

● **DIGITAL INNOVATION & TECHNOLOGIES ARE AN ASSET TO THE OPERATIONALIZATION OF THE RIGHT TO HEALTH & THEY PRESENT MULTI-FACETED EXPERIENCES, NOT ALL GOOD & NOT ALL BAD**

● **THE GROWTH OF DIGITAL INNOVATION HAS BEEN RAPIDLY REDEFINING & RESHAPING THE RIGHT TO HEALTH & IT HAS STRENGTHENED THE ABILITY OF SOME GOVERNMENTS TO RESPECT, PROTECT & FULFILL THIS HUMAN RIGHT BY ENSURING THAT ALL HEALTH FACILITIES, GOODS & SERVICES ARE AVAILABLE, ACCESSIBLE, ACCEPTABLE & OF QUALITY**

--- **DIGITAL TECHNOLOGIES HAVE BEEN USED EXTENSIVELY TO MANAGE THE HEALTH NEEDS PRESENTED BY THE COVID-19 PANDEMIC**

● **TELEMEDICINE, TELEHEALTH & OTHER DIGITAL FORMS OF HEALTHCARE SOLUTIONS OFFER GREAT POTENTIAL FOR SCALING UP IN TERMS OF PHYSICAL ACCESSIBILITY & CAN IMPROVE THE ACCESSIBILITY TO MOBILE DIAGNOSTICS, HEALTHCARE WORKERS FOR SCREENING & ADVICE, DELIVERY OF THERAPEUTICS FOR EXAMPLE**

● **REGARDING ECONOMIC ACCESSIBILITY, TYPES OF REMOTE HEALTH CARE CAN BE LESS EXPENSIVE THAN IN-PERSON HEALTH CARE & CAN LOWER THE DIRECT & INDIRECT COSTS OF CLINIC VISITS, TRAVEL OR UNPAID SICK LEAVE**

● **ACCESSIBILITY OF INFORMATION THROUGH DIGITAL TOOLS SHOULD NOT IMPAIR THE RIGHT TO HAVE PERSONAL HEALTH DATA TREATED WITH CONFIDENTIALITY**

● **IMPROVED DATA CAPTURING THROUGH DIGITAL TOOLS CAN FACILITATE IMPROVED TREND ANALYSIS, EMERGING HEALTH ISSUES RESOURCE ALLOCATION, COORDINATION & ACCOUNTABILITY FOR PROGRESSIVE REALIZATION OF THE RIGHT TO HEALTH**

--- **AT THE SAME TIME, THE RISE OF DIGITAL HEALTH INNOVATION & TECHNOLOGIES POSES UNPRECEDENTED RISKS TO THE RIGHT TO BE FREE FROM ARBITRARY OR UNLAWFUL INTERFERENCE WITH ONE'S PRIVACY**

● **DIGITAL TOOLS CAN PERPETUATE RACISM, SEXISM, ABLEISM OR DISCRIMINATION BASED ON SEXUAL ORIENTATION OR GENDER IDENTITY AMONG OTHERS IN CODE, DESIGN & APPLICATION**

--- **I SUPPORT THE CALL FOR "DESIGN JUSTICE", IN WHICH TECHNOLOGY IS DESIGNED THROUGH DIVERSE & INCLUSIVE PROCESSES TO MEET DIVERSE LOCAL NEEDS**

● **THE ADOPTION OF TECHNOLOGIES SHOULD NOT LEAD TO DIVESTMENT IN UNDERLYING DETERMINANTS OF HEALTH, MEDICAL FACILITIES & SERVICES, PARTICULARLY THOSE SERVING THOSE IN VULNERABLE SITUATIONS**

● **THE GLOBAL DIGITAL DIVIDE MIRRORS BROADER SOCIOECONOMIC INEQUALITIES IMPACTING AVAILABILITY: AFFORDABILITY GAPS BETWEEN & WITHIN COUNTRIES, BETWEEN GENDERS, LACK OF ACCESS TO HARDWARE BETWEEN AGE GROUPS, ACROSS SOCIAL GROUPS & DIFFERENT LEVELS OF DIGITAL LITERACY**

● **THE USE OF DIGITAL TECHNOLOGIES HAS ALLOWED FOR THE EXPANSION OF SEXUAL & REPRODUCTIVE HEALTH SERVICES & EXPANDED ACCESS TO MORE REMOTE AREAS & UNDERSERVED COMMUNITIES, PARTICULARLY DURING THE COVID-19 PANDEMIC**

● **A RIGHTS BASED APPROACH MUST ENSURE THE MEANINGFUL PARTICIPATION OF CIVIL SOCIETY & COMMUNITIES IN NATIONAL & GLOBAL GOVERNANCE OF DIGITAL HEALTH, INCLUDING THE PARTICIPATION OF YOUNG PEOPLE**

--- **THERE MUST BE INVESTMENT IN IMPROVING LITERACY REGARDING THE ENTIRE DIGITAL PIPELINE, & THAT PUBLIC EDUCATION MUST BE UNDERTAKEN TO ENSURE RIGHTS-HOLDERS ARE INFORMED ABOUT THEIR RIGHTS**



DIGITAL INNOVATION TECHNOLOGIES & THE RIGHT TO HEALTH

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