

**INTERSESSIONAL PANEL OF THE UNITED NATIONS COMMISSION
ON SCIENCE AND TECHNOLOGY FOR DEVELOPMENT (CSTD)**

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Contribution by UN Women

to the CSTD 2020-2021 priority theme on “Using science, technology and innovation to close the gap on Sustainable Development Goal 3 on good health and well-being”

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PRIORITY THEME 2: Using science, technology and innovation to close the gap on SDG 3, good health and well-being

United Nations Commission on Science and Technology for Development (CSTD)

Dear international organization/UN entity/agency,

The CSTD 23rd annual session selected “Using science, technology and innovation to close the gap on SDG 3, good health and well-being” as one of the priority themes for its 24th session (2020-21 period).

Science, technology, and innovation (STI) can play an important role in strengthening the capacity of all countries, in particular developing countries for early warning, risk reduction and management of national and global health risks as described in SDG 3D. Data science, biomedical science and engineering and other technologies can broadly transform health and medicine and specifically support countries and regions in their responses to emerging health crises as well as in their preparedness for future threats. Beyond specific technological innovations, STI policy advice, diplomacy, and international cooperation also play a prominent role in current and future infectious disease preparedness and response. The theme will explore experiences about using STI to strengthen health outcomes as well as approaches to regional and global STI cooperation in this field.

The CSTD secretariat is in the process of drafting an issues paper on the theme to be presented at the CSTD inter-sessional panel meeting. In this context, we would like to solicit inputs from international organizations, UN entities and agencies on this theme. We would be grateful if you could kindly answer the following questions based on your organization’s work at the global level.

1. Can you give examples of international projects/policies aimed at using science, technology, and innovation for early warning, risk reduction and management of national risks? What are the main challenges confronted while trying to implement these projects/policies?

UN Women supports strategic opportunities for adolescent girls and young women to engage in key agenda-setting fora, using mobile technologies. In 2015-2016, UN Women’s “Engagement + Empowerment = Equality” initiative in Malawi, Kenya and Uganda mobilized over 1,000+ adolescent girls and young women champions, including 250 girls living with HIV. Young women were involved in the design and validation of national assessments on the status of HIV amongst adolescents and youth. The initiative included online and face-to-face mentoring, peer support, including WhatsApp support groups and social media outreach to thousands of other young women and girls ([IPPF 2016](#)). The potential of innovative solutions offered by digital technologies should be further explored to mobilize and provide young women and adolescent girls with comprehensive HIV information, particularly in rural areas.

In 2019, UN Women convened hackathon in Tajikistan to generate innovative ideas to support women living with HIV. The hackathon brought together more than 60 HIV experts, IT specialists, and representatives from the Tajikistan Network of Women Living with HIV, youth organizations, government agencies, the media and international NGOs. As a result of a competition, three proposals were identified for further development: a website to mitigate stigma and discrimination against women living with HIV in employment, a start-up project to improve professional skills and personal development of women affected by HIV, and a mobile application to promote access of women living with HIV to healthcare, legal, psychological and social services ([UN Women 2019](#)).

2. Could you share specific examples, projects or initiatives that have used frontier technologies (e.g., AI, drones, blockchain, 3D printing, etc.) or other forms of innovation in general in addressing the Covid-19 pandemic?

In Ethiopia, Mozambique, South Africa, Tanzania and Zimbabwe, UN Women has increased knowledge and capacity of women living with HIV to prevent COVID-19, including through disseminating accurate information via community radio, social media and online peer support groups. In Guatemala, UN Women conducted a social media campaign aimed at spreading accurate and up-dated information about COVID-19, targeting women living with and affected by HIV. Messaging includes encouraging women to continue on HIV treatment and where they can access HIV care and services for survivors of violence.

UN Women continued its efforts to promote gender equality in health systems and infrastructure for the improvement of sexual, reproductive, maternal, newborn, child and adolescent health services. For example, in Liberia, through engagement with the H6 partnership, women were trained as solar engineers and equipped 37 rural maternity waiting homes and labour rooms with solar lighting systems (solar suitcases) as a reliable source of portable power system. The solar power provides much needed electricity in emergency care – saving lives. Women’s participation in communities as promoters of health and well-being can be the innovation to transform societies.

UN Women mainly support community led innovations and responses by investing in women’s organizations to innovate solutions suited for their own communities. In the Zika response UN Women supported “situation rooms” where women community leaders met to discuss the impact and suggest policy solutions curb the epidemic.

UN Women in Jordan continued to provide direct cash-assistance to Syrian refugee and vulnerable Jordanian women through its blockchain technology in partnership with the World Food Programme. The beneficiaries of UN Women’s support, through the cash assistance have been using funds to purchase medicine and medical supplies for themselves and their dependents. In some cases they have saved the funds to facilitate private-based medical services for their dependents when it is not covered by the medical facilities in the camp. The BlockChain technology is under WFP’s umbrella for cash-based intervention programmes. UN Women partnered with WFP to tailor and customize the system specifically for the UN Women’s cash for work programmes.

2. Can you provide examples of policies/projects/initiatives aimed at strengthening health innovation systems at the global level? For example, how does your organization support the building of innovative capabilities through investments in R&D and human capital? What projects are in place to stimulate healthcare innovation and effectively address safety, ethical and other concerns?
3. Could you share case studies of international cooperation that have strengthened health capacities, particularly in developing countries? Can you provide success stories involving global cooperation in academic research networks, STI diplomacy, or initiatives to make healthcare innovations accessible for all?

The H6 Partnership (UNFPA, UNICEF, UNAIDS, UN Women, World Bank and WHO) is a collaboration for Sexual, Reproductive, Maternal, Newborn, Child and Adolescent Health. The programme has increased access and uptake to SRMNCAH services through innovations of removing barriers to such services. The programme implemented innovations to address programmatic barriers through local solutions, while also addressing gender inequalities and the root causes of high mortality and morbidity. See the [Joint H6 Report 2012-2019](#).

UN Women COVID19 [Dashboard](#) provides data by sex on the health impact of COVID19 produced in collaboration with WHO as well as 29 gender-related SDG indicators in 10 policy priorities needed to response to COVID19.

4. Could you suggest some contact persons responsible for projects/policies, related technologies and international collaboration in this context as well as any experts dealing with projects in this area? We might contact them directly for further inputs or invite some of them as speakers for the CSTD inter-sessional panel and annual session.

Academic: Prof. Evelyne Yehudit Bischof (prev. Biskup); Associate Professor; Shanghai University of Medicine and Health Sciences | Shanghai, PRC | cell: +86 150 0086 4674 | ewelinabiskup@yahoo.de; Research physician University Hospital of Basel | Petersgraben 4 | 4051 Basel | Switzerland | *focuses on gender biases in clinical trials related to covid19*

5. Do you have any documentation, references, or reports on the specific examples on the priority theme in your organization?

[Joint H6 Report 2012-2019](#).

Access to health care services:

<https://www.unwomen.org/en/news/stories/2017/7/feature-maternal-health-gets-a-new-boost-in-liberia>

Please send your responses and any further inputs on the theme to the CSTD secretariat (stdev@unctad.org) by 7 October 2020. We look forward to receiving your valuable inputs.

Sincere Regards,

CSTD secretariat