Report
Equitable health futures in AI
Monday 19 October 2020 | WP1839

In partnership with:

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In association with the Lancet and Financial Times Commission *Governing health futures 2030: Growing up in a digital world*.

This virtual Wilton Park meeting supported the work of The Lancet and Financial Times Commission *Governing health futures 2030: Growing up in a digital world*.

In the public domain, artificial intelligence (AI) interventions are assumed neutral and separate from human error, but this view fails to scrutinise the political nature of science, technology, and knowledge and the stakeholders shaping these data sets. In so doing, AI risks reproducing bias, discrimination, and inequity – a tool considered at the forefront of a new, machine learning age could in fact replicate the world exactly as it is today, with only a few global leaders charging the way.

Equitable health futures in AI means rethinking innovation and scientific practices to support inclusion, participation, and diversity of populations, especially those that are most vulnerable.

This special Wilton Park session with The Lancet & Financial Times Commission *Governing health futures 2030: Growing up in a digital world* explored approaches to data and AI for equitable health and health futures, with the aim of expanding the current concept of AI and identifying data governance models to meet global public needs and shape attitudes toward equity, democracy, and solidarity. It brought together a wide range of stakeholders from academia, non-governmental organisations, international agencies and the private sector.

The objectives of this dialogue were to explore the ways in which today's AI may lead to the discrimination, exploitation, or invisibility of certain groups and sectors of society; to identify the impacts or future impacts of biased AI on health and health futures, especially with regards to equity, human rights, and global goals like UHC and the SDGs; and to determine ways in which inequities can be addressed through governance and design.

Key themes of the meeting's discussion will be considered as part of the broader work and deliberations of the Commission and will inform the final Commission report to be published in 2021.

Participants discussed the following:

"First do no digital harm."

1. AI can be a powerful tool for social change, and for improving health. However, humans transfer their own biases (including unconscious bias) into AI and therefore AI is rooted in power. AI must fully integrate equity principles, including gender, to achieve the positive outcomes it can bring to bear.

2. AI can be considered a real revolution in public health, but, as with any other revolutions, there are new paradigms and realities that call for governance.

3. When creating governance frameworks for AI in health, how do we define our shared direction, distinction, and common goals? How do we democratise AI? These questions, and many more, informed the discussion.

4. As large companies and commercial interests dominate the progress of the world's technological revolution, the impact of biased data and AI is felt among the world's poorest and most vulnerable people, those who are not connected and who have no voice or ability to participate in decision-making. Innovations are developed by, with, and for elites, and fail to be applied for universal and public benefits.

5. A systems perspective of AI and health provides a critical entry point for responding to the impact of biased data and AI on achieving equitable health outcomes. A new participatory model, with common objectives and methodology, is required for equitable progress in AI and health.

6. In general, good examples of AI projects tend to be found at the community level where indicators of 'good' include positive approaches to equity and meeting community needs. However, there are very few examples of equitable AI projects working at scale or at a global level.

7. Global regulatory and ethical frameworks to promote equitable AI architectures for health, including a new global framework on AI for health, are necessary, learning from and drawing on other sectors' experiences. Ethics frameworks need to go further in order to avoid 'ethics washing' or paying lip service; there should be hard and binding regulations as the way forward to foster accountability and compliance.

8. Policy makers and governments need clear guidelines and practical suggestions to support development of governance frameworks for development of AI for health going forward. Explainability, legitimacy, and accountability are key concepts to put into practice.

9. Exploring how governance frameworks and pathways can address the impact of biased data, participants provided key proposals, including increasing public and official knowledge and understandings of data and AI in health; ensuring diverse and representative broad-based participation in decision-making from the start; creating guiding principles and tools on AI applications in health; building institutional capacity to respond to data and AI initiatives; improving global collaboration; and strengthening partnerships with the private sector.

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Wilton Park | December 2020

Find out more about the Lancet and Financial Times Commission Governing health futures 2030: Growing up in a digital world.