

World Health Organization

Topic: The Role of Artificial Intelligence in Strengthening Healthcare Systems in Developing Nations

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Introduction:

The World Health Organization is one of the United Nations' (UN's) specialized agencies, which focuses on responding to global health issues and emergencies that may arise.

The United Nations' World Health Organization was founded on April 7th, 1948.

It was first created to handle and coordinate health affairs within the United Nations. Some key reasons behind the founding include the growing understanding of interdependent global health, the urgent need to coordinate international efforts to respond to global crises, and the establish health as a basic human right.

It mainly discusses and addresses health issues that concern the world and may lead to global disasters if left unattended. For example, responses for widespread diseases like yellow fever, brucellosis, tuberculosis, leprosy, and others. Health equity and universal health coverage are also prevalent in this committee: this very topic is one of the issues.

It mainly consists of health and help for the poorest sector of the world. Normally, the UN is divided into Departments. In the WHO, the departments are:

- Public health: This sector focuses on ensuring that healthcare services remain available to the general public and maintaining them as a basic human right.
- Infectious diseases: This sector specializes in researching different diseases that might pose a threat to global health in order to prevent outbreaks, aid in the development of a vaccine, and prevent pandemics from occurring.
- Mental health: This sector is similar to the Public Health faculty, except that it focuses on allowing psychological and/or psychiatric aid to be accessible to everyone.
- Maternal and Child Health: This sector specializes in ensuring that the more vulnerable members of society—children and mothers—have priority access to healthcare services, as they represent the future of humankind as a race.

The Role of Artificial Intelligence in Strengthening Healthcare Systems in Developing Nations addresses the health-related struggles that underdeveloped nations go through due to their lack of resources and workforce. This topic aims to assess the possibility of using AI-powered technology to help ease this situation.

Artificial Intelligence has formed an integral part of healthcare since 1951, when the term 'AI' was first used. Early systems like MYCIN were developed, which excelled at detecting bacterial infections and recommending antibiotics to treat them. While they weren't as widespread as they are currently, they proved that Artificial Intelligence is capable of decision-making when it comes to healthcare, and it has only been developed since then.

Global pandemics, such as the recent outbreak of the SARS-CoV-2 virus, have spread even farther due to a lack of healthcare systems all around the world, but especially in underdeveloped nations. Hundreds of thousands of deaths, and maybe even whole pandemics, could be prevented if this problem is addressed properly and solved promptly.

The current state of the developing countries on AI has improved since they can expand their research into medical treatments or develop ways to help the country get newer things to improve healthcare. However, there are unfortunately certain countries that struggle with infrastructure to run AI systems efficiently. The World Health Organization is actively working to find ways to improve infrastructure within these nations. They are using AI to improve various aspects of the healthcare system, such as the research aspect: Artificial Intelligence is capable of processing data that would take humans years in just a few seconds. This speeds up the development of new technology and allows for quick growth in healthcare systems worldwide.

The WHO has acknowledged the use of AI in health institutions, as well as the struggles that most health institutions and regulatory frameworks face due to the rapid and ongoing development of AI technology, as outlined in the Artificial Intelligence for Health document written by the World Health Organization. The committee has made it one of its goals to deliver AI health technology to the people and foster trust in it.

History of the Conflict

Artificial intelligence is a technology that gives computers the ability to perform human tasks, tasks that normally require human reasoning or intelligence. It is capable of analyzing the entirety of the Internet in just a few seconds, easing the process of research and immensely speeding up a process that would normally take up to months or even years. It is also capable of predictions, and while it may require verification, it is easily able to give researchers an idea of where to go and ease the process of decision-making.

Right now, it's already being used on the aerial detection of some diseases like cancer, analyzing patterns in a patient's medical history, and using current health data to predict possible risks.

On the other hand, AI could be used in the future to assist surgery through a surgery-robot, analysis of data to personalize treatments of each patient, inform of rapid changes in the patient's health, predict possible risks with the actual situation of the patients, and more.

There are various ways in which AI can and has already affected public health. One of its main uses is its outstanding pattern recognition systems: with such systems, disease surveillance and early warnings for potential outbreaks may occur, preemptively allowing for governments to take measures accordingly, and even for this very committee to discuss potential solutions to the issue.

Epidemiological Monitoring can also predict the spread of disease, while also estimating the number of cases accurately and letting public health officers make decisions accordingly.

AI can also be used for more practical means as well, such as health education, resource allocation, behavioral insights in people, and others.

Mostly, they are using machine learning, NLP (Natural Language Processing), and rule-based expert systems. These analyze the current world health care and how improvements have been made through the years. The AI learns from this and makes new improvements and new medical research to help doctors, medics, and other people who are constantly searching for cures for diseases.

Current Happenings

Currently, the main use of AI in healthcare is to ease the identification and diagnosis of certain conditions, such as cancer and heart disease. With due training and time, AI would be able to detect most diseases with an accuracy that traditional methods would never be able to achieve in just a fraction of the time, which will allow more time for professional doctors to apply treatment. Just speeding up the process may save thousands of lives, as a timely response can mean the difference between life and death.

Since the current AI has a lot of issues with misinformation, or it gathers the information from trustworthy websites, it may cause some information to go wrong, and this can cause a big issue for the healthcare system. That's why they use AI as a second option, since it still causes issues.

Data security and patients' privacy, since almost all the data comes from patients or places where the information is secret.

It scans the resources of the area in which the AI will improve over time, so the underserved areas can become optimal for the citizens around them. By analyzing the common issues among citizens, AI can grow to solve said problems and aid with future growth when new issues arise.

The current and greatest issue with AI technology is the lack of accessibility for developing countries. Unfortunately, only fully developed countries, such as the United States of America, the French Republic, the State of Japan, and others, have full access to this technology, creating worldwide inequality in healthcare systems. It's almost as if the quality of healthcare were proportional to the amount of resources available to a nation, which is something to be prevented: vulnerable populations are those that need this kind of technology the most.

In pandemics like COVID-19, AI has been used to detect early outbreaks of the virus worldwide, diagnosing patients and filtering false positives, and has helped in the development of the vaccine. Various examples include the Canadian AI company BlueDot identifying the very first viral outbreak of the disease in Wuhan, days before official announcements were made. Another company called DeepMind successfully used AI in order to predict the structure of the proteins found in SARS-CoV-2 and modeled its structure in 3D, easing vaccine development.

The lack of resources and digital literacy are major issues for the global community. In most developing countries, lacking infrastructure disallows advanced AI technology from performing in an efficient and timely manner, and in occasions, makes it error in its judgement more often and may create catastrophic situations such as wrong diagnoses on patients, which result in them getting the wrong treatment and allowing the disease to develop further, or the side effects of the treatment affecting the patient even further. The same situation can be achieved if there is a lack of digital and data literacy in medical professionals in such nations.

In some way, it can alter the information given since AI is still a new technology, it has issues, and it can miss, misunderstand data, or change the data given. In various cases, it is better to rely on statistics given by experts, information that may provide us with a better understanding of the situation.

International Actions & Programs

Various international bodies have already played an important role in transforming technology for the healthcare sector. The deployment of digital adaptation kits, led by the WHO, provides proper frameworks for AI to be implemented and allows complex AI systems to run smoothly, while ethical guidance is also used to ensure proper use of the technologies being provided.

- The **Global Initiative on AI for Health (GI-AI4H)** was launched in July 2023. This initiative is a joint effort between the World Health Organization, the International Telecommunication Union, and the World Intellectual Property Organization, and it aims to develop and prepare the world to welcome the use of AI technology in the healthcare sector.
- The **ITU-WHO Focus Group on AI for Health** is a group formed by the International Telecommunication Union and the World Health Organization to create standards for the use and evaluation of AI in health.
- The United States of America, the Kingdom of Sweden, the Swiss Confederation, the People's Republic of China, and the Federal Republic of Germany. The United States is the leader of innovation in this case: being a country with great financial power, research is actively being carried out, and new AI models are being developed, each with its own purpose and use.
- The own government of each country is a partner to bring the latest technology around the WHO. Various other NGOs are making a collective effort by investing in infrastructure and new technology as well.

The WHO encourages nations to do the following:

- To develop their technologies according to the healthcare needs of their citizens
- Strengthen governance, as AI needs close surveillance to ensure its proper use and functioning
- Investing an amount of resources in strengthening AI systems
- Promote digital healthcare systems with open standards

Among other recommendations. Other Intergovernmental Organizations state that sustainability is also a factor that has to be kept in mind during the development of new technologies.

The State of Israel, the Republic of India, and the United Arab Emirates are the main nations that have used AI solutions for the healthcare of their own countries. The State of Israel is notably the leader on this, given their various collaborations between startups, researchers, and international hospitals, making the process of implementing AI for diagnosis and early prevention more efficient than in other nations.

As of 2024, significant international funding has been mobilized to advance digital health, including applications of artificial intelligence. Key contributions include approximately \$1.5 billion USD from an unspecified source, along with an initial grant of \$30 million USD aimed at strengthening general healthcare, including AI initiatives. The World Bank has allocated around \$4 billion USD specifically for digital health, covering both research and implementation of AI solutions. Meanwhile, the European Union, through its partnership with the WHO, has contributed approximately \$414 million USD to health-related initiatives, further supporting the global digital health innovation ecosystem.

According to the WHO, at least 3.5 billion people in the entire world lack access to basic healthcare, which constitutes half of Earth's population. AI is far more accessible and affordable than conventional healthcare systems, and with a proper infrastructure and investment, it should be able to provide the entire world with access to healthcare.

AI needs accurate and expansive data on its citizens and their general quality of life; otherwise, it's not going to perform well at all. Most developing countries lack accuracy or the data altogether, which will allow for AI systems to make mistakes more often and risk the lives of thousands of people from these inaccuracies. Privacy and security concerns also exist, as AI uses the information of its users to learn, which might make some users uncomfortable.

The risk of misdiagnosis and clinical errors is undeniable, and without the proper knowledge or training to detect such false positives, AI may end up causing more harm than good by diagnosing and recommending improper treatments. By depending on AI, human doctors will eventually lose some of their skills as well, by reducing their critical thinking capabilities: these are critical for when AI fails to work, and overdependence on it will result in preventable deaths. Accountability gaps also exist: legal responsibility for when AI fails to work during critical situations is unclear.

Fully developed countries have the monetary funds to invest in healthcare systems and develop them globally with combined effort, making AI-based healthcare systems standard and ensuring that they can be used in every nation. Additionally, since AI learns from experience, the data it recollects from certain nations can be used in every single system available, making it easier to prevent outbreaks detected in certain nations and prevent pandemics.

Organizations taking action to globalize AI-based healthcare systems are inherently those responsible for promoting its healthy and proper use. Organizations such as the World Health Organization, the International Telecommunication Union, OpenAI, PATH, among others, are responsible for developing and promoting the responsible and ethical use of AI.

But not only have organizations promoted the responsible use of AI, in 2023, the United States of America, the State of Japan, the Federal Republic of Germany, the United Kingdom of Great Britain and North Ireland, the French Republic, the Italian Republic and the Dominion of Canada established the international guiding principles of artificial intelligence; these principles are like a code of conduct for developers and users of AI.

United Nations bodies:

- **United Nations Children's Fund**
 - Developed the Digital Health Centre of Excellence
 - Promotes the use of AI for maternal and newborn health, especially in developing countries
 - Implements the digitalization of birth registrations and health records for simpler AI accessibility
- **United Nations High Commissioner for Refugees**
 - Built the Data and Digital Innovation Programme
 - Structured the Digital Transformation Strategy
 - Developed an AI capable of predictive analysis and epidemic modeling
- **World Health Organization**
 - Launched the Global Strategy on Digital Health
 - Published ethical guidance for the use of AI in healthcare
 - Launched the Global Initiative on AI for Health

- **General Assembly**
 - The GA promotes the WHO-ITU partnership to guide and ensure AI systems are implemented safely and effectively.
 - The 2023 Resolution on AI encouraged the global use of AI for various purposes, among these its implementation in low- to middle-class healthcare systems.
 - The GA approved and continues to promote the WHO Global Strategy on Digital Health, a program that encourages the integration of AI technology in global healthcare systems.
- **Office of the High Commissioner for Human Rights**
 - In 2024, this branch released the Foundational Paper on Generative AI, which emphasizes the ethical and responsible development of generative AI.

IGOs:

- • **African Union:** In 2024, the AU started the development of a phased framework to help African regulators adopt AI in healthcare, but not only is it planned for countries to adopt it gradually, but they have also been considering the diverse needs of each nation. This framework offers practical pathways for the integration of AI in all countries while addressing risks, emphasizing ethical oversight, and reinforcing public trust.
- • **European Union:** The EU has developed several programs for the integration of AI in the health care system, for example: EU4Health / HaDEA; in January of 2024, the EU announced its 44 new grants to support the infrastructure of digital health and secure access for the public.

NGOs:

- • **Path:** Right now, Path is leading a large clinical trial in Nairobi, Kenya, to evaluate the effectiveness of the implementation of certain digital, AI-powered, healthcare systems, for example, the integration of the clinical medical support tool for medical registers.
- **Partners in Health:** PIH has developed several technological innovations in the healthcare system for the detection and registration of medical information, for example, the screening for tuberculosis, and the x-rays of the thorax region are screened for the detection of early tuberculosis. Also developed various divides for the ease and speed of performing an ultrasound.
- **Amref Health Africa:** This NGO is responsible for the development of an AI tool used to predict malnutrition hotspots, taking advantage of the simple systems that Microsoft Azure provides to the general public. Additionally, its partnership with the Kenyan Ministry of Health is using 'AI-powered analytics within health management to deliver timely, targeted, high-impact interventions'.
- **One HealthTech:** While not directly developing AI by itself, OHT has taken steps to encourage the ethical use of AI, mainly focusing on responsible design and equality in availability. For example, events like 'OHT London - AI in Healthcare Sanctuary' exist to explain how Large Language Models (LLMs) are being used, and how this impacts inclusion.

Block Analysis:

- Republic of India

Current situation: India has been rapidly improving its social and private medical system. Because of the rapid development of the medical system, the government of India has been exploring AI in different ways for it to be applied in the healthcare system.

What has been done: The government has published national AI strategy documents and sector reports for the industry with state demos of AI imaging and scanning programs. Besides, India started its participation in international regulatory initiatives for AI.

Investment: The development of these pilots is a priority for the Indian governors, because it's calculated that there's been an economical flow of 1.6 billion dollars worth of AI implementation on the Indian government.

What has been said by the government: Because of the big success of the implementation and development of AI demos the Indian governors have supported for the "responsible" application of AI in health, stressing ethics, data protection, and clinician oversight

What is expected to happen: It is expected for these "pilots" to be perfectionized for distribution throughout the country, after that the government declared that there are already some new areas for AI to be implemented in healthcare. Besides, it is expected for the country to join international regulatory networks for Health-AI oversight, sandboxes, and public-private partnerships.

- Federal Republic of Nigeria

Current situation: Nigeria has an AI rich ecosystem, there's been high development of AI inside the country but there hasn't been an actual solid approach for AI inside the healthcare system. The interest is rapidly increasing making possible the integration of AI.

What has been done: In 2024 Nigeria created and presented a strategy plan for AI implementation and has already started the creation of institutions with the purpose of guiding for the adoption of AI in different sectors.

Investment: There has not been an established investment from the government of Nigeria, the effort for developing has not been completely part of the funding of it, the efforts have been funded by public pilot budgets, development partner grants, and private/venture capital in healthtech

What has been said by the government: The government has publicly established that is a priority the development of AI in Nigeria and for the creation of capable buildings for the creation and development of AI.

What is expected to happen: It is expected that the Nigerian government implements NAIS roadmaps, construct governance and regulatory guidance, support pilot programmes for diagnostics and surveillance, and mobilise partners for the creation of buildings capable for the development of it.

- Federative Republic of Federative Republic of Brazil

Current Situation: In remote areas of Brazil, there are resource shortages and inequality despite the country's robust public health system (SUS).

Resources Invested: Under the Ministry of Health, Brazil allocated more than US\$50 million to digital health pilot projects.

Government Stance: Promotes digital platforms and artificial intelligence to enhance access to universal health care.

Measures Taken: During COVID-19, telemedicine was expanded, and AI projects for diagnostics were developed.

Cooperation: Cooperates with universities, private tech firms, and PAHO/WHO.

Refugees: Operation Welcome (Operação Acolhida) provides shelter to Venezuelan refugees.

- Republic of Kenya

Current Situation: Currently, Kenya is one of Africa's biggest innovation hubs, with the use of mobile health tools rising steadily.

Resources Invested: As of 2025, the government has invested over US\$40 million on digital health strategy.

Government Stance: The government strongly stands with and promotes AI as a way to reach underserved populations around the world.

Actions Taken: Kenya has already implemented mobile maternal health, diagnostic applications based on AI, as well as having established partnerships with local startups.

Cooperation: Cooperates with WHO, UNICEF, and with private sector

Refugees: Kenya hosts over 500,000 refugees from Somalia and South Sudan

- People's Republic of Bangladesh

Current Situation: Bangladesh struggles greatly with its healthcare system, failing to keep up with an increasingly dense population

Resources Invested: Since 2018, it has invested over US\$150 million in digital health

Government Stance: Bangladesh's government sees AI as an essential part of digital health for universal coverage

Actions Taken: The government has launched COVID-19 tracking apps during the pandemic, as well as various telemedicine platforms

Cooperation: Bangladesh cooperates with the WHO, UNDP, and tech companies in the private sector

- Republic of Indonesia

Current Situation: Though Indonesia's healthcare system isn't bad, its large population and the geographical position of the islands that make up the country complicate access to healthcare services to some citizens

Resources Invested: The government has invested over US\$300 million in the modernization of healthcare systems, including in digital health and AI

Government Stance: The government actively promotes AI for the surveillance of disease and telemedicine

Actions Taken: Indonesia has introduced AI chatbots for the treatment of COVID-19, as well as an expanded network of telemedicine at a national scale

Cooperation: Indonesia collaborates with WHO and UNICEF as a member state, as well as with tech companies to develop technologies

Refugees: Indonesia hosts very few refugees, mainly from African countries

- United Mexican States

Current Situation: Mexico's main issue is the disparity for health access between citizens that live in urban areas and those who live in rural areas

Resources Invested: Yearly, the government invests 5.5% of its Gross Domestic Product in developing healthcare. Since 2019, it has invested approximately US\$120 million in digital health

Government Stance: The government encourages the use of AI to facilitate telemedicine for rural areas of the country

Actions Taken: Digital vaccination networks and expanded e-health systems are in place, managed by the government and accessed by public and private health companies alike

Cooperation: Mexico works with WHO, as well as with the World Bank and OECD

Refugees: Mexico participates in UNHCR programs, making it easier for it to receive refugees: mainly from Venezuela and Central America

- Federal Democratic Republic of Ethiopia

Current Situation: Ethiopia is one of the nations with most struggles respective to infrastructure, and heavily depends on the aid of more developed nations

Resources Invested: Due to a lack of resources, the amount of investments remains low to this day

Government Stance: Ethiopia is committed to the full transformation of the health sector, regardless of what is implemented

Actions Taken: The government launched a national digital health blueprint in 2020

Cooperation: This nation works with the WHO, USAID, and the African CDC

Refugees: Despite its lack of resources, Ethiopia hosts over 900,000 refugees, mainly from countries like South Sudan, Somalia and Eritrea

- United States of America:

Current situation: The US leads the private investment and development for AI in the healthcare system. Large and private investments have accelerated the implementation of AI in the whole country for the implementation and the creation of strategies for new AI.

What has been done: The US has been very interested in the creation and application of AI because of it the US has funded AI-health research, issued regulatory guidance and created strategic plans and pilot programs for real-world evidence in AI.

Investment: The private investment for AI in the US has reached high levels of economic activity, reaching an incredible amount of 100 billion US Dollars approx. on the whole country. Because of it, the federal funding lines have been rapidly increasing for specified programs.

What has been said by the government: Federal forces have established that the implementation of AI could be and will be important but always protecting patient safety, privacy and equitable access.

What is expected to do: The US is expecting for initials of this year to increase targeted grants and build regulatory pathways for a more easy development and implementation of AI.

People's Republic of China

Current Situation: China is a global leader in AI development, being the origin country of popular models like DeepSeek, and digital health expansion

Resources Invested: China has invested over US\$10 billion in AI models, which includes funds for the development of AI models trained for healthcare purposes

Government Stance: In China, AI implementation in healthcare is a priority to modernize public healthcare

Actions Taken: China has developed countless AI diagnostic tools and systems, which are widely used in telemedicine and rural health apps

Cooperation: China is one of the main investors in the WHO, as well as in the African Union. They are also partners of the Belt and Road Initiative

Refugees: China is widely known to not accept large numbers of refugees, and access remains limited

- Republic of Ghana

Current Situation: Though the nation has a strong interest in developing digital health systems, its capacity remains limited due to a lack of resources

Resources Invested: A large part of the monetary funds invested come from donors, though the government has also invested. In total, the resources invested approximately come around to US\$20 million dollars

Government Stance: The government has a strong interest in developing digital health, including AI, and believes that it should be used for diagnostics and databases

Actions Taken: Ghana has released AI health pilots, a few of which include mPharma and Zipline drones

Cooperation: Ghana is a member state of WHO, but is also partnered with the World Bank and companies in the private sector

Refugees: Ghana hosts around 15,000 refugees, most of which come from Côte d'Ivoire

- Republic of Uganda

Current Situation: The Ugandan government is burdened, the nation being prone to infectious diseases, especially due to its lacking health infrastructure

Resources Invested: Currently, it is investing 6% of its GDP in healthcare development, though it heavily relies on external aid for digital health pilots

Government Stance: Due to its heavy burden, it sees digital tools as a critical priority to reach rural communities

Actions Taken: The Ugandan government has planned national e-health strategies, as well as AI pilots, but only for Malaria and HIV

Refugees: Uganda hosts around 120,000 refugees from varying nations

- Republic of Rwanda

Current Situation: Rwanda has built itself a reputation for its airtight digital health policies

Resources Invested: The Rwandan government invests tens of millions of dollars annually on digital health technologies, as well as firms that develop them

Government Stance: Currently, AI is a priority for universal healthcare coverage within the nation

Actions Taken: Rwanda has implemented AI-based diagnostic tools, as well as the use of Zipline drones for medical deliveries

Cooperation: Rwanda heavily cooperates with WHO, the World Bank, and private tech companies

Refugees: Rwanda hosts around 120,000 refugees, mainly from DRC and Burundi

- Republic of Senegal

Current Situation: Despite its limited resources, Senegal is steadily expanding its digital healthcare systems and AI pilots

Resources Invested: The government invests around US\$15 million on health IT projects, which usually include AI development

Government Stance: The government is completely committed to innovating with technology to benefit the health sector

Actions Taken: The government has developed national health information systems and mHealth programs

Cooperation: Senegal works with the WHO, USAID, and counts with French cooperation to develop its healthcare system

Refugees: Senegal hosts over 15,000 refugees, mainly from West African nations

- United Republic of Tanzania

Current Situation: Tanzania struggles with making healthcare accessible for rural areas of the country

Resources Invested: As of 2025, the government has allocated US\$50 million to invest in digital health initiatives

Government Stance: This nation sees AI as a way to support maternal and child health services, and is working to train AI for this use

Actions Taken: The government has launched a digital health strategy, as well as various telemedicine pilots

Cooperation: Tanzania works with WHO, the World Bank, and USAID

Refugees: The United Republic of Tanzania hosts over 250,000 refugees, mainly from DRC and Burundi

Key Points:

- Artificial Intelligence (AI)
 - The application of computer systems that are able to perform tasks and outputs that would normally require human intelligence
- Public health
 - A global collective effort to prevent disease, prolong life, and promote health for populations, rather than individuals
- Health equity
 - The equal opportunity for all human beings to access healthcare and achieve their best health
- Digital divide
 - The gap between people who have access to computers and the internet, and those who don't
- Automated diagnosis

- The use of computer systems (particularly AI) to identify the root causes of problems by analyzing available data
- Data privacy
 - A person's right to maintain control over their personal information, and the practices that govern how organizations and individuals can use personal data ethically and legally
- Medical ethics
 - The study of moral problems that establishes the framework of what medical professionals should do when faced with said dilemmas during patient care and research
- Telemedicine
 - The remote delivery of healthcare services, with the use of telecommunications to connect the patient with the providers over long distances
- Machine learning
 - The capability of AI to learn from given data to make decisions without being explicitly ordered by the user to do so
- Healthcare infrastructure
 - A combination of physical structures, equipment, technology and organizational systems to enable the delivery of healthcare services

Key Questions:

1. In which countries should the health system be optimized with artificial intelligence, and how could it be implemented?
2. Is it possible to use machine learning to optimize technological frameworks in developing nations?
3. Should investing in digital literacy take priority over investing in AI technology itself?
4. What types of AI applications are currently being prioritized in digital health initiatives funded by international organizations?
5. How are the \$1.5 billion USD in unspecified international funding being distributed across regions and AI-based healthcare interventions?
6. What is the strategic focus of the World Bank's \$4 billion USD investment in digital health, particularly regarding AI implementation in low-resource settings?
7. How is the \$30 million USD grant for strengthening general healthcare systems integrating artificial intelligence to improve service delivery?
8. In what ways is the European Union's \$414 million USD partnership with WHO supporting AI innovation in healthcare for developing nations?

9. What safeguards or regulatory frameworks are being put in place to ensure ethical and equitable use of AI in health systems of developing countries?
10. How are local health ministries and governments being involved in the planning and deployment of AI tools funded by international donors?
11. What measurable outcomes or indicators are being used to assess the impact of AI on healthcare delivery in these international initiatives?
12. How can AI-driven healthcare solutions be made sustainable in the long term, beyond the duration of international funding?

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