invest for AI based DH in- frastructure (robotics etc.)?	15
	Does the Government invest for supercomputers used for DH?	10
Strategy for ma- king cross-sectoral partnerships at national, regional levels - 10	Is there any strategy for cross sectoral collaboration?	10
Public - Private partnerships for	Is there any Public-private partnership for DH fun- ding?	10
Investment - 20	Is there any private organisation who invests inde- pendently in DH?	10
Funding/Collabo- rations with Inter- national agencies - e.g.WHO - 10	Is there any collaboration/funding with WHO/UNICEF?	10
Funding programmes from international agencies like Asian banks/others - 10	Is there any funding programme with International financing agency like Asian Bank?	10

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	TAXONOMY - WEIGHTAGE	
FUNDING	AND RESOURCES - AVAILABILITY - 100	
INDICATORS - WEIGH- TAGE	QUESTIONS	WEIGHTAGE
Launch of the health apps/health portals - 30	Is the Government funding the launch of the health apps/portals/ improving M-health?	30
Research and deve- lopment initiatives - 35	Is the Government funding innovations?	35
Digital Health In- frastructure - 35	Is the Government providing funding to improve DH infrastructure?	35
	TAXONOMY - WEIGHTAGE	
FUNDING AND F	RESOURCES - DEVELOPMENT STRATEGY - 100	
INDICATORS - WEIGH- TAGE	QUESTIONS	WEIGHTAGE
Strengthen collabo- ration of Startups/ Venture Capitalists are invited to work for digital health - 25	Is the Government interested to strengthen the collaboration of Startups/Venture Capitalists for digital health?	25
Building/Strengthe- ning cross-sectoral partnerships at national, regional and global levels - 25	Is the Government interested to strengthen the cross-sectoral partnerships at national, regional and global levels?	25
Funding for innovative digital health - 25	Does the Government have plan to enhance the funding for DH innovation?	25
Strategy for interna- tional collaborations - 25	Is there any plan for international collaboration?	25
	TAXONOMY - WEIGHTAGE	
	ID RESOURCES - CAPACITY BUILDING - 100	
INDICATORS - WEIGH- TAGE	QUESTIONS	WEIGHTAGE
Increasing employ- ment - 40	Does the Government have plan to enhance the fun- ding for employment?	40
Dedicated budget for building skilled DH workforce - 30	Does the Government have plan to increase the Dedi- cated budget to make skilled DH workforce?	30
Dedicated budget for advanced technology- 30	Does the Government have a plan to increase the dedicated budget for advanced technology?	30

	TAXONOMY - WEIGHTAGE	
RESEARCH PROGRAM AND FUNDING READINESS - 100		
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Government's contribution in digital	Does the Government invest for Healthcare research?	25
health and technology research - 75	Does the Government invest for digital health research?	25
	Does the Government invest for Al based health research ?	25
International collabo- ration in research and development - 15	Is there any International collaboration in research and development?	15
Centre of Research and dedicated Re- searcher - 10	Is there any national research centre?	10

	TAXONOMY - WEIGHTAGE	
RESEARCH PROGRAM AND FUNDING AVAILABILITY - 100		
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Ongoing Government funded Research programme - 20	Is there any ongoing Government funded Research programme?	20
Government and private funded pro- gramme - 20	Is there Government and private funded Research programme?	20
Organization of seminar /colloquium	Is the Government encouraging the holding of colloquium?	10
to motivate funding agencies - 20	Is the Government arranging colloquium on DH?	10
Health Data availabi- lity - 20	Is the Government financing Health data availabi- lity?	20
Research infrastruc- ture - 20	Is the Government financing DH research infrastructure?	20
TAXONOMY - WEIGHTAGE RESEARCH PROGRAM AND FUNDING - DEVELOPMENT STRATEGY - 100		
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Increasing Govern- ment funding for	Does the Government have plans to increase the fund for DH research and Development?	25
Research and Deve- lopment field - 50	Does the Government promote Biomedical and Bio- tech research as per Ehealth vision?	25

Encouraging Resear- chers to come up with innovative projects - 30	Does the Government have a plan to encourage the researchers?	30
Motivating funding agencies - 20	Does the Government have plan to motivate funding agencies for DH?	20
	TAXONOMY - WEIGHTAGE	
RESEARCH PROG	RAM AND FUNDING - CAPACITY BUILDING - 100	
INDICATORS - WEIGHTAGE	QUESTIONS	WEIGHTAGE
Developement of national infrastrucutre for DH research - 50	Does the Government have any plan to develop research infrastructure?	50
Promotion of regu- lated framework for Health data sharing for clinical research - 30	Does the Government have a vision for health data sharing?	30
Increasing scho- larships in DH - 20	Does the Government have plans to increase the research scholarship?	20
	TAXONOMY - WEIGHTAGE	
LEGAL RULES - READINESS - 100		
INDICATORS - WEIGH- tage	QUESTIONS	WEIGHTAGE
Data Protection Law/	Is there any existing Data Protection Law?	15
Data Privacy policy/ Cyber Security - 45	Is the data protection law implemented throughout the country?	10
	Is the law up to date as per global standard?	5
	Is there any existing Cyber security Law/strategy?	15
Policy on apps/ Me- dical device software	Is there any Medical Device regulation?	15
License renewal - 35	Is there any medical device registration process?	10
	Is there any policy/law on app/medical software?	10
Strategy of Regulatory affairs - 15	Is there any strategy for regulations of pharma products?	10
	Is there any strategy for regulations of other thera- peutic products?	5
Policy for allowing private digital health apps - 5	Is there any policy for allowing private DH apps?	5

	TAXONOMY - WEIGHTAGE	
LE	GAL RULES- AVAILABILITY - 100	
INDICATORS - WEIGH- TAGE	QUESTIONS	WEIGHTAGE
National agency monitoring the law	Is there a National agency monitoring the policy enforcement?	15
enforcement - 30	Is there a committee for medical devices?	15
Dedicated bodies to monitor rules/acts locally/regionally - 15	Is there any dedicated workforce for enforcement in state/local/municipal level?	15
Updated software / certification to ensure security and privacy - 15	Is there any updated software/certification to ensure security and privacy?	15
Key data hub manage- ment services - 15	Are there any key data hub management services?	15
Cyber Security Centre to ensure data secu- rity - 25	Is there any national cyber security centre?	25
LEGAL RULES- DEVELOPMENT STRATEGY - 100		
INDICATORS - WEIGH- TAGE	QUESTIONS	WEIGHTAGE
Strategy to stren- gthen/reform rules	Is the Government interested to strengthen/amend the rules for data protection?	25
gthen/reform rules and regulations and legal framework for		25
gthen/reform rules and regulations and	the rules for data protection? Does the Government have plan to strengthen the	
gthen/reform rules and regulations and legal framework for better healthcare	the rules for data protection? Does the Government have plan to strengthen the ethical use of technology in healthcare? Is the Government interested to create a safe and	15 15 15 15 25 WEIGHTAGE 25 20
gthen/reform rules and regulations and legal framework for better healthcare	the rules for data protection? Does the Government have plan to strengthen the ethical use of technology in healthcare? Is the Government interested to create a safe and strong cyber infrastructure? Is the Government interested to strengthen the legal	20 20 20
gthen/reform rules and regulations and legal framework for better healthcare	the rules for data protection? Does the Government have plan to strengthen the ethical use of technology in healthcare? Is the Government interested to create a safe and strong cyber infrastructure? Is the Government interested to strengthen the legal framework for ehealth? Is the Government interested to make a comprehen-	20 20 20
gthen/reform rules and regulations and legal framework for better healthcare service - 100	the rules for data protection? Does the Government have plan to strengthen the ethical use of technology in healthcare? Is the Government interested to create a safe and strong cyber infrastructure? Is the Government interested to strengthen the legal framework for ehealth? Is the Government interested to make a comprehensive guide for e-health apps?	20 20 20
gthen/reform rules and regulations and legal framework for better healthcare service - 100	the rules for data protection? Does the Government have plan to strengthen the ethical use of technology in healthcare? Is the Government interested to create a safe and strong cyber infrastructure? Is the Government interested to strengthen the legal framework for ehealth? Is the Government interested to make a comprehensive guide for e-health apps? Taxonomy - Weightage	20 20 20 20 15
gthen/reform rules and regulations and legal framework for better healthcare service - 100	the rules for data protection? Does the Government have plan to strengthen the ethical use of technology in healthcare? Is the Government interested to create a safe and strong cyber infrastructure? Is the Government interested to strengthen the legal framework for ehealth? Is the Government interested to make a comprehensive guide for e-health apps? Taxonomy - Weightage gal rules- Capacity Building - 100	20 20 20 15 Weightage

	Taxonomy - Weightage	
Literacy - patient+ workforce - Readiness - 100		
Indicators - Weigh- tage	Questions	Weightage
Education of the rural/ AGED people to use digital health services - 30	Is there any programme to educate rural/ aged people?	30
Plan to make skilled	Is there training programme for DH workforce?	35
and trained digital healthcare workforce - new curriculum, faculty positions for DH - 70	Is there certificate course/curriculum for DH workforce?	35
	Taxonomy - Weightage	
Literacy	- patient+ workforce - Availability - 100	
Indicators - Weigh- tage	Questions	Weightage
User manual for digital health services - 50	Has the Government made a user-friendly manual?	50
Availability of certi- fication programme for digital healthcare workforce - 50	Is there available certificate course/curriculum for DH workforce?	50
Literacy - pati	ent+ workforce - Development Strategy - 100	
Indicators - Weigh- tage	Questions	Weightage
Initial digital health awareness prog 50	Is there any Gov organised DH awareness pro- gramme?	50
Making adaptable workforce - 30	Is there any plan to create adaptable workforce?	30
Strengthen Gender Parity - 20	Is the Government focusing on gender parity?	20
Literacy - pa	atient+ workforce - Capacity Building - 100	
Indicators - Weigh- tage	Questions	Weightage

Digital Health Taxonom

Strengthened digital	Does the Government produce user-friendly-app?	35
literacy - smartphone use, stable internet facility, user friendly apps - 70	Does the Government have plan to strengthen digital literacy in rural area?	35
Increased use of Mobile Apps/digital portals - 30	Does the Government campaign for the use of DH portals?	30



