

# Ethics of AI in global health research

Cape Town, 29&30 November 2022



## International AI research: the issue of moral pluralism

Serene Ong, Centre for Biomedical Ethics, Yong Loo Lin School of Medicine, National University of Singapore

**Context:** Ethical AI frameworks regulating transnational and cross-sectoral healthcare research

### Commentary

Transnational approach AI research poses a conflict between harmonisation of principles and moral pluralism<sup>1-3</sup>. AI research requires large datasets for greater decision making accuracy; <sup>4,5</sup> however, concerns around data colonialism may be worsened by uneven regulatory frameworks between sectors and countries,<sup>6,7</sup> and standards may be compromised in a 'race to the bottom'. International cooperation based on a set of common principles for responsible AI could help focus AI research, and build trust across transnational boundaries<sup>1,8</sup>. Commonalities in the ethical principles that underpin published frameworks suggest that a core set of principles is feasible<sup>2</sup>. However, much of the international discussion has emanated from high-income countries (HICs). Very few ethical frameworks applicable to the specific context of AI research in low- and middle-income countries (LMICs) have been published,<sup>9</sup> which is problematic for two reasons.

First, it is well-recognised that ethical frameworks and AI research projects should be developed in tandem with AI and digitisation initiatives; <sup>4,10</sup> however, most LMICs lack the resources to carry out AI research<sup>11,12</sup>. While open sharing of expertise and resources from HICs can aid LMICs in the development of their AI initiatives and ethical frameworks, structural constraints preclude the straightforward transposition of frameworks from other countries<sup>4,13</sup>. Second, cultural differences<sup>14</sup> invite us to think about the place of plural ethical values in the development of overarching ethical frameworks for AI research, particularly with notable gaps in representation.

### Conclusion and recommendations

As we move towards a globally interconnected landscape of AI research in healthcare, there is an increasing call for transnational ethical frameworks to regulate AI research. I caution against the current trend, putting forward the view that there is value in the diversity of different ethical frameworks, especially in research. Distinct perspectives can contribute innovative and novel ways of approaching problems and discovering solutions. To achieve this, we need to be respectful of multiple perspectives and recognise the possibility of engagement across differences. The challenge is to gain consensus around shared value commitments in ways that can accommodate and respect the pluralism across transnational frameworks, and to do so in ways that share research ownership and investment across countries.

I suggest a way forward through a two-level framework, with a core statement regarding the existence of any common or shared values, as well as a secondary procedural layer to guide decision-making that can accommodate both shared and plural values in a consistent process for practical regulation and decision-making. Identified core values provide a continuity between different countries and organisations on which trust and a practical framework can be layered upon. The secondary procedural layer should be configured as a flexible space for accommodating contextual features, local nuances and reasonable disagreement.

Rather than focus on the formulation of a universal set of values or principles, harmonisation here ought instead to be directed towards procedural engagement in decision-making. It is more practically feasible and ethically defensible to agree on practical processes for addressing ethical disagreement within a research project without addressing that disagreement through enforcing a single set of universal ethical values. It is just as important that global conversations on AI ethics

(and the development of frameworks and guidelines in particular) are not dominated by a small set of actors. Dialogues between different countries and organisations will be necessary to build respectful engagement, mutual understanding and clarity.

**Acknowledgements:** This work is supported by the Singapore Ministry of Health's National Medical Research Council under its Science Health, and Policy Relevant Ethics, Singapore (SHAPES) Programme (MOH-000951).

#### References

1. 10.1007/s13347-020-00402-x
2. 10.1038/s42256-019-0088-2
3. 10.1186/s12910-021-00577-8
4. 10.1634/theoncologist.2018-0255
5. 10.7861/futurehosp.6-2-94
6. 10.1080/03080188.2020.1840225
7. 10.1148/radiol.2020201434
8. Ethics and governance of artificial intelligence for health: WHO guidance. Geneva: World Health Organization (2021)
9. 10.1007/s43681-022-00218-9
10. 10.1177/1460458220938535
11. <https://tinyurl.com/uz8p5vyu>
12. 10.1136/bmjgh-2018-000798
13. 10.1186/s12992-020-00584-1
14. 10.1007/s00146-022-01499-8

**This paper was prepared for GFBR 2022. Further details on the meeting are available at [www.gfbr.global](http://www.gfbr.global).**