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Statement submitted by International Planned Parenthood Federation, a non-governmental organization in consultative status with the Economic and Social Council*

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

^{*} The present statement is issued without formal editing.





Statement

About the International Planned Parenthood Federation (IPPF): A leading advocate of sexual and reproductive health and rights (SRHR) and a global service provider, the International Planned Parenthood Federation (IPPF) is a locally owned, globally connected federation which works through Member Associations and collaborative partners in a total of 142 countries to empower women, men and young people in the most vulnerable situations to access life-saving services and programmes, and live with dignity. We have had general consultative status with the Economic and Social Council since 1973.

The 67th session of the Commission on the Status of Women will consider as its priority theme 'Innovation and technological change, and education in the digital age for achieving gender equality and the empowerment of all women and girls'. This will be an opportunity to discuss how technology can be used to close the gender gap while empowering women and girls socially, politically, and economically, as well as the opportunities and risks that arise through technological advances, innovation and digitalization in terms of advancing gender equality and respecting, protecting and fulfilling the human rights of women and girls.

Background

Through its expansion, the use of digital technology has enabled a multitude of opportunities for the realization of sexual reproductive health and rights. Such opportunities range from ensuring increased access to information about sexual reproductive health and rights online, to tracking specific Sexual and Reproductive Health (SRH) needs and increasing access to care and services. Both specific Sexual and Reproductive Health- and general healthcare-related applications (apps), as well as existing digital platforms such as Facebook, Twitter, WhatsApp and Google, are important sources of sexual reproductive health and rights information and access to care.

During the Covid-19 pandemic, the need for a digital infrastructure to support access to equal information and care related to sexual reproductive health and rights, also became even more evident. Shortage of commodities as a result of the pandemic disproportionately affected women and girls and underserved or marginalized groups, while increased sexual reproductive health and rights-related needs for communities in lockdown were increasing - from sexual and gender-based violence (SGBV), unmet needs for contraception, restricted access to safe and comprehensive abortion care, to compromised Sexual and Reproductive Health services. As a result, the rise of digital technologies to support self-care initiatives, also increased during the pandemic and telemedicine solutions became crucial for access to abortion, HPV- and STI-testing, as well as maternity care. Using digital technologies to ensure sexual reproductive health and rights, can also offer cost effective alternatives to reach certain target groups. The market for digital Sexual and Reproductive Healthcare and sexual reproductive health and rights-information is growing quickly and both public and private actors have launched a vast number of mobile health (mHealth) initiatives. This growing interest, along with promising opportunities to expand access to information and care related to sexual reproductive health and rights. However, this increased demand and interest necessitates a greater understanding, knowledge and insights about digital technologies concerned, in order to guarantee the rights and wellbeing of women and girls in all their diversity, including those who face multiple and interesting forms of discrimination, so as to ensure their efficient and safe use as well as upholding the principle of leaving no one behind.

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There are an array of opportunities and risks that the advancement of technology, innovation and digitization brings in terms of gender equality, women and girls' human rights and empowerment. Important areas for consideration include, but are not limited to:

The right to privacy, confidentiality and informed consent, are cornerstones of sexual reproductive health and rights and in safeguarding bodily autonomy.

It is of utmost importance to understand how digital technologies can be used to provide greater privacy and anonymity for users, yet also be mindful of how users of digital technologies can have their privacy protected. Sharing information online or through an app which protects the user's identity, can provide more privacy and allow users to choose when, how and what content they share about themselves. In this manner, digital technologies can overcome barriers to access high-quality health care, which are encountered in health systems where there may be a real or perceived provider bias or absence of confidentiality. In such a manner, 'gate keepers' can be circumvented and traditional knowledge asymmetries between healthcare providers and patients, can be decreased. In this regard, we are facing endless opportunities to ensure that universal health coverage and the right to health for all are a prospected of the very near future. However, there is often an inherent information asymmetry between digital technology providers and users. This is especially the case in terms of how digital technology is used to generate and distribute content, as well as collect, store and use personal data. There have for example been several accounts where apps that track menstruation, fertility and other sensitive data related to Sexual and Reproductive Health, have shared data with major digital technology providers such as Facebook and Google, without the users' knowledge. Sharing of sensitive data can be especially problematic and potentially dangerous in contexts where for example certain sexual orientations, practices or healthcare procedures, are criminalised. Sharing, selling or leaking user data which discloses a person's HIV status or a terminated pregnancy, could incur criminal liability in certain contexts. This is particularly important to underscore as digital technologies are transnational in nature, but may not be developed with consideration of national criminal laws.

The role of social media

Online groups found on social media, can also be used to create space for persons to interact with each other for the purposes of exchanging healthcare experiences and to offer support and create solidarity and movement building. Increased digital access to Sexual and Reproductive Healthcare and sexual reproductive health and rights-information, can be of critical importance for persons who are not reached by the public health- and education systems. It can also be important in contexts where laws, norms or stigma do not allow for open discussions on sexual reproductive health and rights. Sharing information online or through an app which protects the user's identity, can provide more privacy and allow users to choose when, how and what content they share about themselves. In this manner, digital technologies can overcome barriers to high-quality care, which are encountered in health systems where there may be a real or perceived provider bias or absence of confidentiality. However, technology providers do not necessarily have any commercial incentives to curb the spread of inaccurate sexual reproductive health and rights information on social media. Regulation in this area is still weak and platforms such as Facebook, Google and WhatsApp can also be manipulated to deliberately promote misinformation about sexual reproductive health and rights.

Artificial Intelligence (AI)

At the centre of many digital technologies used for the purposes of sexual reproductive health and rights, lies complex algorithms that use machine learning to

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extract user data and make predictions about user behavior, determine diagnoses/care needs or to target advertising to the user. It may however be difficult to obtain information about how such algorithms operate and what makes them produce certain results. Such a lack of transparency may sometimes simply be due to the fact that the algorithmic model may be difficult to explain to a lay user. In other cases, the algorithmic model may be protected by intellectual property rights and the provider may therefore not be required to disclose the information to users. Apps that use sophisticated forms of artificial intelligence can produce highly unpredictable and unstable results. This raises questions about user and patient safety, especially in cases when there is little transparency about how an algorithm works. Privacy related risks connected to sexual reproductive health and rights, but also general privacy concerns, have been identified and debated in online media. As applications – both sexual reproductive health and rights- or health-related and more generic applications - are collecting large amounts of data, insecurity related to data protection has become a concern for digital rights groups both on a general basis and specifically related to common health applications.

The right to information

The right to comprehensive information, including about sexual and reproductive health, is firmly rooted in basic international human rights standards. Yet the extent to which everyone has access to information about sexual reproductive health and rights through digital technologies, varies greatly, creating a digital divide both between and within countries. Equitable use of- and access to digital technologies, are critical factors to consider in relation to the right to information about sexual and reproductive health. Structural inequalities, discrimination and gender stereotypes, reduce opportunities for women and girls in all their diversity, to have equal access to digital platforms. The information available online is governed by digital providers and governments to a large extent. Online educational sexual reproductive health and rights content may for example be arbitrarily classified as sexually explicit on some digital platforms and/or be censored by governments. Sexual reproductive health and rights content may also be deprioritized by search engines such as Google if it does not rank well with its underlying algorithm. In this respect, governments and digital providers can be said to act as moral gatekeepers to the information available. Users are therefore, to a large extent, exposed to norms of sexual behaviour and health, decided by digital technology providers, rather than in line with international commitments or as defined by technical health guidelines. Content related to sexual reproductive health and rights found online may therefore be lacking elements that are crucial to uphold a holistic definition of sexual reproductive health and rights. In addition, online platforms and communities have started providing information about sexuality where young people can connect with peers, learn about relationships, intimacy and identity and ask questions anonymously. Young people need to know where they can get scientifically accurate and evidence-based information because many websites are not scientifically accurate, which can have profound implications if they spread misinformation.

Key recommendations and the way forward

Digital technologies have a great potential to enhance the realization of sexual reproductive health and rights. In order for women and girls in all their diversity to have equal opportunities to safely and meaningfully access, use, technology and innovation, the International Planned Parenthood Federation calls on governments and corporations, to ensure gender-transformative actions to embed transparency and accountability in digital technology and expand inclusive digital economies. More specifically,

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- Take into account the rights to health and privacy, and the principles of confidentiality and informed consent, as cornerstones of sexual reproductive health and rights and in safeguarding bodily autonomy. These must be upheld in any sexual reproductive health and rights-interventions that use digital technologies including as a means to promote equitable, affordable universal health coverage (UHC).
- Commit to accelerate efforts to scale up comprehensive sexuality education in primary and secondary schools and make comprehensive sexuality education (CSE) part of the government policy on education and include it into the mandatory curriculum.
- Providers and governments must ensure that safety of users of digital technologies for sexual reproductive health and rights are of utmost priority. Users should not put at risk of criminal liability in the case that data is shared or leaked without their informed consent and knowledge.
- Expanding access to digital sexual reproductive health and rights technologies should not be carried out at the expense of offline efforts, but rather as a complement, as access to digitalisation and technology varies greatly between and within countries.
- Interventions using digital technologies should take into account that a lack of transparency of how algorithms work, may have an effect on the desired health outcomes.

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