

Technological Innovations and Human Rights

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ABSTRACT

Although human rights in general and the right to a healthy life are very important in Turkey, as in the whole world, they can sometimes be violated due to economic, cultural, bureaucratic or legal reasons. The main problem of this research is that the use of advanced technology in health leads to grievances in some cases as well as the benefits it provides. In this study, it is aimed to reveal the effects of perceiving the data collected in health from time to time as a risk. Qualitative data collected by making oral history on the basis of narrative revealed that individuals stay away from health services because of the concern that their privacy decreases as digitalization in health increases. In order to reduce the risk of risking the health of especially disadvantaged groups, some suggestions have been made based on interdisciplinary studies, especially providing anonymity in online health services.

Keywords

Health, human right, Technology, Protection of personal records.

Introduction

Advanced technology is widely and effectively used in many fields, especially in health and education [1]. However, it is also observed that hesitations are increasing, especially when it comes to artificial intelligence. For example, even the information that students started to do their homework using chatGBT in education was enough to make teachers nervous. Likewise, the fact that a lot of information about our body is open to uncontrolled use in the field of health is not only disturbing, but also distracts people from using health services.

The protection of all personal data, not just health, is guaranteed in the 108 numbered convention of the Council of Europe by saying “concerning the protection of individuals against automatic processing of personal data” [2]. In Turkey, “Regulation on Personal Health Data was published in the Official Gazette in 2019 [3]. According to Article 136 of the Turkish Penal Code (TCK), illegally recording all personal data is punishable by imprisonment

from one year to three years. In addition, this penalty cannot be converted into a judicial fine [4]. In addition, according to Article 47 of the Decree-Law, health data is of a private nature. Based on this decree, his son, who filed a lawsuit against the newspaper that wrote that his father had cancer, sentenced the newspaper to a financial penalty of 125,000 TL. In his defence, the lawyers claimed that he did not know that he was being treated for cancer, but that he learned from the phones of his friends who saw the news in the newspaper. Later, the lawyers argued that he was withdrawn from the fear of death and ended the treatment, thus the person was a victim.

In addition, there are many news that are reflected in the media. For example, a lawsuit has been filed against a health institution as a result of sharing a child's health data with a parent who does not have custody. Similarly, it was found unfair to transfer the health data of an employee to the defendant public institution upon request to form the basis for an administrative lawsuit [3]. It is pleasing that there are important studies on the subject in Turkey. Some studies, especially by health administrators and lawyers, are stimulating [5-7].

Problem and Aim of the Research

In this context, the problem of the research is the digitalization of data collected using advanced technology in health, that is, the construction of a central data system makes it difficult to protect personal health data. The main purpose of this study is to seek an answer to the question of "what are the consequences as well as reactions to the use of health services with various reservations".

Method

In this qualitative study, brief health information collected from individuals was analyzed by using the narrative (oral history) technique [8]. Names have been changed to maintain anonymity while remaining confidential.

Findings and Discussion

AHMET

He is a 40-year-old person with AIDS who works in the banking sector. He comes from a middle-class family. Disclosure is not easy as negative tendencies against such diseases are very common and dominant in Turkey. He thinks that he caught the disease during one of his trips abroad. He tries to obtain his medicines when he goes abroad. He is worried that if he goes to the hospital in Turkey, he will be registered in the system and will be easily deciphered. In fact, he suffers from layered stigma because he hides his illness from both his family and workplace [9].

AYŞE

She is a 28-year-old young woman. She has some dermatological problems, especially painful discharge, in the gynaecological part of her body. She went against the taboo of women not having sexual intercourse outside of marriage, especially in traditional sections of Turkey. She is concerned that this information will go into her health records. She is trying to make do with the information she learned from the internet. She once prescribed antibiotics from the general practitioner at the health centre, saying she had a urinary tract infection. She almost does not want to use Health services. She is stressed both because she cannot be treated and because she thinks she has no chance of getting married.

MEHMET

He is 45 years old and is a middle level manager in the private sector. He has a family history of high blood pressure and diabetes. However, he hides his status for two reasons. One of them is that health records narrow the insurance coverage and increase the premium amount. The second is the prevention of promotion opportunities in the workplace based on health problems. He tries to meet all his needs from his spouses and friends. He perceives digital health records as the biggest threat in his life. Since his brothers have the same problems, he tries to manage by applying the treatments given to them.

OLGA

She is a 35-year-old immigrant woman who wanted to hide her

pregnancy from her partner and his conservative family because of the concern that she would be harmed. The main reason for this is the fear that her child will be taken away from her. That's why she didn't want her pregnancy to go into the official records. As a migrant and non-residence worker, she tried to benefit from illegal services because her health-seeking opportunities were very limited. Later, she could not bear this situation and chose the path of having an abortion. Later, she returned to her country saddened by the tensions created by her inability to manage the pregnancy process that would carry her to become the mother she wanted so much.

Conclusion

The widespread use of artificial intelligence in health services brings the risk of personal health data uploaded to cloud and machine learning systems to be deciphered at an undesirable place and time. This may lead individuals not to use health services and thus to stay away from early diagnosis and treatment opportunities. Especially during the Covid 19 Pandemic, as a result of the mandatory collection of personal data for the purpose of tracking vaccines and their storage in central data banks, all health information of individuals in Turkey has become accessible in a way. For this reason, it was reflected in the media where even those who refused to be vaccinated.

Unlawful use of personal data is prohibited worldwide. On the other hand, it is unfortunately not sufficient to make only legal regulations for the protection of personal health information collected through digital systems. As a matter of fact, Türkiye took the necessary steps in this regard in 2019. As well as health institutions, the personnel working in these institutions should also receive sensitivity training on human rights. In order to persuade individuals who stay away from services at the risk of losing their health, there is a need for all segments, especially non-governmental organizations, to be more sensitive.

Utmost attention should be paid to the elimination of all conditions and environments that cause people to be excluded from health services, which is a human right, even if they are few in number for the time being. In fact, the problem is not national but universal. Dialectically, the benefits and harms of digitalization go hand in hand. The important thing is to take measures to minimize their damage. Since the issue is not only legal, there is an urgent need for all stakeholders working in the field of health, especially sociologists, to cooperate in order to carry out interdisciplinary studies relationally and intersectionally. Process-based qualitative research should be supported, especially considering the justified vulnerabilities of disadvantaged individuals such as women, LGBTI and immigrants.

On the other hand, in the traditional conservative part of society where honor killings are common, the positive and negative effects of digitalization should be particularly balanced. For

example, the possibilities of anonymous access to some services online should be increased, and informality in this area should be tolerated. The personal rights of the individual as a human being will automatically be higher secured when the issue is removed from the dilemma of tradition or legal pressure. Therefore, more attention should be paid to the social sciences.

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