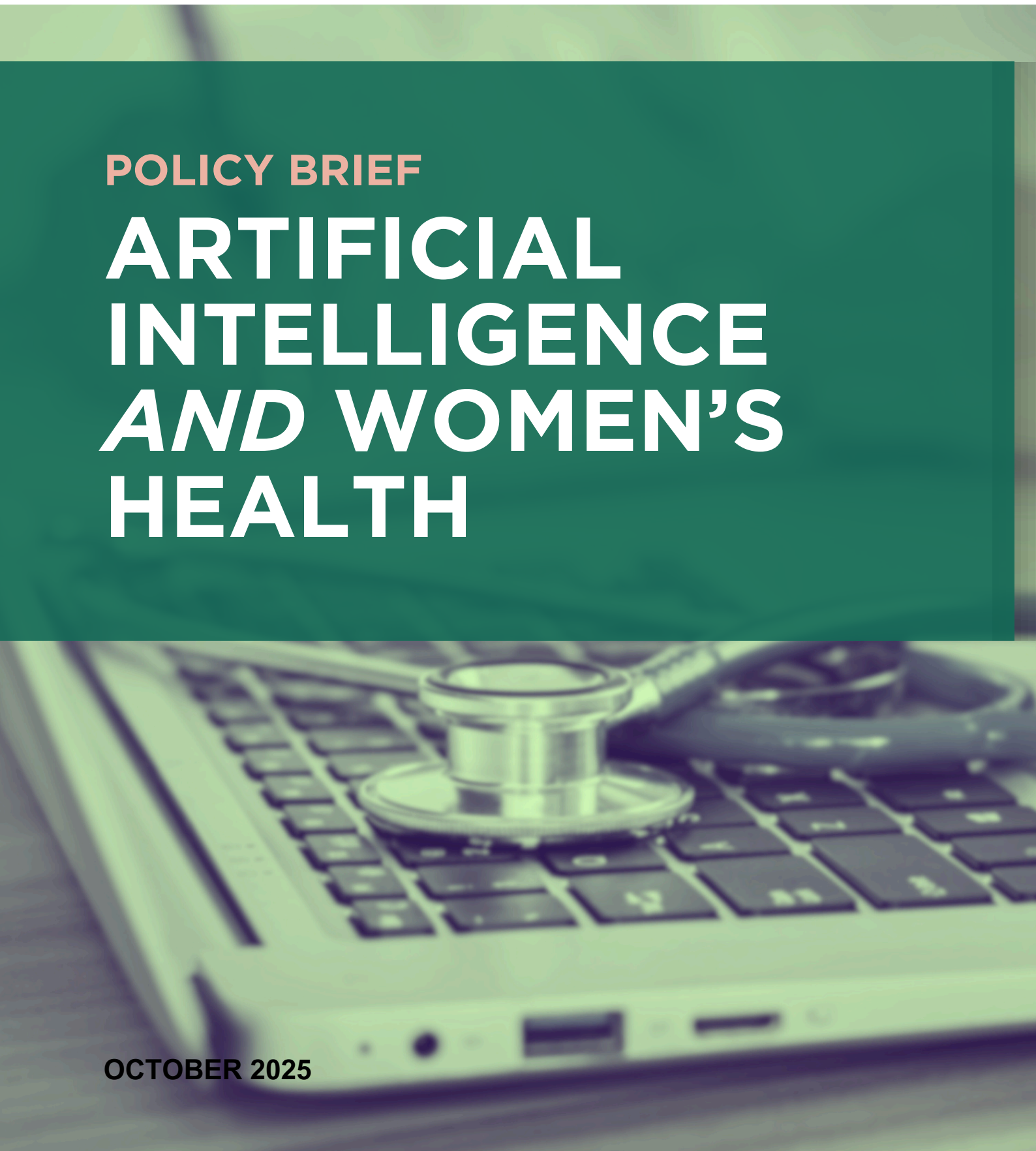
Working with Women Alliance

POLICY BRIEF

ARTIFICIAL INTELLIGENCE *AND* WOMEN'S HEALTH



OCTOBER 2025

Acknowledgement of Country

The Working with Women Alliance acknowledges the Traditional Owners of the land on which we work and live.

We pay our respects to Aboriginal and Torres Strait Islander Elders past, present and future, and we value Aboriginal and Torres Strait Islander Elders past, present and emerging.

We value Aboriginal and Torres Strait Islander histories, cultures, and knowledge.

About Us

The Working with Women Alliance (WwWA) represents two key portfolios: National Women's Safety (NWS) and National Women's Equality (NWE).

The WwWA connects the critical areas of gender-based violence prevention and the advancement of women's economic equality and leadership, bridging these important policy fields for greater impact.

We work with members and stakeholders, including the Australian Government, to provide expertise and advice on gender equality and women's safety.

Table of Contents

Working with Women Alliance

National Women's Safety Alliance

National Women's Equality Alliance

Executive Summary

Artificial intelligence (AI) is transforming healthcare in Australia by providing opportunities to enhance productivity and efficiency as well as improve access to health services. In 2024, the Albanese Government invested almost $30 million in funding for research into how to integrate AI into healthcare and conducted a review into *Safe and Responsible Artificial Intelligence in Health Care*.[1] The *National Digital Health Strategy 2023-2028* also recognises that "strong ethical frameworks and high clinical standards are required" to support successful adoption of AI in healthcare.[2]

However, little attention has been paid to the specific impacts of AI on women's healthcare. This gap is significant, given that new technologies risk deepening existing inequalities in healthcare and exacerbating harm against women and other marginalised people. Further, while the regulatory and policy focus has, rightfully, been on clinical interactions with AI, the current safeguards for community interaction with large language models (LLMs) and AI systems for health advice are inadequate.

Our members have highlighted cost, long waitlists for appointments, and location as significant barriers to accessing reproductive care. Research suggests women are disproportionately more likely to use general AI tools to fill these gaps in healthcare and can be more susceptible to harm from potential mis- and dis-information.[3]

Women are also increasingly likely to use FemTech – apps and devices specifically designed to support and track women's health. Despite the speed with which new technologies are being integrated into healthcare, safeguards and privacy regulations have failed to keep pace. These are not new problems, but they do require new policy solutions. **Australia has an urgent need for a gender lens on digital health policy.**

Data Gaps

The persistent gender bias in general AI systems and large language models (LLMs) has real and immediate implications for women's health. These tools pull data from across the internet without verifying its accuracy, exacerbating risks to women's health by amplifying mis- or dis-information.

False and misleading narratives about reproductive health are widespread online, particularly across social media platforms where content moderation is inconsistently enforced. One review identified more than a hundred recurring deceptive claims about reproductive health that are commonly found online, including exaggerated risks, recommendations that contradict professional medical advice, and the unverified promotion of alternative medicine.[4] Currently, general-purpose AI tools are trained on vast amounts of unvetted data without a requirement for transparency or source disclosure. This leaves users with no way of knowing whether the information provided is clinically accurate or dangerously misleading. The consequences of this are acute in areas like reproductive health and chronic illness, where diagnostic delay and dismissal are already common.[5]

Risks are compounded by gender data gaps. Women's health concerns, especially those related to reproductive care, chronic pain, and complex conditions like endometriosis, have been historically under-researched and underrepresented in medical literature.[6] This not only weakens the accuracy of AI-generated responses due to the scarcity in training data but also makes it harder to correct misinformation once it spreads.

Inaccurate digital information significantly influences health beliefs and decision-making. For example, more than half of endometriosis patients believed, based on false online claims, that someone with endometriosis could never become pregnant.[7] For many women, particularly those already distrustful of a healthcare system that fails to support or understand them, the persuasive power of these misleading narratives can be difficult to resist.

Recommendations

1.1 Fund targeted digital health literacy programs for women, particularly in relation to reproductive and chronic health, to strengthen their ability to evaluate the credibility of health information online.

1.2 Support and incentivise the development and funding of women's health research and evidence to reduce the gender data gap.

Use of AI for Health Advice

General-purpose AI tools are increasingly being used to answer health-related questions, particularly by women. However, these systems are not designed for clinical use, meaning they are often not trained on verified health data and hence do not meet the safety standards expected in healthcare settings, leaving users at risk of receiving misinformed and harmful medical advice.

Women are more likely than men to live with chronic and complex health conditions and co-occurring health symptoms.[8] They're also more likely to be on low incomes[9] or without secure housing[10], all of which makes it harder to access specialist health services. As a result, women are disproportionately represented among those using general AI platforms to fill gaps in care.[11] In 2024, women were 34% more likely than men to use ChatGPT to ask health-related questions.[12] This means women are relying on a tool that is not built to keep them safe.[13]

Commonly used AI tools have been found to downplay women's physical and mental health issues and risks, creating gender bias in care decisions. Research from the London School of Economics and Political Science indicated that women's care needs were more likely to be omitted or described in less serious terms in AI generated case notes.[14] When care managers are expected to make decisions based on these records, descriptions that prioritise men's care needs may directly influence how much care a person receives or doesn't receive. This underemphasis of women's health issues risks exacerbating inequity in care provision and widening gaps in health outcomes.

When general AI tools are used in place of care, the results can be dangerous. One incident saw ChatGPT praise a woman for going off her psychiatric medication.[15] It also reassured an autistic user that his delusions about bending time were valid, fuelling a manic episode.[16] There have been significant instances of harm in America, where a chatbot allegedly encouraged a teenager to follow through on plans to end his own life.[17] Despite ongoing chatbot upgrades, promoted as improvements to user safety, recent versions are producing more harmful or unsafe responses to prompts involving self-harm, suicide, and other serious health concerns.[18] Unsurprisingly, Australian mental health experts are now warning that general AI tools are potentially more dangerous to teens than social media.[19]

Further, the tools can be manipulated by bad-faith actors to deliberately provide misleading information. This creates a new avenue for the spread of disinformation that is currently hard to detect and regulate.

Researchers have found that AI systems designed to operate as chatbots on websites could be programmed to produce incorrect responses to health queries and include fabricated references to seem trustworthy.[20] This poses a significant risk to women's health, particularly given the current global backlash against reproductive rights. Despite potential harms, there are currently no clear safeguards for general AI tools being used in health contexts. These tools sit outside existing health product regulation and can operate without transparency or accountability. **The pattern is clear: these systems don't flag risk, don't offer support, and don't know when to stop.**

Recommendations

2.1 Use existing suicide prevention policies[21] to inform national AI guidelines, integrating pattern recognition of suicide and self-harm into all general AI systems that connects flagged users with the appropriate resources and helplines.

2.2 Develop clear accountability mechanisms, making tech and AI companies liable when their products facilitate harm.

2.3 Establish a national AI regulatory body, similar to the Spanish Artificial Intelligence Supervisory Agency[22] (AESIA), to oversee compliance and set guidelines for high-risk and general-purpose AI systems.

Femtech and Privacy

FemTech, apps designed to support women's health and wellbeing, is a rapidly growing industry projected to be worth nearly $50 billion globally this year[23], with over 50 million female users.[24] These products offer real-time reproductive support and management, yet most are excluded or exempt from TGA's (Therapeutic Goods Administration) medical device regulation. This means that they don't have to meet the same requirements as medical devices, even when they influence major health decisions like when to conceive, which symptoms to take seriously, or whether to seek care.

Without clinical oversight or mandated testing, these apps can make incorrect predictions or offer suggestions based on limited data and generalised assumptions. Most free smartphone menstrual cycle tracking apps were found to be inaccurate, with very few citing medical literature or having a medical professional involved in the health information being provided.[25] In Sweden, for example, 37 women sought abortions after relying solely on the Natural Cycles app, approved by the EU as a contraception aid.[26] When errors occur, there's no clear way for users to challenge the information, and no regulatory framework for ensuring accuracy or accountability.

Alongside these safety issues, FemTech raises serious privacy concerns. Users are prompted to enter highly intimate information, such as sexual activity, hormone levels, and fertility patterns, often without knowing when and how AI is used to interpret the data. Most apps have confusing and misleading privacy policies, creating a false impression of actual data practices.[27] FemTech apps that don't have a privacy policy available reached 11.5 million users.[28] For those with a privacy policy, 66% of apps did not mention that they collected menstrual cycle data.[29] A majority of popular FemTech apps fail to meet the Australian Privacy Policies (APPs) standards[30], exposing users and their intimate data to real risks of harm.

Over 70% of FemTech apps share user data with third parties for research or business purposes, without giving users any real choice.[31] Many developers won't de-identify users' menstrual cycle information, instead just using pseudonymisation.[32] These datasets become commercialised and used for direct marketing, leaving women feeling the need to modify their online behaviours during major health events like pregnancy, or pregnancy loss, due to the intrusive nature of AI algorithms.[33] Just a few months ago, a California jury found that Meta had been illegally collecting sensitive reproductive health information from millions of women using the fertility tracking app Flo Health.[34]

The data had been passed on to Meta without the users' knowledge or consent – and despite repeated promises that it was private. The concept of consent becomes increasingly meaningless when automated marketing is opaque or undisclosed, making it near impossible for consumers to understand exactly how AI is affecting their choices. **As AI continues to shape how FemTech products operate, regulation needs to keep pace.**

Recommendations

3.1 Expand the definition of medical devices to include FemTech products that guide health decisions and apply relevant safety and efficacy standards.

3.2 Update the *Privacy Act 1988* to cover data inferred or generated by AI, not just information provided directly by users.

3.3 Require transparent data practices in FemTech, including clear explanations of how AI is used and what types of data are collected and shared.

3.4 Introduce AI-specific privacy safeguards, including prohibitions on repurposing sensitive health data for profiling or advertising.

3.5 Apply a gender lens to the TGA's software exclusion criteria to understand the impacts for women of unregulated software, particularly in relation to FemTech.

Key Recommendations

1. Data Gaps

1.1 Fund targeted digital health literacy programs for women, particularly in relation to reproductive and chronic health, to strengthen their ability to evaluate the credibility of health information online.

1.2 Support and incentivise the development and funding of women's health research and evidence to reduce the gender data gap.

2. Using AI for Health Advice

2.1 Use existing suicide prevention policies to inform national AI guidelines, integrating pattern recognition of suicide and self-harm into all general AI systems that connects flagged users with the appropriate resources and helplines.

2.2 Develop clear accountability mechanisms, making tech and AI companies liable when their products facilitate harm.

2.3 Establish a national AI regulatory body, similar to the Spanish Artificial Intelligence Supervisory Agency (AESIA), to oversee compliance and set guidelines for high-risk and general-purpose AI systems.

3. Femtech, Data and Privacy

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