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| ITU Logo | INTERNATIONAL TELECOMMUNICATION UNION  **TELECOMMUNICATION STANDARDIZATION SECTOR**  STUDY PERIOD 2017-2020 | | FG-AI4H-E-030-R01 | |
| **ITU-T Focus Group on AI for Health** | |
| **Original: English** | |
| **WG(s):** | | Plenary | Geneva, 30 May - 1 June 2019 | |
| **DOCUMENT** | | | | |
| **Source:** | | Chairman FG-AI4H | | |
| **Title:** | | Future FG processes discussion | | |
| **Purpose:** | | Discussion | | |
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| **Abstract:** | This document enumerates the next steps to be followed by FG-AI4H as discussed during the meeting in Geneva, Switzerland. |

The following is a list of issues and actions that arose from the discussions of E-030.

1. Soliciting **health topics** that meet our requirements (e.g., global impact, availability of data, and consideration of causal effects). Sameer will create a scoping document about the health topics in a broader context (using WHO format). Alternatively, could be structured as:
   1. Methods in medicine
      1. Diagnosis and detection
   2. Types of diseases or lifestyle choices
      1. Malaria
      2. HIV/AIDS
   3. Devices
      1. Self-health apps
   4. Pharmaceuticals
   5. Aging
2. Creating (terms of reference for) **Working Group on Ethics** (chair and vice chair to be determined). Working Group should provide:
   1. Document on generic ethical considerations and requirements for handling data within the Focus Group (and consider *Data Handling Policy* document)
   2. Ethical assessment for each AI for health topic
      * 1. Data sourcing and labeling
        2. AI-based prediction quality, uncertainty, and explainability
        3. Implications of AI output
        4. Deployment (are AI methods based on individual? are patients aggregated?)
   3. Suggestions on how Focus Group activities could be more ethical
   4. Statements to be included in TDDs indicating that a given topic has been looked at from an ethical perspective
   5. Meetings, workshops, and online communications
   6. Outreach to share best practice
3. Creating (terms of reference for) **Working Group on** **Data and AI Solution Quality** (chair: Pat Baird; vice chair: Luis Oala). Working Group should address:
   1. Data quality
4. Determine metrics/characteristics for assessing data quality (and consider *Data Handling Policy* document)
5. Prepare a document and software tools to assess quality of data
6. Study available public datasets
7. Liaise with Working Group on Regulation
8. Provide recommendations on data collection for health topics
   1. AI solution quality
9. Solicit reports on how AI solutions are trained
10. Address how we will handle AI solutions that modify with time
11. Choose performance measurements/metrics
12. Select methods for quantifying robustness and uncertainty (and determine desired and/or acceptable levels)
13. Find methods for explainability and generalizability that serve our purposes
14. Organize workshops that address specific questions regarding AI and health
15. Creating (terms of reference for) **Working Group on Data Handling** (chair: Marc Lecoultre; vice chair: Ferhat Kerif). Working Group should address:
    1. Data transfer
    2. Data encryption
    3. Data usage (who can use and manipulate data)
    4. Data splitting
    5. Data aggregation
    6. Data provenance
    7. Data normalization
    8. Data lifecycle
    9. Data ownership
    10. Data storage
    11. Data processing
    12. Benchmarking
        1. Addressing issues with benchmarking software (AIcrowd)
           1. Accessing back-end of program
           2. Finding work-around for high-dimensional data
    13. AI solution submission
    14. …and other aspects listed in B-105
16. Addressing issues with **benchmarking software** (AIcrowd)
    1. Accessing back-end of program
    2. Finding a work-around for high-dimensional data
17. Recruiting **experts** (rapporteurs, reviewers)
    1. Identifying experts in the fields of health, AI, statistics, social sciences, ethics, and governance to devote time to our activities and to compose expert panels
    2. Recruiting experts
       1. Advertising in journals, conferences, social media etc.
       2. Deploying our network of partners and extend to global participation
       3. Seeking equal representation (gender, race, seniority, geography, etc.)
       4. Developing a description of our expectations from the experts
       5. Producing an application form and portal
    3. Vetting experts
       1. Conflict of interest statement
       2. Resume/CV
       3. References
       4. Set up a review board
       5. Process for assignment to Topic Groups
    4. Collect glossary of terms
18. Facilitating **communication** within the FG-AI4H structure
    1. We need to ensure that all experts, topic group drivers, and topic group members have access to equipment and technology that will facilitation online cooperation (including document sharing) and virtual meetings; ITU seems equipped to address this
    2. We need to define our expectations with regard to the types of documentation that each topic group should prepare
    3. We need to modernize the Focus Group (and Topic Group) website(s) and ensure that it is (they are) continuously updated
    4. We need to circulate relevant documents (meeting reports, agendas, etc.) to the Focus Group mailing list so that all participants remain aware of developments
    5. Identify and raise awareness concerning **conflicting terminologies**
       1. Produce glossary of terminology indicating the varied use across different communities
19. Outsourcing creation of a document that facilitates **ITU online registration** for joining Focus Group. Document should:
    1. Show steps (screenshots) for creating new user account
    2. Indicate that participating in the Focus Group only requires an ITU user account
    3. Be prominent on Focus Group website
20. Creating documents with guidelines on **how to participate** in Topic Groups regarding:
    1. Data donation
    2. Health topics (in relation to scoping document; an adjustment of call for proposals document possibly using IRB format)

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