#### PARTICIPATORY RESEARCH

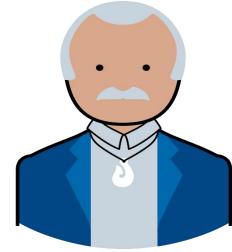
# WE NEED TO TALK ABOUT MAX

Otago University, Wellington PHSS 15<sup>th</sup> February 2019

Rochelle Style

Interactive session - Use clickers to vote

- > 80 year old male Māori (Ngāi Tahu) HIV+, T2 diabetes
- Critically unwell in ICU
- Blood tests (blood glucose hypoglycemia) + multiple other tests and images collected for the purposes of treating him
- Max's data submitted to the ANZICS database
- Minimum data set requirement 105 variables -HIV status, diabetic status, glucose concentration values, patient identifier, residential postcode, "indigenous status" and a "statistical linkage key"



Source: https://www.healthcarehome.org.nz/patientprovider-stories

- Max's data also added to a training data set for an AI tool (fictitious) "Diabins"
- Predicts optimal way to avoid hypoglycaemia by determining when to start IV insulin. Conventionally: when blood glucose exceeds 10 mmol/l but evidence improved outcome starting treatment at 14 mmol/l.
- Diabins designed by a private AI company



- Use of an iphone for rehab, trialling Medibank
  "LiveBetter" app
- Personal well-being coach, Liam, provides 'digital nudging', texting Max encouraging him to take "tiny, happy breaks". Max will learn to think more positively, deal with stress better, get better sleep .... "Right" healthy goal?
- LiveBetter + Fitbit allows GP to track all Max's health data.

#### livebetter



Meet Liam & Lia
Your personal wellbeing coaches

Max is part of some exciting AI research which promises great benefit to future diabetic patients like him

#### BUT

Max has not consented to his data being included in the ICU database or the Diabins training dataset. He has no idea what happens to his data with the LiveBetter app – he doesn't know what he doesn't know. USA law.

➢ He is surprised there is an ICU database located outside NZ

- Max is a Jehovah's Witness
- Very sensitive about HIV status
- ➤ If asked, or even told, about the ICU database or the Diabins training data, he would have objected to the inclusion of his data, even if anonymised. Similarly with LiveBetter.
- Concerned whether consideration given to principles of Māori data sovereignty and Te Ara Tika. Data is taonga.





## Challenges – ICU database

1. Should Max's consent have been sought before his identifiable data was included in the ICU database located offshore?

A. Yes

#### Challenges – ICU database

2. Assume Max's consent should have been sought, should it be:

A. Opt-in consent

B. Opt-out consent

## Challenges - ICU database

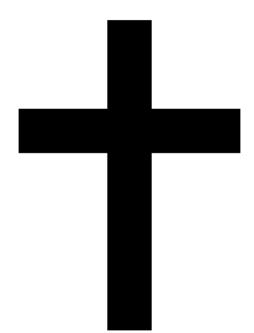
3. Does Max have an obligation of reciprocity to allow his data to be used for research?

A. Yes

## Challenges – *Diabins*

4. Does it matter that Max's religious beliefs mean he objects to his blood being used for research purposes?

A. Yes



## Challenges – *Diabins*

5. Do you think the potential public benefits of the *Diabins* research outweigh the private risks of harm to people like Max?

A. Yes



#### Challenges - Diabins

6. Does it matter that *Diabins* is privately developed?

A. Yes



## Challenges - General

7. If it does matter, is there a social licence in New Zealand to use identifiable health information, without consent, to do private research for commercial gain?

A. Yes



#### Challenges - Diabins

8. Are you concerned that the predictive accuracy of the *Diabins* dataset might be biased because of a lack of data about elderly Māori males?

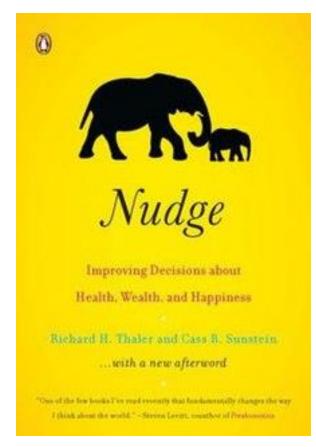
A. Yes

#### Challenges - Livebetter

9. Is it OK for Max to be digitally nudged into healthier behaviour

with out his knowledge or consent?

A. Yes



## Challenges - Livebetter

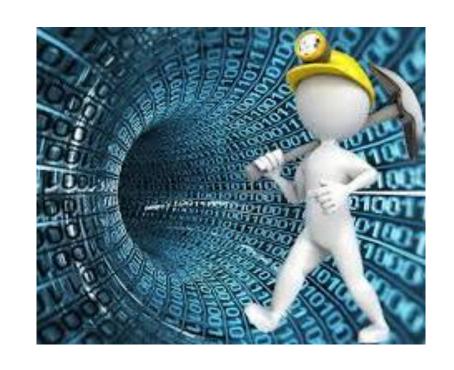
10. Is it OK for Max's *Livebetter* data to be used for research when he doesn't understand that's happening, despite it being in the privacy policy?

A. Yes

#### Challenges - General

11. Should individuals own all of their data and have complete control over its use?

A. Yes



Data mine-ing

## Challenges - General

12. Should we discard notions of individual data ownership and focus on data rights which allow for the balancing of benefits and harms?

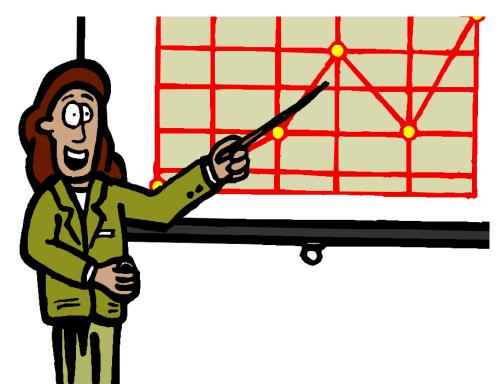
A. Yes



# Challenges - Explainable AI (XAI)

13. Should Max be given an explanation of the ICU database and *Diabins*?

A. Yes



# Challenges - XAI

14. Is it enough that Max believes the models are reliable and doesn't receive an explanation?

A. Yes



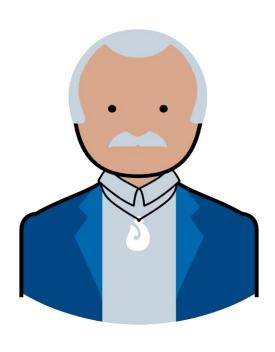
# Challenges – Trust

15. Should there be an independent body which oversees data use in

New Zealand?

A. Yes







"The challenge will be to ensure that innovation in AI is developed and used in a ways that are transparent, that address societal needs, and that are consistent with public values."

(Hugh Whittall, Director of the Nuffield Council on Bioethics)