

Primary Health Care Telemedicine in a Developing Country

A Case Study: Grabouw Community Health Centre

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Kuntalp and Akar (2004) reported that people living in underserved areas struggle to access timely and quality medical care. Residents of these areas often have substandard access to specialized health care, primarily because specialist physicians are more likely to be located in urban areas of concentrated population. As a result, the patients living in rural areas have to travel to big cities where large and specialized medical complexes are located. Because of recent innovations in computing and telecommunications technology, many elements of medical practice can now be accomplished even when the patient and healthcare provider are geographically separated, p. 117. South Africa has a large distribution of Primary Health Care Facilities. A large majority of the South African population utilize these Primary Health Care Facilities.

The concept of telemedicine in South Africa has the potential to ensure the provision of specialist medical care in rural / remote areas. Other benefits include cost, travel and time savings. The other benefit to which no value can be equated is the quality of life of South African citizens could improve as result of telemedicine.

This project was initiated as a result of the Innovation Fund, National Research Foundation South Africa, granting funding to design and develop, a Primary Health Care Telemedicine Workstation. The potential users of the workstation would include clients and health professionals from the public sector in South Africa and Southern African Developing Countries. A telemedicine system was designed and placed at Grabouw Community Health Centre for staggered periods over a time period of two years. During this period a wealth of experience was gained regarding the implementation and sustainability of Telemedicine. This presentation will share experiences which include: (i) how to enhance usage; (ii) implementing telemedicine in resource poor settings; (iii) ensuring sustainability and (iv) how to manage trouble shooting in rural / remote clinics.

References

Kuntalp, M., Akar, O. (2004). A simple low-cost Internet-based teleconsultation system that could effectively solve the health care access problems in underserved areas of developing countries. *Computer Methods and Programs in Biomedicine*, 75, 117 – 126.