



DISCLOSURES





University of Pittsburgh, Post-doctoral fellow: T32 MH16804

Fairness, Equity, Bias workgroup lead: Coalition for Health AI (CHAI) No financial disclosure

BACKGROUND





PhD in Clinical psychology



Research in decision-making and cognitive/affective neuroscience in healthy and psychiatric patient populations



12+ years studying how and why people behave the way they do and the factors that impact individual differences in human behavior



Applying this research to understand the dynamics between human decision-making and Al in healthcare.

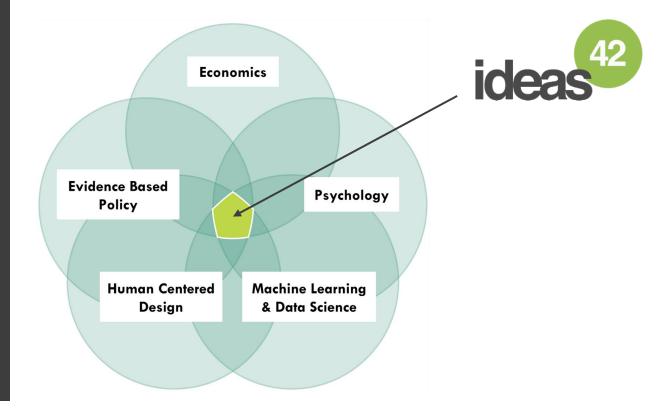


OUTLINE

- What is behavioral science?
- What is bias and why does it matter for health Al
- Promise and potential of health Al
- Existing gaps in health Al product design
- Examples
- Recommendations

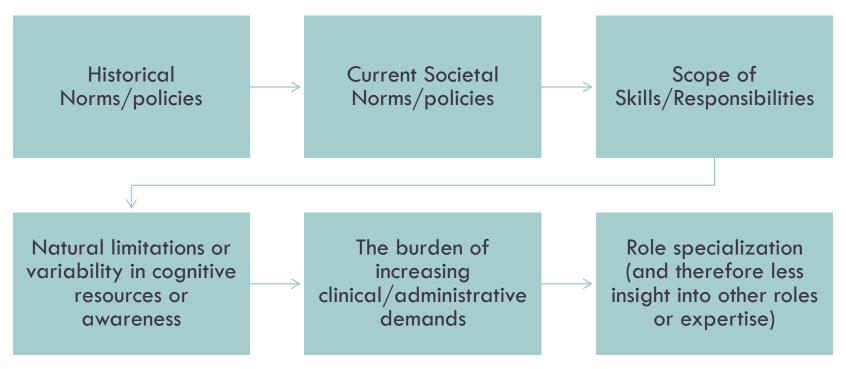
WHO IS IDEAS42?







BIASES AND WHY THEY MATTER FOR HEALTH AI



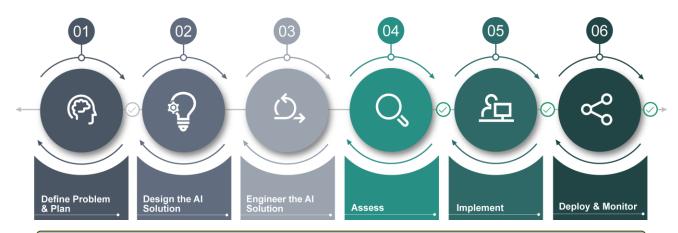
Individual, group-level, and systemic tendencies that stem from:



PRINCIPLES FOR RESPONSIBLE HEALTH AI



Transparency & Accountability







WHAT DOES THIS LOOK LIKE?

Attention Bias

Availability Bias Confirmation Bias

Status Quo Bias Automation Bias

Base-rate Fallacy



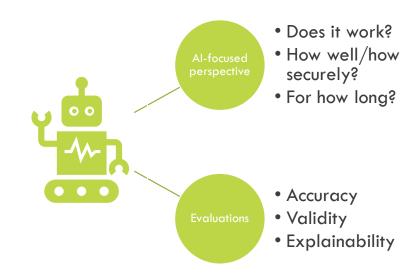
THE POTENTIAL FOR AI IN HEALTHCARE

- Reducing clinical and operational burden
 - Increase in aging population
 - Maternal and child health gaps
- Improving diagnosis and treatment by bridging skill gaps in underresourced areas
- Increasing access
- Reducing bias/improving health equity
- Reducing mistakes through automation



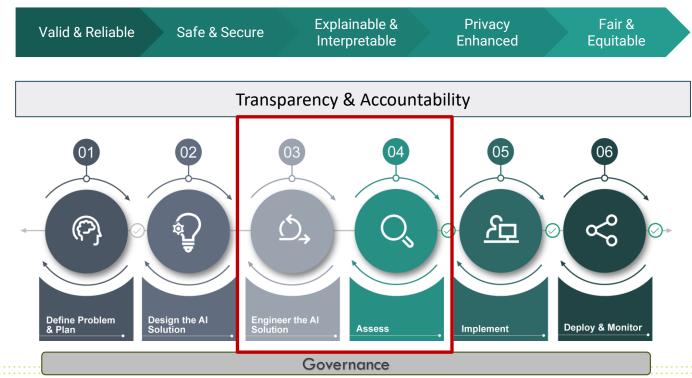


STATE OF THE FIELD: MACHINE-CENTERED APPROACH



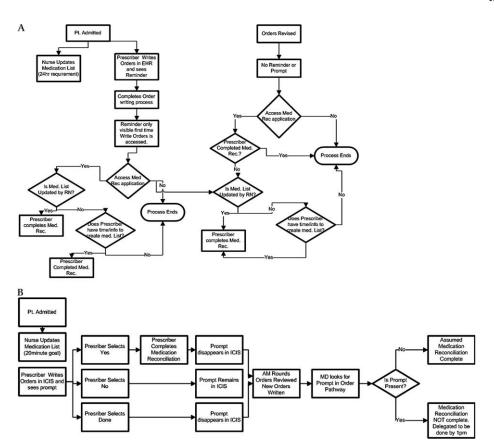


PRINCIPLES FOR RESPONSIBLE HEALTH AI



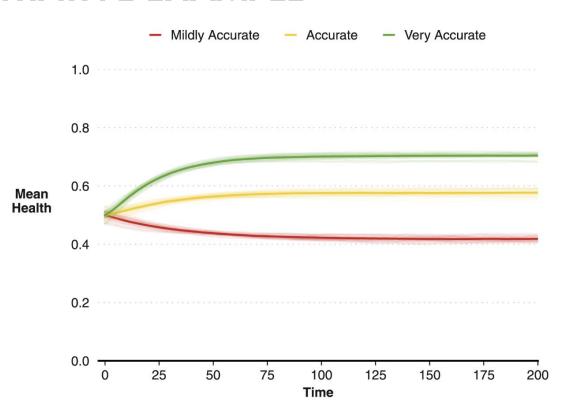


THE PROBLEM





ILLUSTRATIVE EXAMPLE



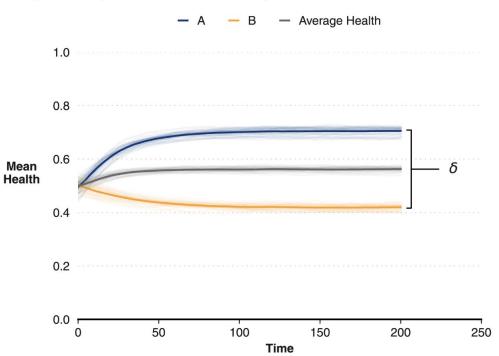
Kasman, Sedlack, Hammond, 2024; Brookings Center on Social Development and Policy



ILLUSTRATIVE EXAMPLE

Accurate but Biased Al

Average health of groups A and B after interacting with an accurate but biased Al.

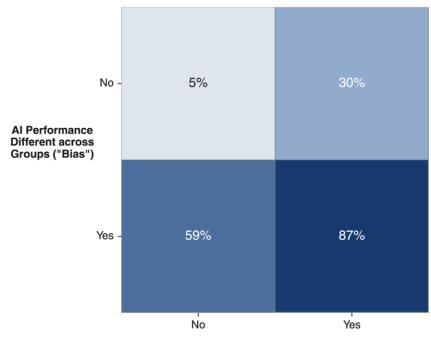


Kasman, Sedlack, Hammond, 2024; Brookings Center on Social Development and Policy



ILLUSTRATIVE EXAMPLE

Proportions of simulation runs across condition categories in which we observed a statistically significant difference in health outcomes across two population groups.



Social Segregation and/or Different levels of Trust in Al

Kasman, Sedlack, Hammond, 2024; Brookings Center on Social Development and Policy

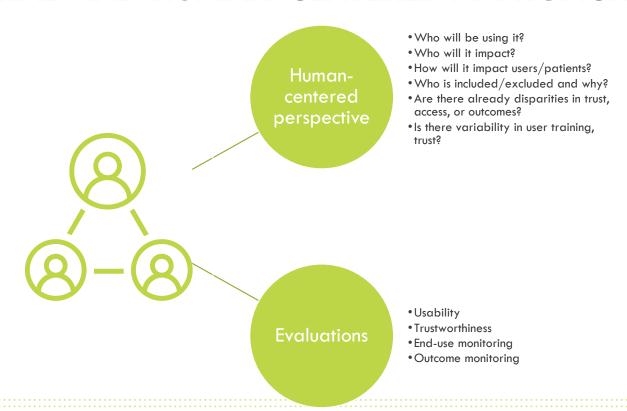


OTHER AREAS WHERE BEHAVIORAL SCIENCE MATTERS

- How we choose to document and be transparent about the intended use, performance, and risks of a model.
- How we effectively use these tools to increase trust
- E.g. standard model cards/resources for users and patients
- Remember: transparency and usability tools should be: Salient, Simple, Timely, and Actionable



FOR EFFECTIVE AND RESPONSIBLE HEALTH AI: BEHAVIORAL AND HUMAN-CENTERED APPROACH





PRINCIPLES FOR RESPONSIBLE HEALTH AI





RECOMMENDATIONS



Ask the right questions, and include the right people (as early as possible)



Use behavioral science informed methods of qualitative and quantitative research.



Do not limit models and design to data available



Understand and plan for human biases and tendencies.



Develop behaviorally informed tools to standardize documentation & training.



Develop methods for motivating & monitoring end-user behavior as well as user-feedback loops



Provide infrastructure & governance that allow for inclusivity across differently sized and resourced health systems



QUESTIONS?





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