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| ITU Logo | INTERNATIONAL TELECOMMUNICATION UNION**TELECOMMUNICATIONSTANDARDIZATION SECTOR**STUDY PERIOD 2017-2020 | FG-AI4H-E-030 |
| **ITU-T Focus Group on AI for Health** |
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| **DOCUMENT** |
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| **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. |

Please note the following caveats: these steps are *not* given in order of priority and this is *not* a comprehensive list.

1. Identify relevant **health topics** that meet our mandate (e.g., global impact, availability of data, consideration of causal effects). Consider:
	1. Malaria
	2. HIV/AIDS
	3. Pharmaceuticals
2. Creating **terms of reference** for a new working group on ethics
3. Specifying our expectations for **(training and test) data quality**
	1. We need to establish how we will identify and handle situations of bias, incompatibility, ethics, legalities, etc.
	2. We need to define ways to ensure reproducibility of data generation
	3. We need to choose the statistical characteristics of data that are relevant (summary statistics)
	4. We need to consider how we will handle data homogeneity issues and data completeness
	5. We need to decide how we would like data to be annotated
	6. Resilience of data?
4. Specifying our expectations for **AI solutions**
	1. We need to address how we will handle AI solutions that modify with time
	2. We need to choose performance measurements/metrics
	3. We need to select methods for quantifying robustness and uncertainty (and determine desired and/or acceptable levels)
		1. We need to create terms of reference for a new ad-hoc group on testing robustness
	4. We need to find methods for explainability and generalizability that serve our purposes
	5. We could organize workshops that address specific questions regarding AI and health
5. Define details of the data submission procedure and storage
	1. Storage
	2. Hosting / server arrangements
	3. Security
6. Addressing issues with **benchmarking software** (AIcrowd)
	1. Accessing back-end of program
	2. Finding a work-around for high-dimensional data
7. Recruiting **experts** to cover the various health topics, ML/AI, regulation, and other relevant fields
	1. Identifying experts (rapporteurs, reviewers) to devote time to our activities and to compose expert panels
		1. We should consider non-profit institutes such as universities and hospitals
		2. We should ask for suggestions from our stakeholders and partners; e.g., WHO, ITU, IANPHI, regulators, IAP, IHF, AI4Good, WHS, and philanthropic foundations
		3. We should seek diversity among the experts (e.g., gender, geographic distribution, and income levels) and ensure that there are no conflicts of interest per WHO
		4. We should consider following an academic journal approach (using a pool of experts)
	2. Recruiting experts (we will need to determine how we will advertise the need for experts and how we will encourage their engagement; a certificate of appreciation?)
	3. Vetting experts
		1. We could consider adapting the protocol used by WHO and/or ITU
	4. Develop a call for experts
8. Identify and raising awareness concerning **conflicting terminologies**
	1. Collect glossary of terms
9. 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 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.
10. Creating a document that helps people use the **ITU online registration** form to join the Focus Group

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