

Digital Health and AI

The Third Global Model World Health Assembly,

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

Recalling resolutions WHA71.7 (2018) on digital health, WHA74.7 (2021) strengthening WHO preparedness for and response to health emergencies and WHA78.16 (2025) on accelerating action on the global health and care workforce by 2030;

Welcoming the 2021 UNESCO Recommendation on the Ethics of Artificial Intelligence, the 2023 Global Initiative on AI for Health, and publication of WHO's policies, standards, and guidance on ethics and governance of artificial intelligence for health and the Global Strategy on Digital Health 2020–2025 which has been extended to 2027, and recognizing the need for adaptation of these guidelines to regional contexts;

Recognizing that the application of well-functioning data system, digital technologies and artificial intelligence (AI) have the strong potential to enhance access to quality health services, reducing inequity and skills gaps, strengthen health monitoring, and improve health system efficiency if accompanied by adequate capacity-building;

Aware that the benefits of digital health depend on equitable access, robust frameworks and strong governance that safeguards data security, protects privacy from unlawful use, and ensures accountability;

Affirming that digital divides persist between and within countries, and may widen, disproportionately affecting low-resource settings, particularly in low- and middle-income countries, rural and remote areas, and vulnerable and marginalized populations where infrastructure, funding, and human resource gaps limit equitable access to digital health services;

Emphasizing the importance that the design and use of AI in health be fair, ethical, transparent, and accountable to ensure that decisions made or supported by AI have scientific, decision-rational, clear, and comprehensive oversight procedures and safety mechanisms to protect patients and healthcare professionals' safety, dignity and the data privacy;

Acknowledging that disparities in data structure and standardization, particularly for non-administrative or point-of-care clinical data such as nursing records and primary healthcare data, hinder interoperability and data quality in health systems, and that these datasets remain economically underprioritized despite being essential for equitable, patient-centered, and primary health care;

Aware that cybersecurity preparedness has improved globally but remains uneven, emphasizing the need for international cooperation, capacity building, and technical assistance to

low-resource settings to bridge the Artificial Intelligence and digital divides, strengthen cybersecurity resilience, and foster trust in digital health systems using AI;

Aware that limited domestic capacity for AI development may increase dependence on external technologies, establishing imbalances in data governance and constraining digital sovereignty;

Concerned that AI algorithms are heavily dependent on pre-existing patterns in the data, which may perpetuate historical and existing biases or datasets that lack sufficient representation of certain races, ethnic groups, genders, ages, or socioeconomic groups may cause data inaccuracy and widen health inequalities and presenting the possibility of significant health risks with long-lasting consequences encourages implementing federated learning to improve methods for data access;

Concerned that gender gaps and the underrepresentation of marginalized groups in digital health, coding, data science, and leadership positions reduce diversity in innovation and may contribute to unequal health outcomes;

Recognizing that public–private partnerships, patient-centered approaches, research collaborations, and capacity-building initiatives are essential to ensure all countries can benefit safely and equitably from digital health and AI innovations and to promote their long-term sustainability;

Determined to strengthen international and regional cooperation in every single country, and promote inclusive, people-centered digital transformation in health, emphasizing that the role of humans remain essential to the ethical management of digital technologies and AI,

1. URGES Member States:

(1) to develop, improve and implement national digital health strategies aligned with WHO's Global Strategy on Digital Health 2020–2027, and policies, standards, and guidance on ethics and governance of artificial intelligence for health;

(2) to adopt proper reimbursement mechanisms that fairly value telemedicine and usage of AI tools ensuring provider participation in implementation of innovation in health-care;

(3) to strengthen data protection laws and regulations to ensure that patient health records and other sensitive information remain private, confidential and ethically used, and that consent is required when accessing private information, particularly that of minors;

(4) to develop or strengthen, to the best of their ability, national legal and regulatory frameworks that define responsibility and liability for harm caused by the use of AI in healthcare, including but not limited to cases of technical or system failures, misuse of data, unsafe automation, algorithmic bias, misdiagnosis, and violations of patient privacy;

(5) to ensure patients and healthcare professionals report problems or harm caused by AI-supported care without facing personal repercussions and that authorities should promptly,

timely and transparently investigate and take action to correct mistakes and provide reparations or support to those affected by establishing a reporting and remedy mechanism;

(6) to establish, modernize, provide financial support for, and ethically govern a physical network and digital health infrastructure by integrating telemedicine, tracking patient health records, promoting digital literacy, and ensuring inclusive access for rural, underserved, and vulnerable populations, so that the benefits of digital health, AI, and other emerging technologies are equitably shared and sustainably managed across all regions;

(7) to promote digital literacy among health professionals and the general population at the local level, and to strengthen culturally sensitive information and communication about different health procedures, including vaccines, ensuring that digital health initiatives are inclusive and trusted;

(8) to establish ethical and technical standards to detect, prevent and correct bias in AI models during all stages of deployment in clinical or public health settings, and to require that any AI system be independently assessed and certified for compliance with these standards prior to application;

(9) to encourage the adoption of interoperable international, national, or regional digital health and AI systems in order to enable secure, efficient, and unfragmented sharing and use of health data between and within countries or health technologies;

(10) to promote international collaboration and technology transfer to enable all regions, especially low- and middle-income communities, to locally develop and maintain digital health and AI systems;

2. CALLS UPON international and regional partners, including intergovernmental organizations working on establishing standards on AI governance non-governmental organizations involved in health and those involved in AI, 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 continuous financial and technical assistance to low- and middle-income communities constructing and implementing digital health infrastructures and systems without undermining the sovereignty of these communities;

(3) to promote equal access in all aspects 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 promote gender equality and inclusion in digital health innovation by ensuring equal participation in design and leadership through education and training;

(6) to share best practices on AI governance, cybersecurity, and ethical data use;

(7) to support training and professional-development programmes, especially starting from higher education, that strengthen the skills of health-care workers, data specialists, and regulators in safely using, managing, and overseeing digital-health and AI technologies, and encourage the revision of all academic and professional curricula related to digital health and AI;

(8) to develop public education strategies aligned with patient-centered principles on the use of AI in healthcare, including accurate information on the benefits, safety, privacy, and accountability;

(9) to strengthen safeguards against misuse of AI and digital surveillance technologies, ensuring compliance with international human rights and data protection standards;

(10) to promote culturally responsive digital health systems and AI applications that respect language diversity, local health practices, and cultural norms;

(11) to invest in research and development of AI tools that improve early diagnosis, disease prevention, and health system building;

(12) to address the physical vulnerabilities that may limit reliable internet use, including damage or disruption to infrastructure;

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

(14) to promote transparency and disclose specific strengths and limitations of using Artificial Intelligence in individual digital health systems;

(15) to ensure that digital health transformation contributes to environmental and climate sustainability by promoting energy-efficient data storage, circular use of digital devices, and alignment with the Sustainable Development Goals;

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, data terminologies, and standards for AI in health;

(3) to facilitate global and regional cooperation to strengthen skills of health workers, AI developers, and data scientists that are needed for the safe and effective application of digital health and AI;

(4) to coordinate with UN agencies, regional organizations, and development partners to reduce the digital divides between and within countries.