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GLOBAL MODEL WHO 2025

ZERO DRAFT RESOLUTION

DIGITAL HEALTH AND AI

THIRD GLOBAL MODEL WORLD HEALTH ASSEMBLY Agenda item 2.4

The Third Global Model World Health Assembly,

Having considered the report by the Director-General on on digital health;¹

Recalling resolutions WHA71.7 on digital health and WHA74.7 strengthening WHO preparedness for and response to health emergencies;

Recognizing that digital technologies and artificial intelligence (AI) have the potential to improve access to health services, strengthen surveillance, and increase health system efficiency;

Aware that the benefits of digital health depend on equitable access and strong governance that include safeguards that protect data from unauthorized access, loss, or tampering in order to protect the privacy of personal health information;

Acknowledging that digital divides persist between and within countries, particularly affecting low-resource settings, particularly in low- and middle-income countries and marginalized populations;

Emphasizing the importance that the use of AI in health be ethical and transparent to ensure that decisions made or supported by AI have clear oversight procedures and safety mechanisms to protect patient safety and the privacy of their data;

Noting the publication of WHO's guidance on ethics and governance of artificial intelligence for health and the Global Strategy on Digital Health 2020–2025;

Aware that cybersecurity preparedness has improved globally but remains uneven, with lower-income regions being less likely to have comprehensive national cybersecurity strategies that increase the risk of data breaches and may undermine trust in digital health systems using AI;

Concerned that AI algorithms that are overly reliant on pre-existing patterns in the data may reinforce historical prejudices or datasets that lack sufficient representation of certain races, genders, ages, or socioeconomic groups may cause algorithms to perform poorly for underrepresented groups widening health inequalities;

Concerned also that women are often underrepresented in coding, data science, and leadership positions;

¹ Document A77/21.

Determined to strengthen international cooperation and promote inclusive, people-centered digital transformation in health,

1. URGES Member States:

- (1) to implement national digital health strategies aligned with WHO's Global Strategy on Digital Health 2020–2025; strengthen public confidence in immunization by improving access to clear, evidence-based information about vaccines;
- (2) to adopt or update national laws and regulations that define responsibility and liability for harm caused by the use of AI in health care, including cases of misdiagnosis, misuse of data, or discrimination;
- (3) to make sure patients can easily report problems or harm caused by Alsupported care and that authorities investigate and take action to correct mistakes or provide support to those affected;
- (4) to strengthen data protection laws to ensure that patient health records remain private and confidential;
- (5) to expand digital health infrastructure to ensure that everyone benefits equally from the use of digital health and AI, particularly those in rural and underserved areas;
- (6) to establish ethical and technical standards to detect and correct bias in AI models before they are deployed in clinical or public health settings;

- (7) to ensure that different digital systems being able to talk to each other so that different health technologies can share and use data safely;
- 2. CALLS UPON international and regional partners, including intergovernmental organizations working on establishing standards on AI governance, development and regional banks that are financing digital health and AI systems, research and academic institutions that are gathering data to inform regulation and evaluation of digital health technologies, civil society, the health sector, and the private technology sector:
 - (1) to design AI systems with clear accountability mechanisms including audits, ethics reviews, and transparent reporting procedures to regulators;
 - (2) to provide financial and technical assistance to low- and middle-income countries developing digital health systems;
 - (3) to promote equal access to digital health services, devices, data platforms, and analytics tools driven by AI;
 - (4) to prevent bias and discrimination when using digital health services and data platforms that use AI and ensure that no person is denied access to health care or limited due to decisions that are automated or generated using algorithms;
 - (5) to share best practices on AI governance, cybersecurity, and ethical data use;
 - (6) to support training and professional-development programmes that strengthen the skills of health-care workers, data specialists, and regulators in safely using, managing, and overseeing digital-health and AI technologies;
 - (7) to strengthen safeguards against misuse of AI and digital surveillance technologies;
 - (8) to promote gender equality by ensuring equal participation in design and leadership, addressing gender and social bias in data and algorithms, and improving equitable access to digital tools and services;
 - (9) to invest in the development of AI tools that improve early diagnosis and disease prevention;

(10) to foster collaboration between health professionals, technologists and ethicists to ensure that the use of AI in health systems is used in a responsible manner;

3. REQUESTS the Director-General:

- (1) to continue supporting Member States in developing and implementing national digital health and AI strategies;
- (2) to provide technical guidance on governance, ethics, and standards for Al in health;
- (3) to facilitate global and regional cooperation to strengthen skills of health workers, and data scientists that are needed for the safe and effective use of digital health and AI;
- (4) to coordinate with UN agencies, regional organizations, and development partners to reduce the digital divide.