

Thank you chair for this opportunity to MMI to present a statement on agenda item 4.4 that speaks to the document EB 142/20. The statement is supported by PHM.

We would like to share some of our observations regarding the use of mHealth as a tool for advancing public health goals. WHO's strategy on mHealth should rely on strong national healthcare systems. mHealth should not be seen as a substitute for strong primary care based services on the ground. Neither should it be viewed as a cost cutting measure, where services by trained health workers are replaced by a reliance on mHealth.

Especially in LMICs, there are multiple challenges to the utilization of mHealth, such as availability of reliable mobile phone networks, costs of and access to electricity, cost of subscribing to a mobile network, etc. These are in addition to existing challenges facing health systems and the physical environment. EB 142/20 notes that "in many such countries, people are more likely to have access to a mobile telephone than to clean water, a bank account or electricity". This is not just an opportunity, it is also indicative of a distorted paradigm of development.

We would also like to share our concern that EB 142/20 envisages a close partnership with ITU. ITU's partners include a range of private actors who would have a potential conflict of interest as regards work on mHealth.

mHealth also includes collection of personal data and its storage in digital form. Issues related to data privacy are a concern that needs to be addressed.

Digital technologies have the potential to transform many fields of human activity, including healthcare. However, their impact can be predictable and beneficial only if there is strong public control on the use of such technologies.