MOD Department of Military Health Services

Recommendations regarding the questionnaire of BM Office of Outer Space Affairs

1. There is no existing or planned formal cooperation or other institutional arrangement concerning space activities.
2. Recommendations:

   The principles and coordination for the personnel, materials and service provision should be determined for space-based global health support. An insurance fund should be established for all people in need, in order to provide uninterrupted and accessible healthcare services all over the world. In addition, there is a need for health service support with increased accessibility as a communication network infrastructure over space. On behalf of UN, there will be a need to establish coordination and principles on a platform and distribute responsibilities and manage standards. Personnel, material and service management should be planned with a strong health information system. Service management should appeal to both the patient and healthcare professionals in healthcare delivery, such as wearable biosensors, telehealth, intelligent decision support systems, performance and payback voices.

3. We do not have a standing policy-based environment and governance mechanism in place and planned for the removal of borders for global health purposes. For the purpose of sharing and processing health data over global technologies, firstly, legal and administrative arrangements need to be made. It is a necessity to be able to gather health data for scientific studies, provided that the principles especially in terms of a separated military and public privacy and ethical approvals of countries are conciliated.
4. The issues of providing healthcare support with an information system on international platforms on open data sharing and participatory approaches for the development and improvement of global health information are still being discussed and improvements continue.
5. Integration of the information infrastructure for the management of health systems through geotagging is in our medium- and long-term plans.
6. There is no existing or planned intra-sector coordination and cooperation for efficient international, regional, national and sub-national competence building activities in the application of space science and technology in the field of global health.
7. There is no existing study on this subject.
8. There is no existing and planned initiative on our behalf, to incorporate space-based data into global health decision making processes more comprehensively and to harmonize and share this data. Should it is decided on segregated privacy, ethical approvals and protocols, integration in our area of responsibility can be supported.
9. Space technologies can support the planning and management of emergency situations on an integrated platform where remotely manageable systems (Da Vinci, Biosensors), communication systems (satellite, drone) required by the tele-health systems and flying aircraft systems (drone, airplane, helicopter) are used together.
10. There is no provided reference document on this subject.

11.
   a. Space should be used for the communication network infrastructure that will support the communication infrastructure in the field of telemedicine and telehealth. For example, strengthening of regional communication with VPN and encrypted fast band support via satellite, drone role etc.
   b. Tele-epidemiology and environmental health: With flying aircraft that can analyse through visual and biosensors, water condition, environmental pollution, biological and chemical risk analysis can be made.
   c. Life on Space Units: we have no contribution.
   d. Disaster and health emergencies: It is considered to be life-saving in emergencies when tele-protection systems supported by reinforced communication systems and flying spacecraft are used.
   e. With the developments in space technologies, attention should be paid to the necessary structural and technical regulations for the different wave models used in communication to have minimal impact on human health.