Insights:
Clinician of the Future attitudes toward AI
Databook

July 2024

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Nicola Mansell

Elsevier's Clinician of the Future Programme

Objective: To elevate the voices of doctors and nurses globally by **exploring global trends and changes that will impact the future of healthcare**, so we can all be ready to support them.

2022

- **Online survey** of **2,838** clinicians in 111 countries.
- **KOL roundtables** in China, USA & UK.

Themes:

- Impact of Covid-19
- Digital Health Technologies
- Evolving Skillsets
- Health inequity

2023

- **Online survey** completed by **2,607 clinicians** in 116 markets.

Themes:

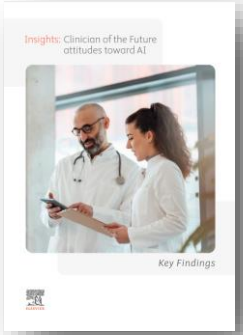
- Value-based care
- Patient empowerment
- Telehealth
- Generative AI
- Climate sustainability
- SDOH

- **Online survey** with **2,212 medical & nursing students** across 91 markets.
- **Roundtables** with academic leaders in the USA & UK.

Themes:

- Career outlook
- Patient expectations
- Future of healthcare
- Generative AI

2024



- **Online survey** with **1,007 clinicians** across 85 countries entirely focused on AI.
  Key Findings are here https://tinyurl.com/ai-cotf

Themes:

- Usage in clinical practice
- Perceptions & future expectations
- Current preparations & gaps in the hospital setting
- Use cases in clinical practice

All reports and full datasets free to access on www.elsevier.com/clinician-of-the-future

Chapters by Theme

Data Breakdowns Included

• **Persona (Doctors & Nurses)**	NB. included in the total but are not broken out
• Region	N=14, 1% of total, prefer not to say where they live
• Key Markets	
• Years Active	N=79, 8% of total, prefer not to say how long they have been active in their area of work
• Country Income Band *grouped as per the Word Bank*	N=14, 1% of total, prefer not to say where they live. Also, n=5, 0.5% of total, live in low-income countries (n too low to breakout)

Back to home

1. Awareness of AI

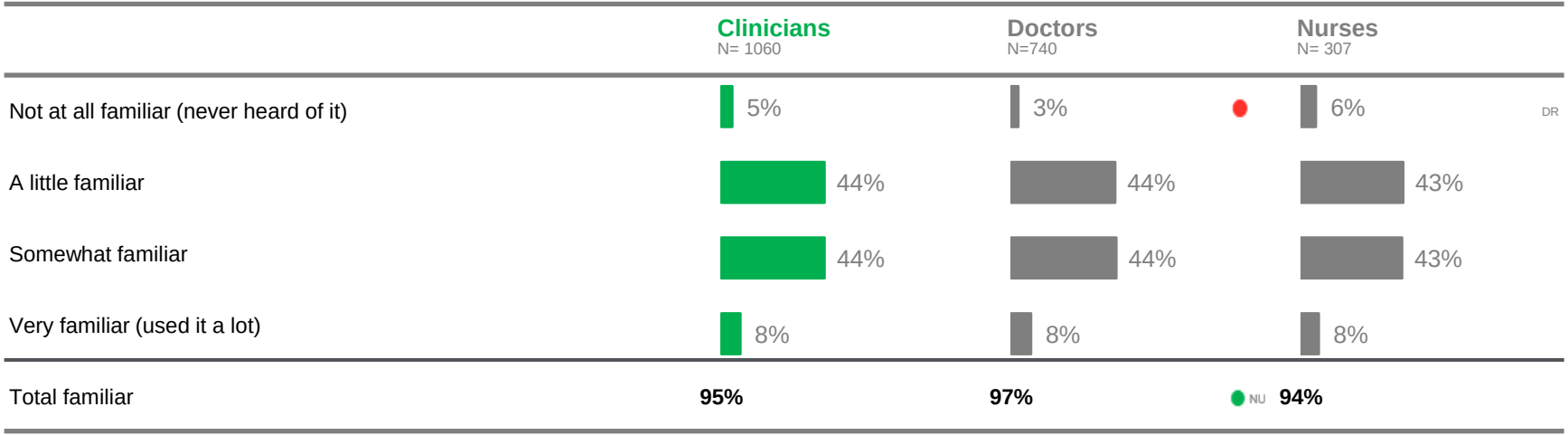
Theme 1

Awareness of AI

To what extent are you familiar with AI? (only shown by persona, region, key market and country income band). Subsequent statistics exclude those not familiar with AI.	Slide 7
Which of these AI products, if any, have you heard of before today? (only shown top 8)	Slide 11

Back to home

Few clinicians have never heard of AI, though awareness is higher for doctors than nurses



Questions: To what extent are you familiar with AI?

Base: n= 1060

Clinicians

Back to home

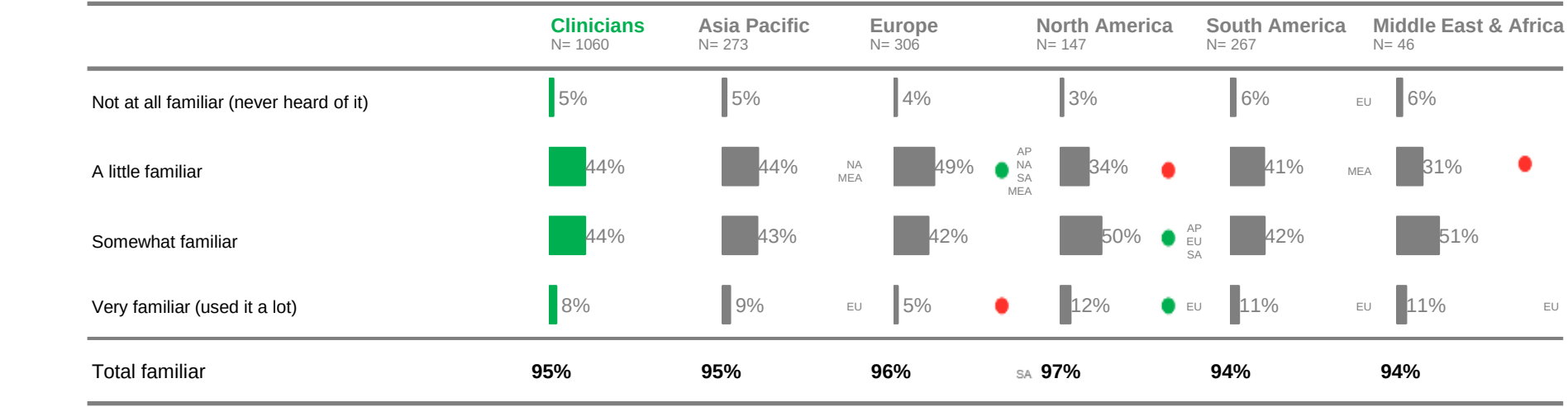
Significantly higher/ lower than…

Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

While clinicians worldwide are familiar with Artificial Intelligence, North American clinicians are most likely to say they are very familiar



Questions: To what extent are you familiar with AI?

Base: n= 1060

Clinicians

Back to home

Significantly higher/ lower than…

Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Clinicians in the USA are most likely to say they are very familiar with AI

	Clinicians N= 1060	USA N= 134	China N= 103	India N= 42
Not at all familiar (never heard of it)	5%	4%	0% CH	1%
A little familiar	44%	35%	44%	59% US CH
Somewhat familiar	44%	49%	47% IN	35%
Very familiar (used it a lot)	8%	13% IN	9%	4%
Total familiar	**95%**	**96%**	**100%** US	**99%**

Questions: To what extent are you familiar with AI?

Base: n= 1060

Clinicians

Back to home

Significantly higher/ lower than…

Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Lower-middle-income clinicians are less likely to be familiar with AI

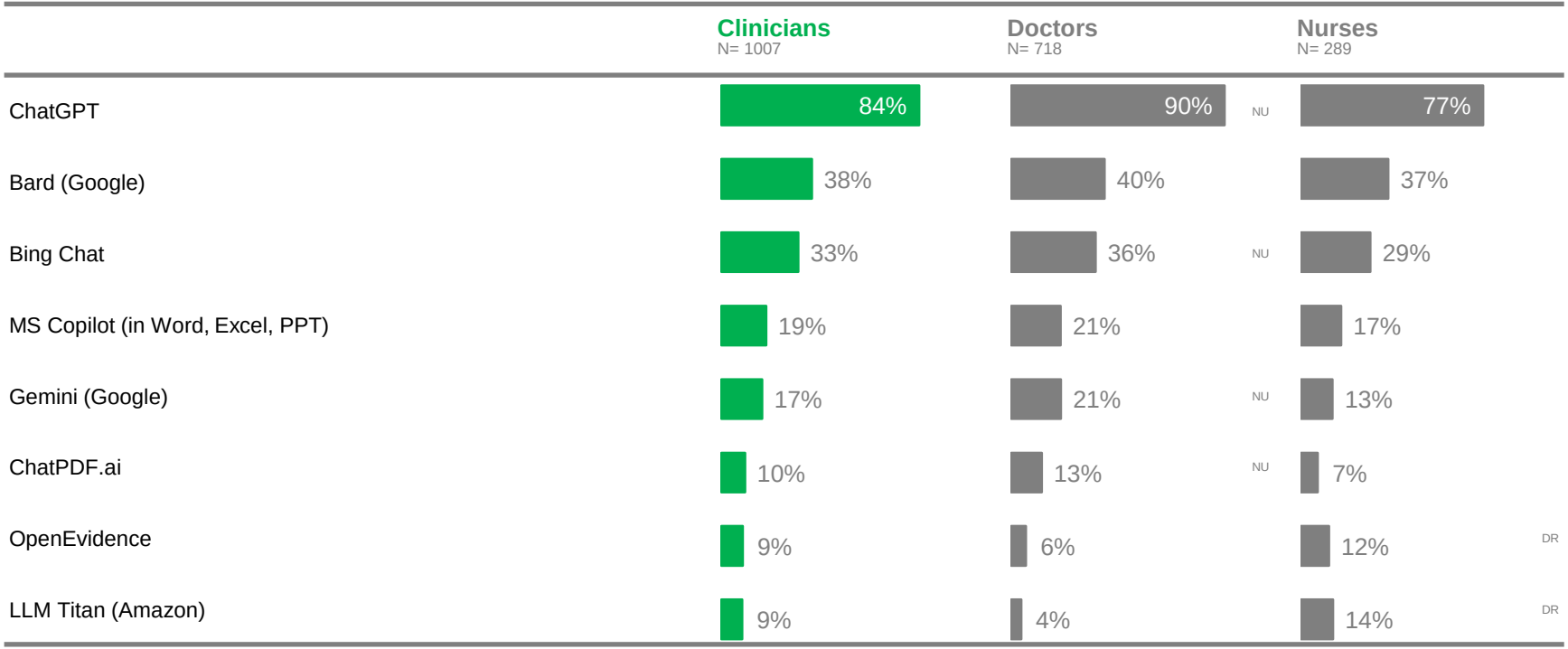
	Clinicians N= 1060	High Income N= 557	Upper-Middle-Income N= 361	Lower-Middle-Income N= 118
Not at all familiar (never heard of it)	5%	5%	3%	8% HI
A little familiar	44%	42%	43%	51% HI
Somewhat familiar	44%	45%	45%	37%
Very familiar (used it a lot)	8%	8%	9%	5%
Total familiar	**95%**	**95%** LM	**97%** LM	**92%**

Note. Subsequent statistics exclude those not familiar with AI.

Questions: To what extent are you familiar with AI?

Base: n= 1060

For those aware of AI, nine in ten (90%) of doctors are aware of ChatGPT



Note: Only top 8 products shown

Clinicians

Back to home

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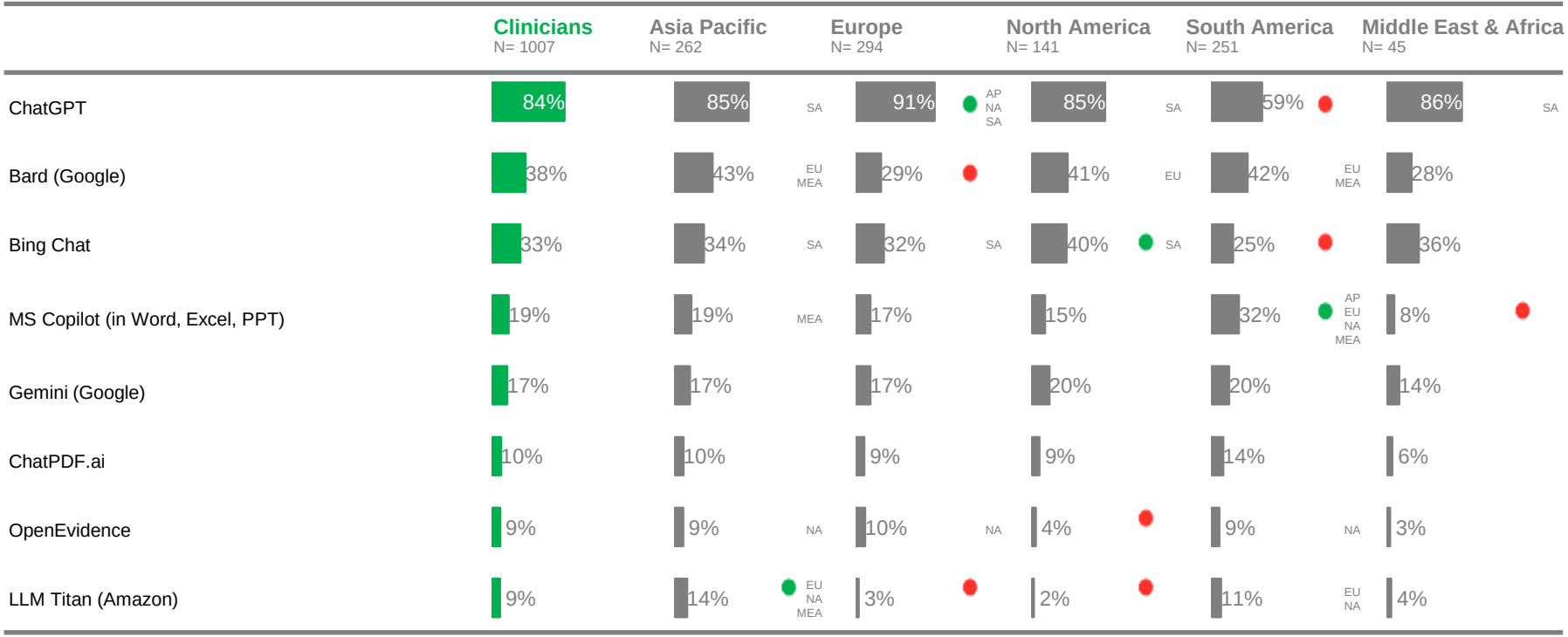
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Questions: Which of these AI products, if any, have you heard of before today?
Select: all that apply
Base: n= 1007

ChatGPT is the most familiar AI tool to clinicians worldwide



Note: Only top 8 products shown

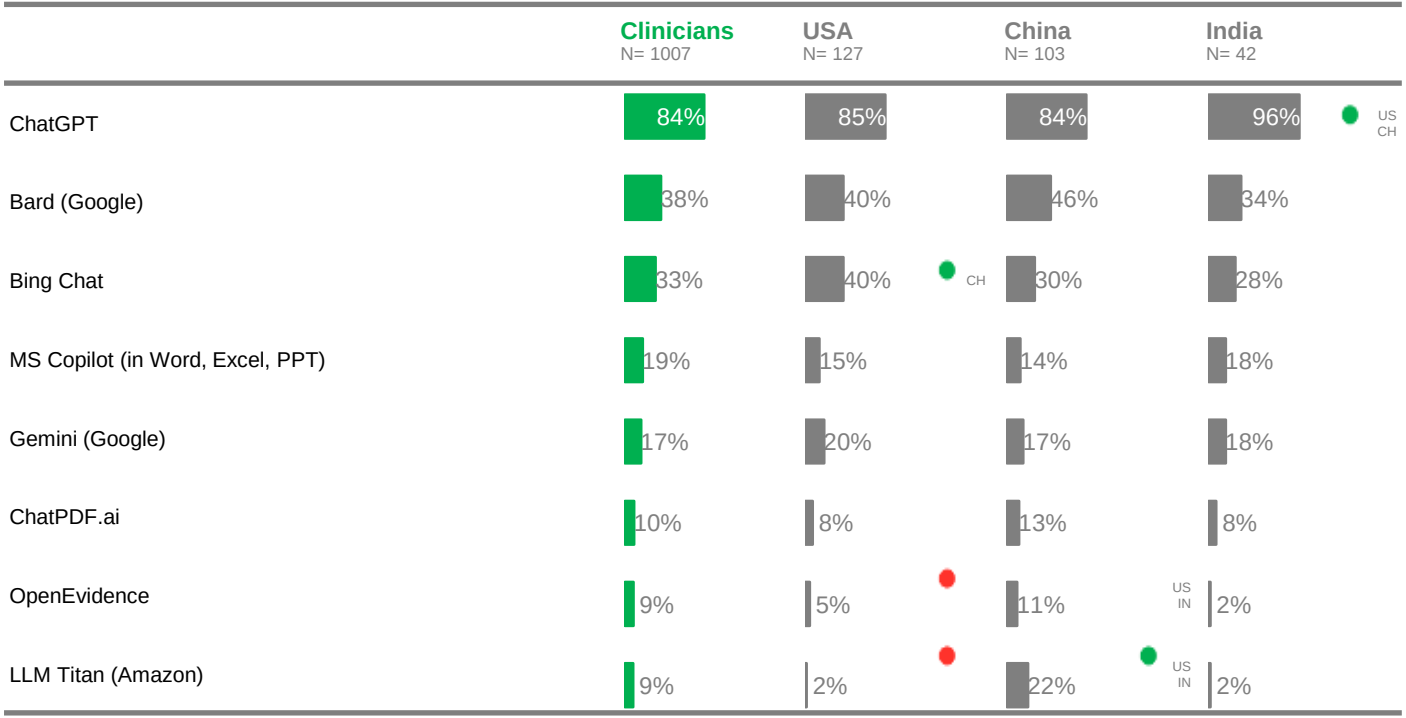
Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Questions: Which of these AI products, if any, have you heard of before today?
Select: all that apply
Base: n= 1007

Of those aware of AI, almost all (96%) of Indian clinicians are aware of ChatGPT



Note: Only top 8 products shown

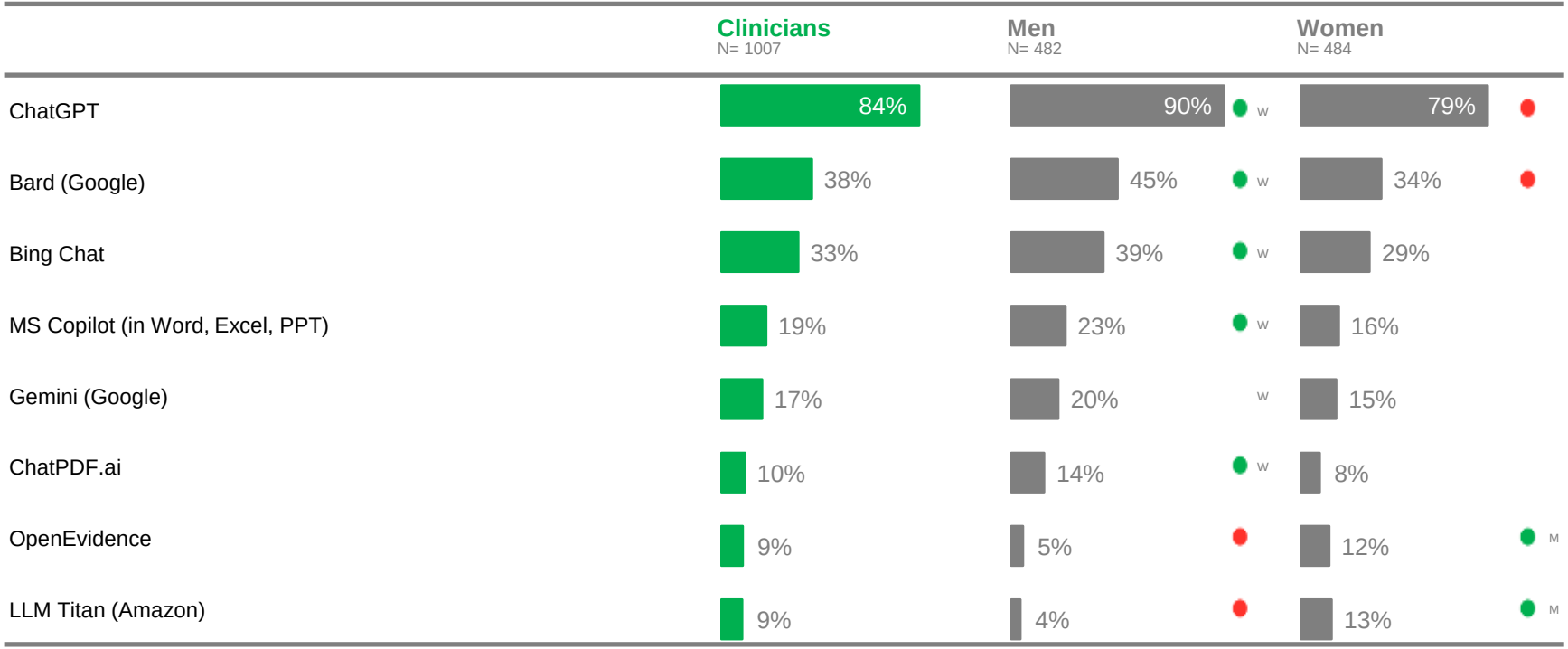
Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Questions: Which of these AI products, if any, have you heard of before today?
Select: all that apply
Base: n= 1007

ChatGPT is most familiar AI tool, this is higher among men



Note: Only top 8 products shown

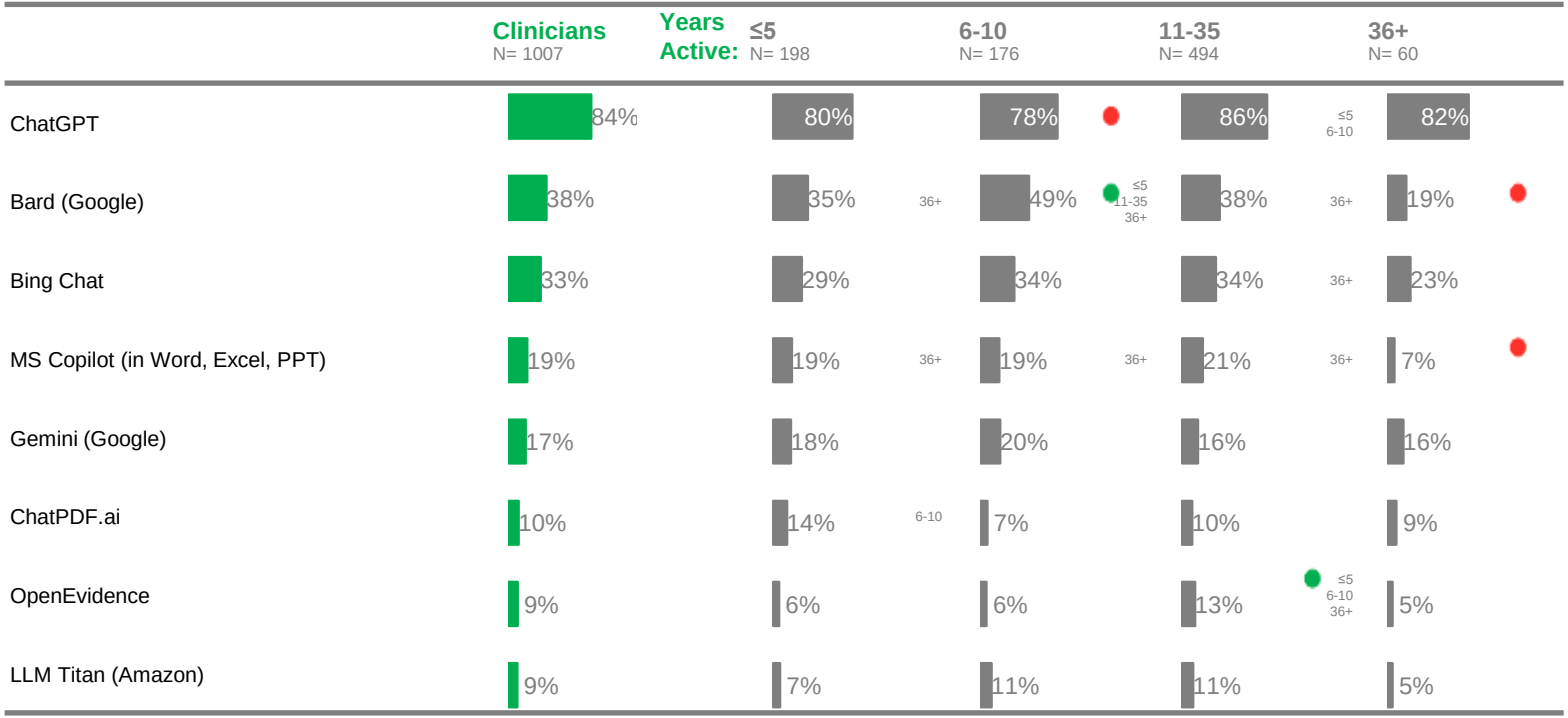
Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Gender/Generation (indicated by first letter e.g. M= Men)

Questions: Which of these AI products, if any, have you heard of before today?
Select: all that apply
Base: n= 1007

ChatGPT is by far the most well-known AI product across all years of experience in work



Note: Only top 8 products shown

Questions: Which of these AI products, if any, have you heard of before today?
Select: all that apply
Base: n= 1007

Clinicians

Back to home

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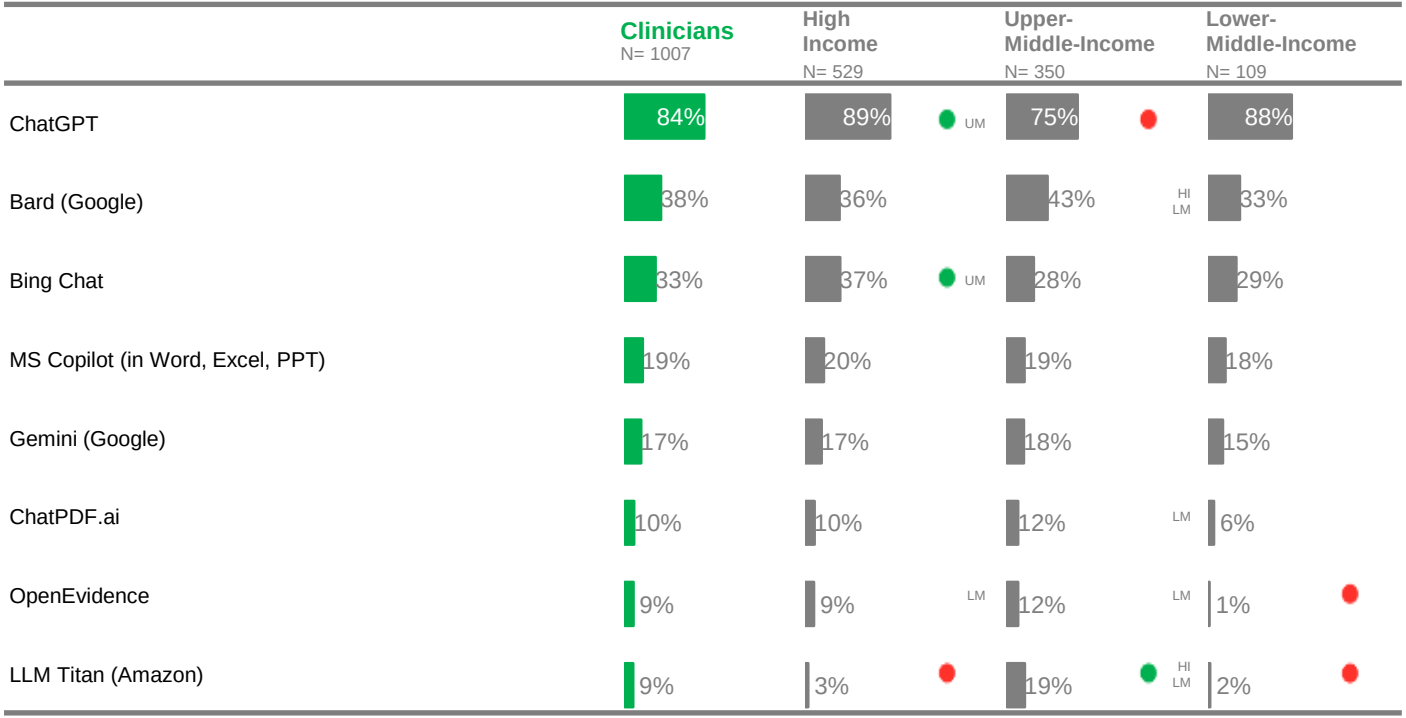
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Clinicians in high income countries are more likely than average to have heard of ChatGPT



Note: Only top 8 products shown

Questions: Which of these AI products, if any, have you heard of before today?
Select: all that apply
Base: n= 1007

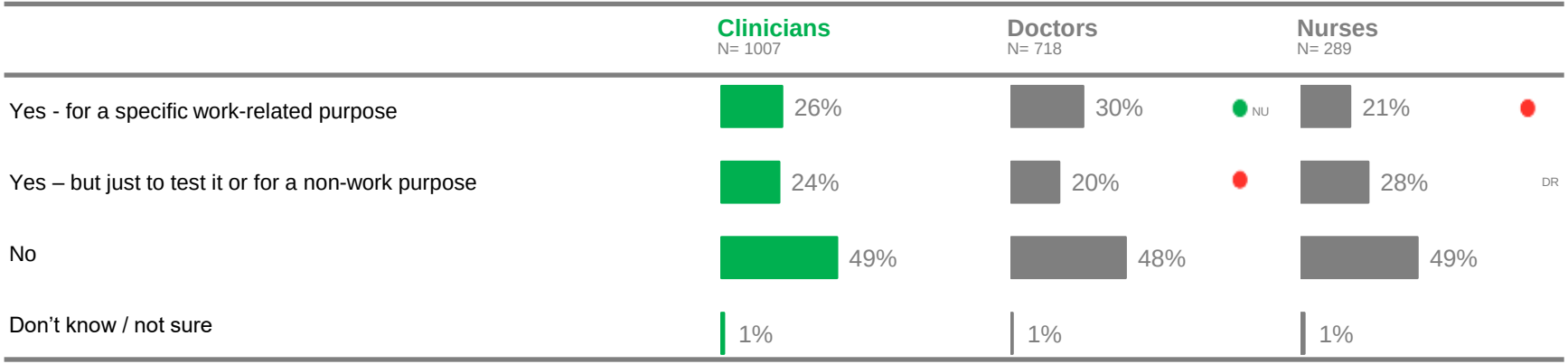
2. Usage of AI

Theme 2

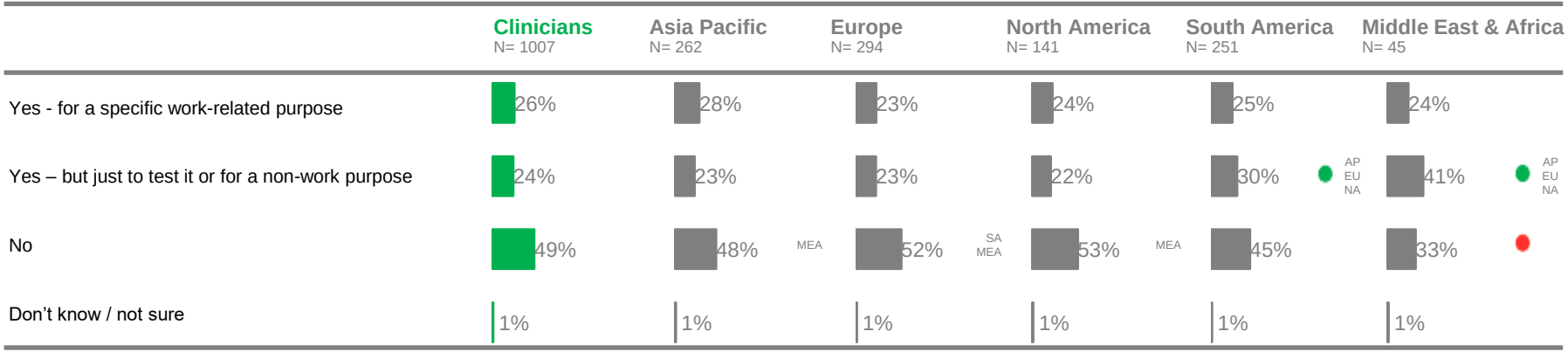
Usage of AI

Back to home

Of those who are familiar with AI, over half have used it. 3 in 10 doctors and 2 in 10 nurses have used AI tools for their work



Of those who are familiar with AI, MEA clinicians are most likely to have used it for any purpose



Questions: Have you used an AI (including generative AI) product or an AI feature on a product you use regularly?

Base: n= 1007

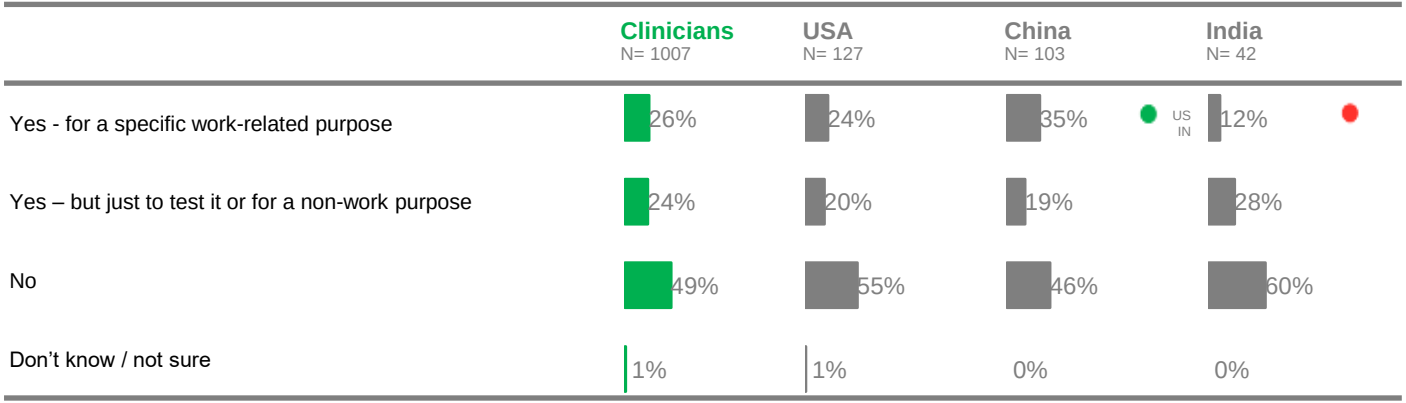
Significantly higher/ lower than…

Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Of those who are familiar with AI, over a third of Chinese clinicians have used an AI product or feature for work



Questions: Have you used an AI (including generative AI) product or an AI feature on a product you use regularly?

Clinicians

Back to home

Significantly higher/ lower than…

Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Base: n= 1007

Of those who are familiar with AI, there is little difference is use of AI by years active in field

	Clinicians N= 1007	Years Active: ≤5 N= 198	6-10 N= 176	11-35 N= 494	36+ N= 60
Yes - for a specific work-related purpose	26%	23%	30%	27%	23%
Yes – but just to test it or for a non-work purpose	24%	29%	23%	24%	18%
No	49%	47%	47%	48%	58%
Don't know / not sure	1%	1%	0%	1%	2%

36+

Questions: Have you used an AI (including generative AI) product or an AI feature on a product you use regularly?

Clinicians

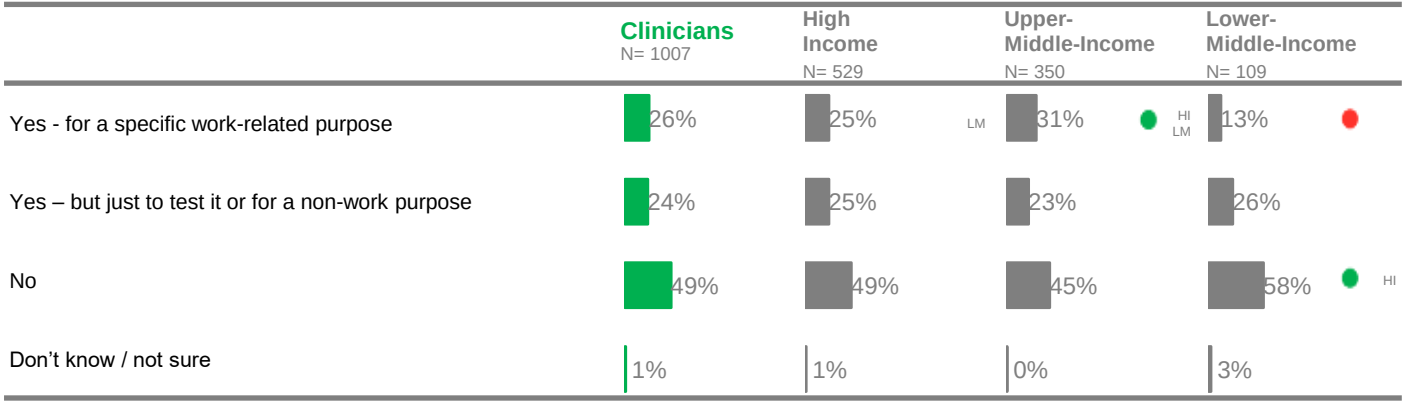
Back to home

Significantly higher/ lower than…
Significantly higher than…

Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Base: n= 1007

Of those who are familiar with AI, a quarter have used AI for work. In lower-middle-income markets this usage for work goes down to approximately one in seven



Questions: Have you used an AI (including generative AI) product or an AI feature on a product you use regularly?

Clinicians

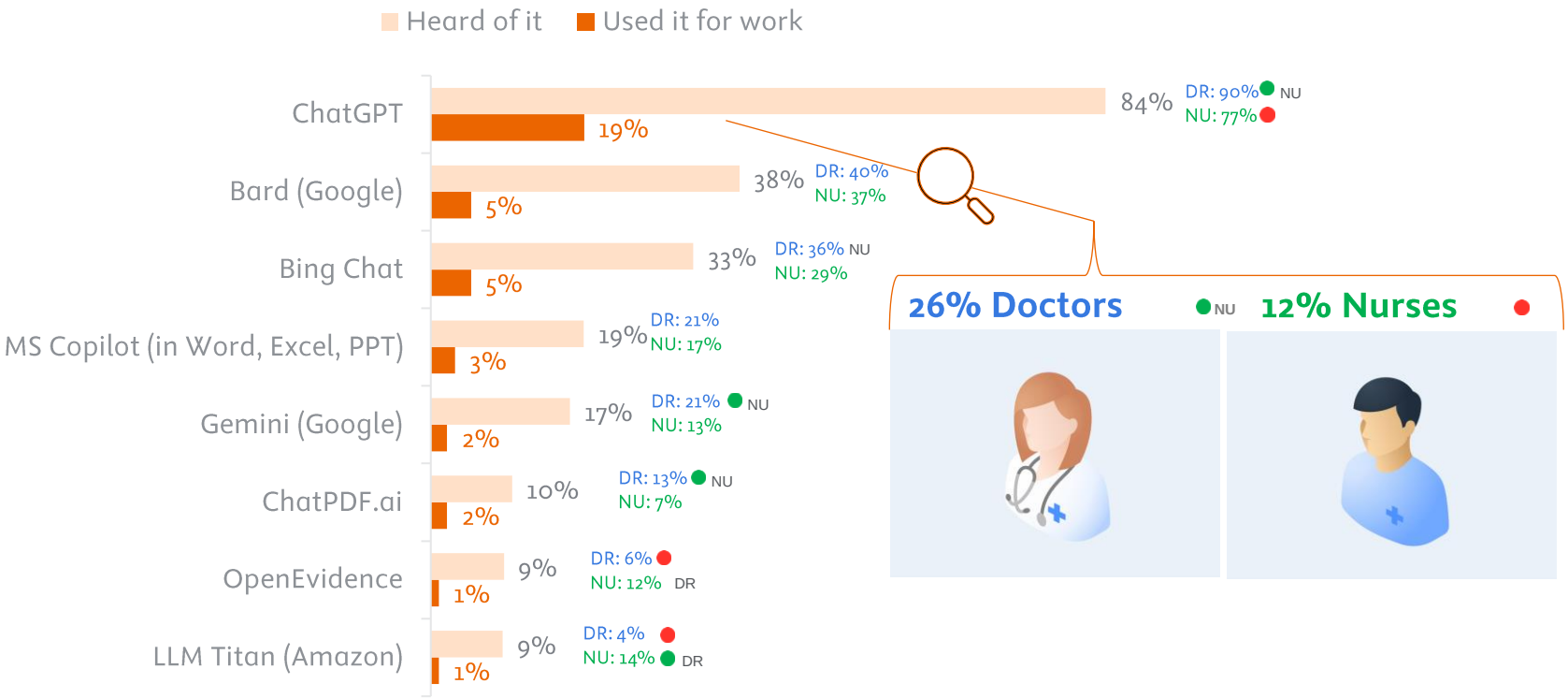
Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Base: n= 1007

ChatGPT is by far the most well-known AI product

with nearly a fifth having used it for a work purpose overall; significantly higher among doctors than nurses



Q: Which of these AI products, if any, have you heard of before today?
Q: Which, if any, AI products or AI features have you used for work purposes?
Base: n=2,999

Top 8 by awareness shown. Other AI tools prompted: *Llama (MetaAI), SciSpace, Merative (IBM Watson Health), OpenAlex, Elicit, Med-PaLM, Claude (Anthropic), Article crafter, Scite.ai, Paper Digest, Hippocratic AI, Bloom One (Bloom AI), Iris ai, EvidenceHunt, Consensus, GlassHealth, Jenni, Lateral.io*

ChatGPT is the AI tool most used for work purposes by clinicians, although only by 1 in 5. Other tools generally have low use across regions

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	Clinicians N= 1007	Asia Pacific N= 262	Europe N= 294	North America N= 141	South America N= 251	Middle East & Africa N= 45
ChatGPT	19%	20%	19%	19%	16%	23%
Bing Chat	5%	5%	5%	3%	4%	8%
Bard (Google)	5%	5% EU	2%	6% EU	8% EU	1%
MS Copilot (in Word, Excel, PPT)	3%	2%	3%	3%	5% AP	1%
ChatPDF.ai	2%	1%	3% AP	1%	3% AP	1%
Gemini (Google)	2%	2% EU	0%	1%	4% EU	1%
Merative (IBM Watson Health)	1%	2% EU NA SA	0%	0%	0%	0%
OpenEvidence	1%	2%	1%	0%	0%	0%

Note: Only top 8 products shown

Questions: Which, if any, AI products or AI features have you used for work purposes?
Select: all that have used
Base: n= 1007

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

For clinicians in the USA, China and India, ChatGPT is the tool most used for work

	Clinicians N= 1007	USA N= 127	China N= 103	India N= 42
ChatGPT	19%	20%	21%	10%
Bing Chat	5%	3%	5%	4%
Bard (Google)	5%	7%	4%	2%
MS Copilot (in Word, Excel, PPT)	3%	3%	2%	2%
ChatPDF.ai	2%	2%	0%	0%
Gemini (Google)	2%	1%	3%	2%
Merative (IBM Watson Health)	1%	0%	4%	0%
OpenEvidence	1%	0%	1%	0%

US

Note: Only top 8 products shown

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Questions: Which, if any, AI products or AI features have you used for work purposes?
Select: all that have used
Base: n= 1007

Across all years of experience in work, ChatGPT is the tool most used for work

	Clinicians N= 1007	Years Active: ≤5 N= 198	6-10 N= 176	11-35 N= 494	36+ N= 60
ChatGPT	19%	16%	23% ≤5	20%	16%
Bing Chat	5%	3%	5% 36+	6%	≤5 36+ 0%
Bard (Google)	5%	8% 11-35	5%	3%	4%
MS Copilot (in Word, Excel, PPT)	3%	2%	2%	3%	2%
ChatPDF.ai	2%	2%	1%	2%	1%
Gemini (Google)	2%	4% 11-35	2%	1%	0%
Merative (IBM Watson Health)	1%	2%	2%	1%	1%
OpenEvidence	1%	0%	2% ≤5	1%	0%

Note: Only top 8 products shown

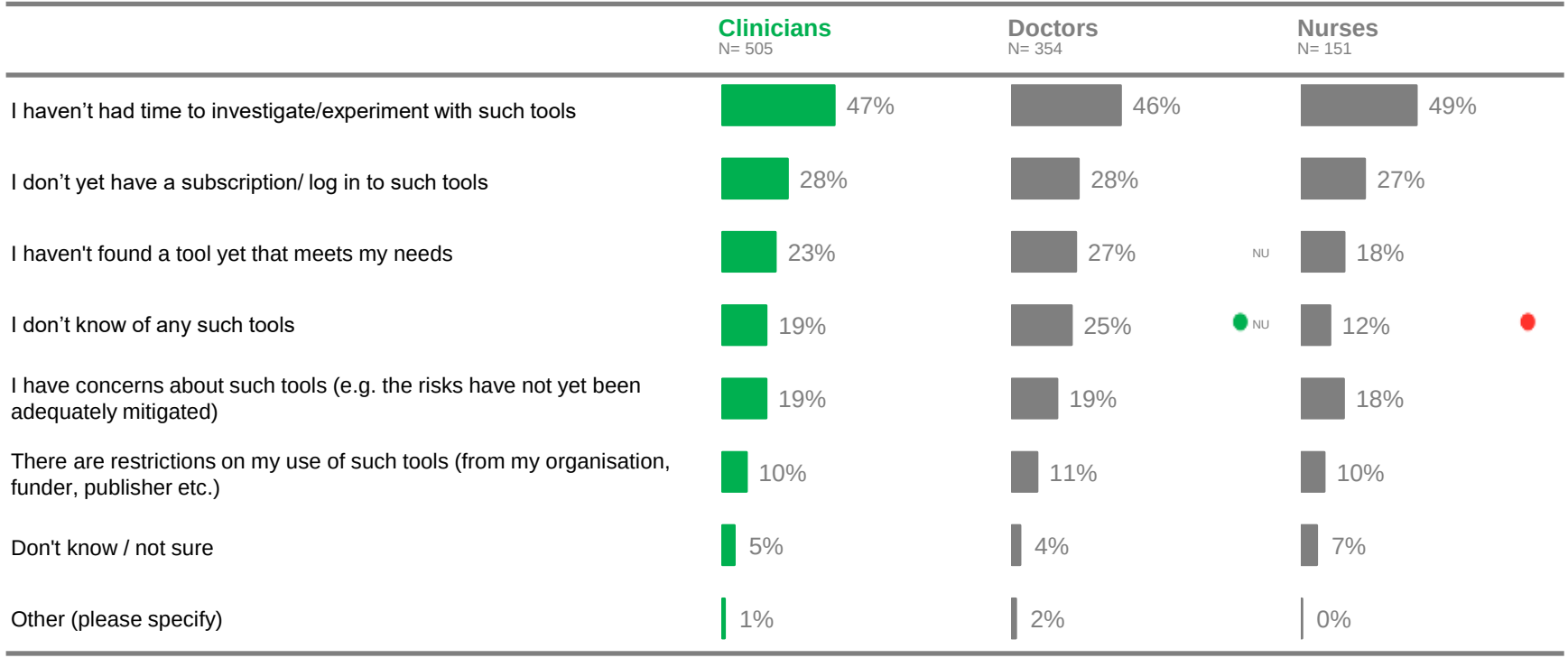
Across all country income levels, ChatGPT is the tool most used for work, less so in lower-middle-income countries

	Clinicians N= 1007	High Income N= 529	Upper-Middle-Income N= 350	Lower-Middle-Income N= 109
ChatGPT	19%	22% LM	19% LM	12%
Bing Chat	5%	5%	4%	5%
Bard (Google)	5%	4%	5%	4%
MS Copilot (in Word, Excel, PPT)	3%	3%	2%	2%
ChatPDF.ai	2%	3% LM	1%	0%
Gemini (Google)	2%	1%	3% HI	2%
Merative (IBM Watson Health)	1%	0%	3% HI LM	0%
OpenEvidence	1%	1%	1%	0%

Note: Only top 8 products shown

Questions: Which, if any, AI products or AI features have you used for work purposes? Select: all that have used
Base: n= 1007

The most common reason for those who have not use AI is lack of time



Questions: Which of the following describes why you haven't used an AI product or AI feature?

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…

Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Base: n= 505

Lack of time is the main reason for clinicians not having used AI, except in South America, where there is a lack of access

	Clinicians N= 505	Asia Pacific N= 128	Europe N= 154	North America N= 77	South America N= 117	Middle East & Africa N= 19
I haven't had time to investigate/experiment with such tools	47%	49% SA	50% SA	49% SA	31%	
I don't yet have a subscription/ log in to such tools	28%	29%	23%	22%	40% AP EU NA	
I haven't found a tool yet that meets my needs	23%	30% EU SA	18%	21%	12%	
I don't know of any such tools	19%	12%	27% AP	24% AP	21% AP	
I have concerns about such tools (e.g. the risks have not yet been adequately mitigated)	19%	20% SA	17% SA	33% AP EU SA	6%	
There are restrictions on my use of such tools (from my organisation, funder, publisher etc.)	10%	10%	9%	17% EU SA	6%	
Don't know / not sure	5%	4%	5%	12% AP EU SA	3%	
Other (please specify)	1%	1%	1%	5% AP EU SA	0%	

Questions: Which of the following describes why you haven't used an AI product or AI feature?

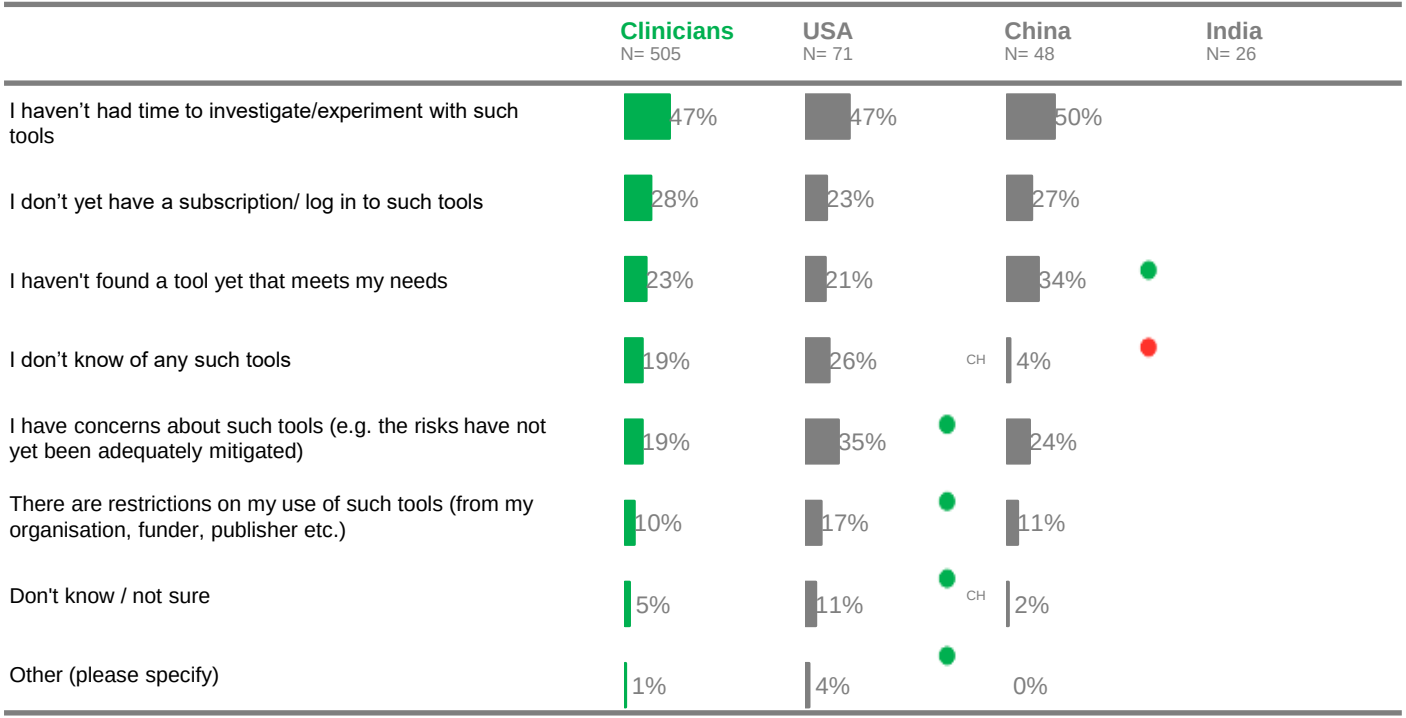
Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Base: n= 505

The main reason why clinicians haven't used an AI tool is a lack of time – China more likely than overall due to not having found a tool to meet their needs



Questions: Which of the following describes why you haven't used an AI product or AI feature?

Clinicians

Back to home

Significantly higher/ lower than…

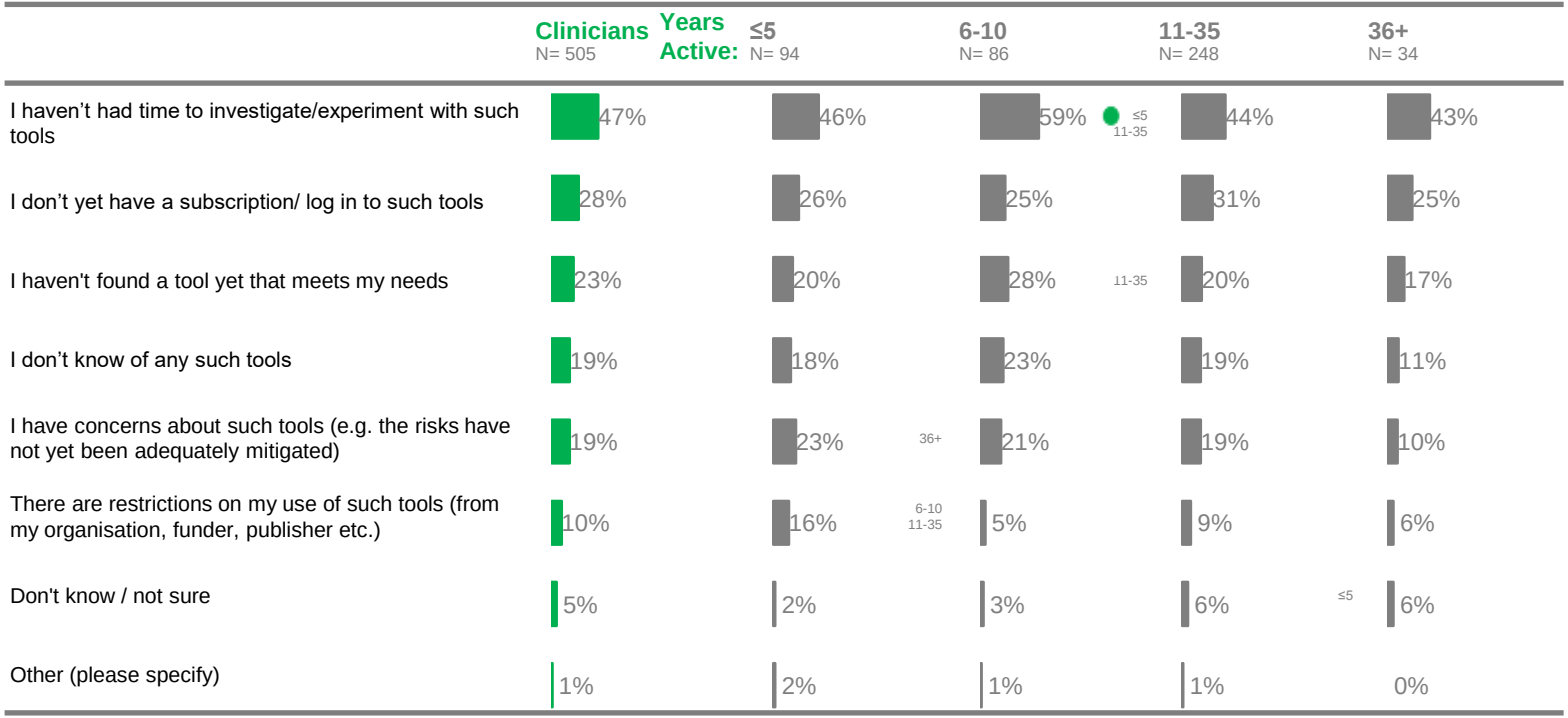
Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Base: n= 505

Lack of time is the main reason for clinicians not having used AI, particularly for those 6-10 years active in their area



Questions: Which of the following describes why you haven't used an AI product or AI feature?

Base: n= 505

Clinicians

Back to home

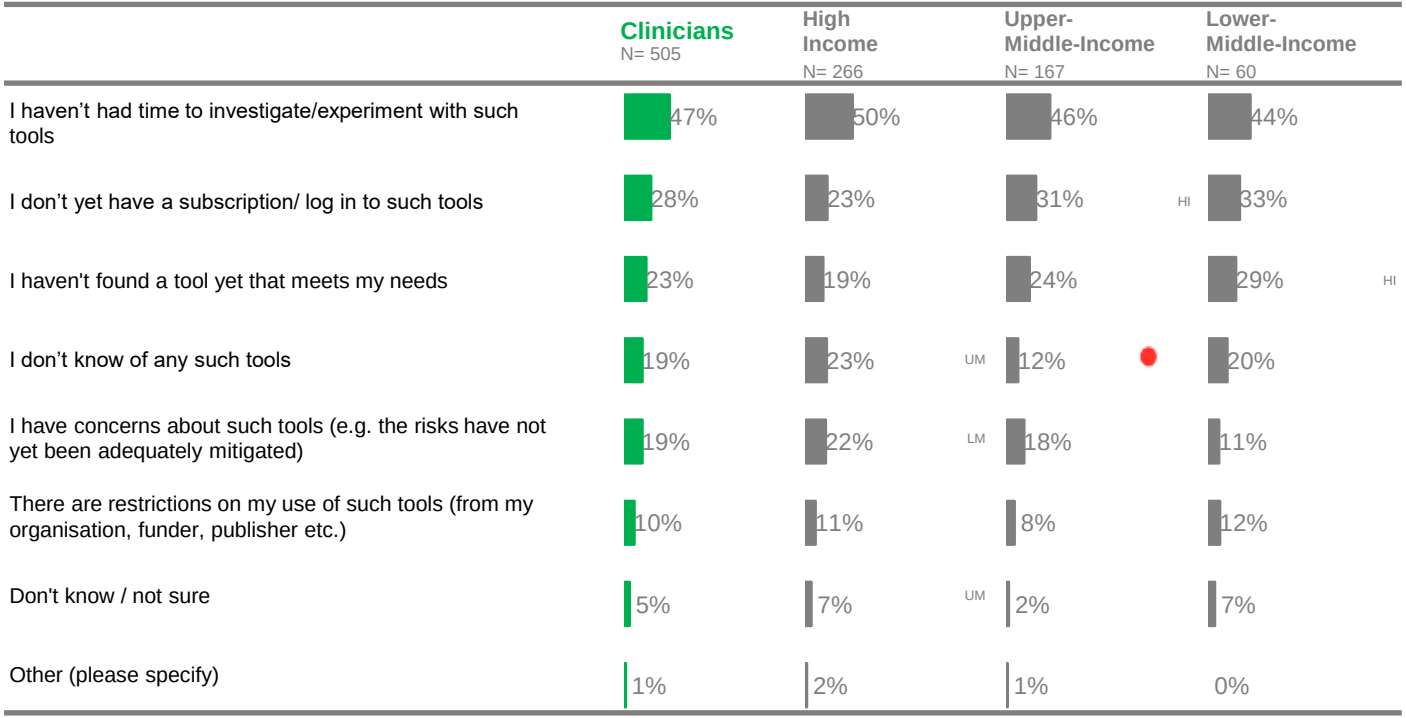
Significantly higher/ lower than…

Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

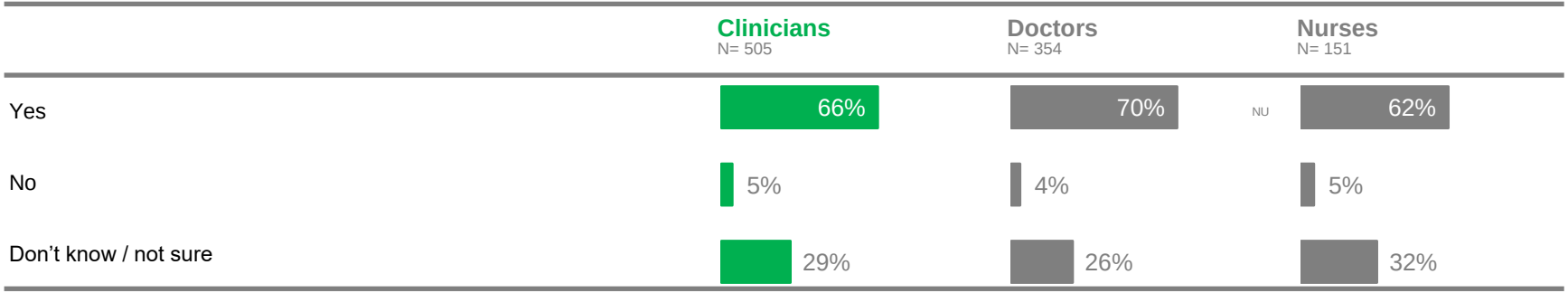
Lack of time is the main reason for clinicians not having used AI regardless of country income level



Questions: Which of the following describes why you haven't used an AI product or AI feature?

Base: n= 505

Around two-thirds of those who haven't used it expect to use it within the next two to five years, higher for doctors than nurses



Questions: Do you expect you will choose to use AI in the near future?

Clinicians

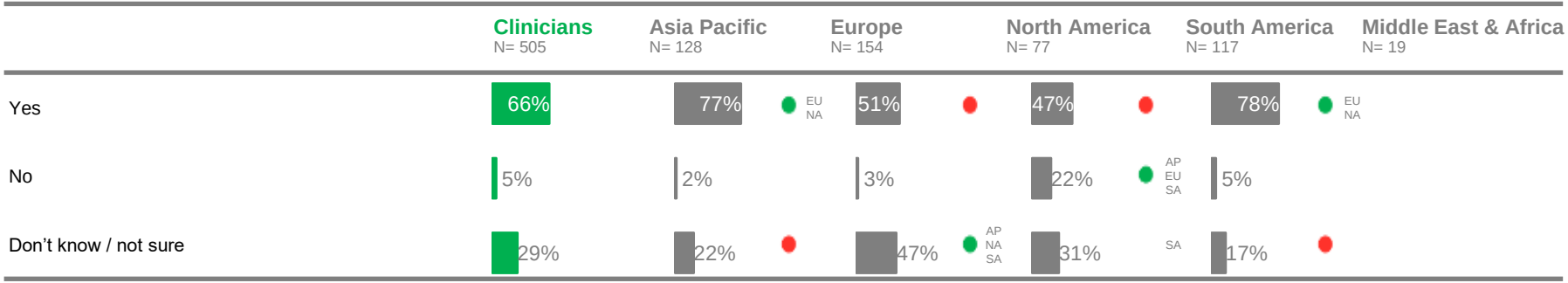
Back to home

Significantly higher/ lower than…
Significantly higher than…

Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Base: n= 505

North American clinicians who are not already using AI are the least likely to expect to use it in the future



Questions: Do you expect you will choose to use AI in the near future?

Base: n= 505

Clinicians

Back to home

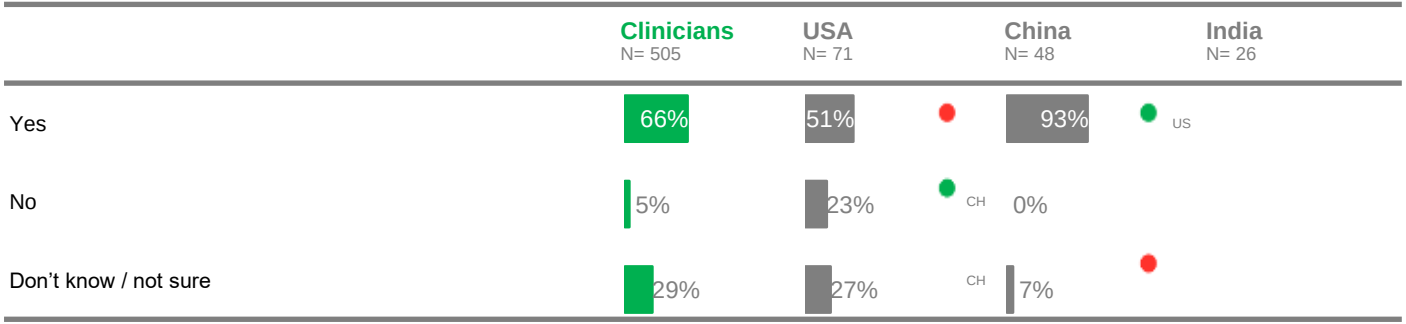
Significantly higher/ lower than…

Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Almost all Chinese clinicians (93%) who aren't already using AI think they will in the near future, in contrast to half (51%) of clinicians in the USA



Questions: Do you expect you will choose to use AI in the near future?

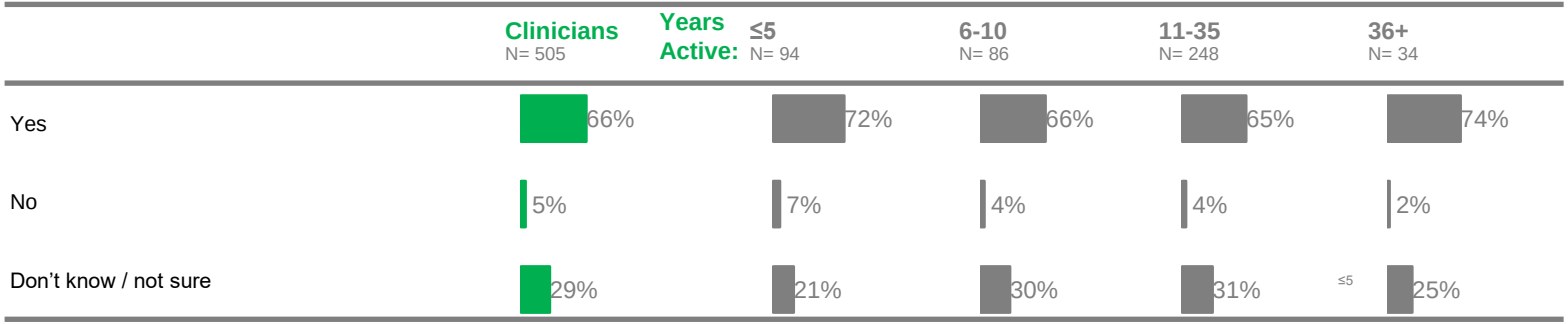
Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Base: n= 505

Around two-thirds of those who haven't used it expect to use it within the next two to five years – no difference by years active in role



Questions: Do you expect you will choose to use AI in the near future?

Base: n= 505

Clinicians

Back to home

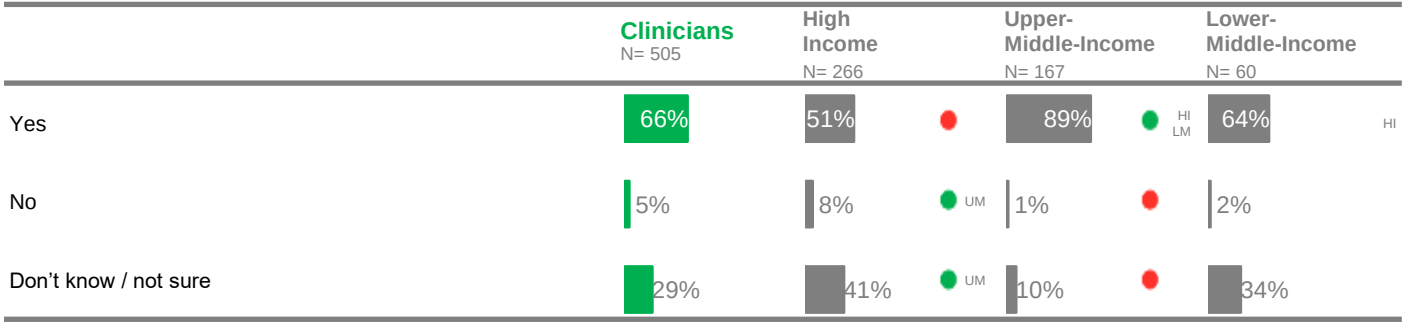
Significantly higher/ lower than…

Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

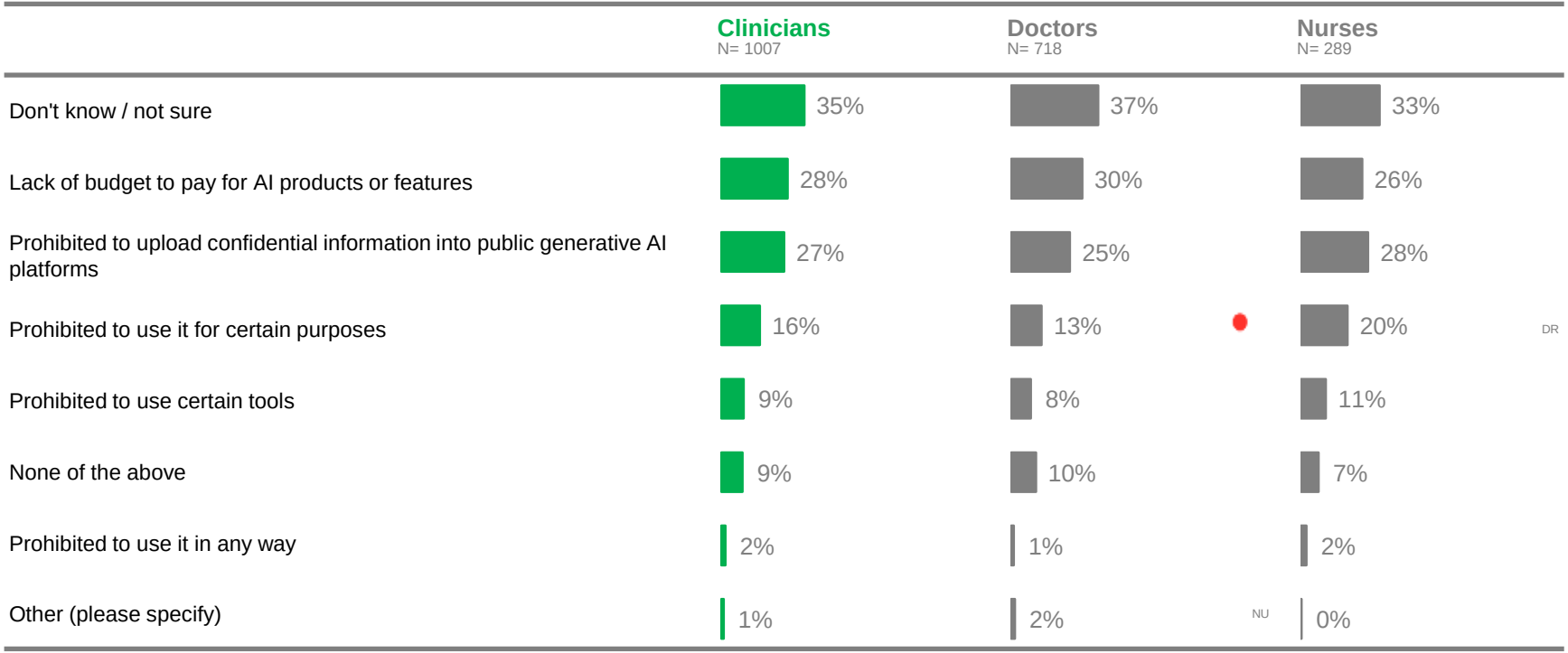
Of those who haven't already used AI, clinicians in high income countries are the least likely to choose to use AI in the near future



Questions: Do you expect you will choose to use AI in the near future?

Base: n= 505

Over a third of clinicians are unaware of **restrictions** on AI usage at their institution – little difference between doctors and nurses



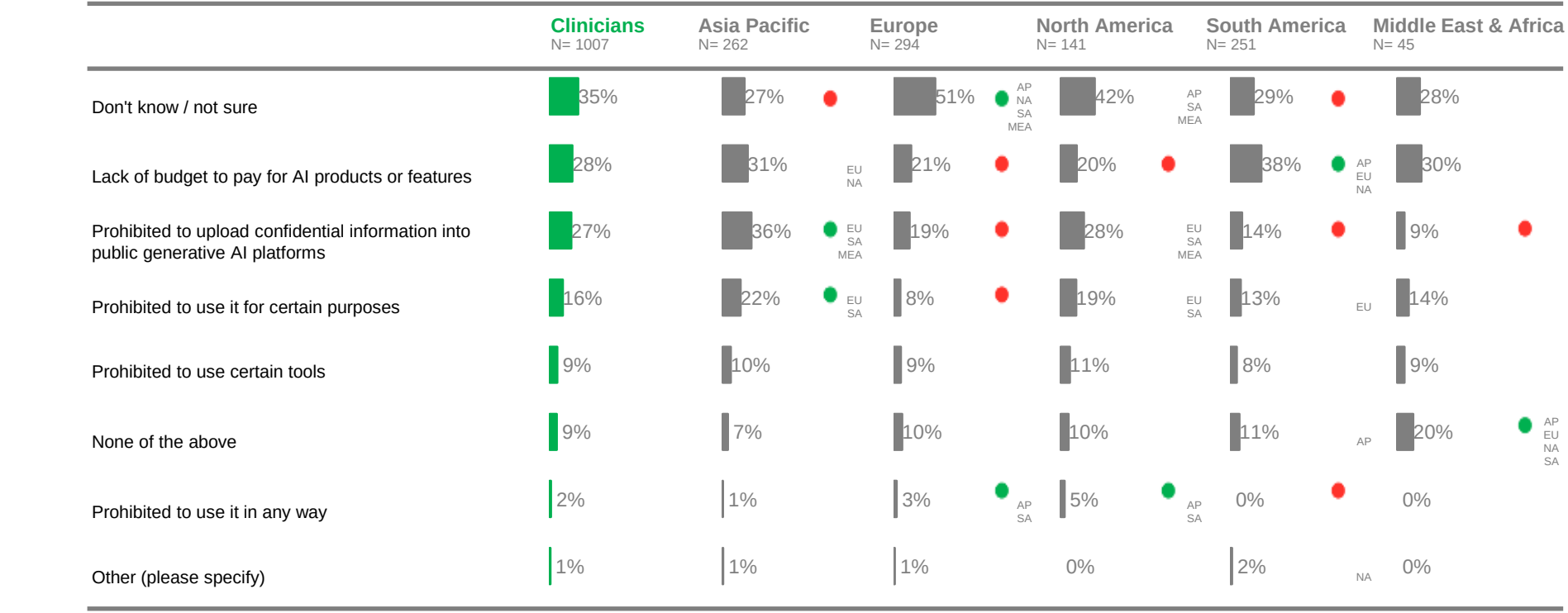
Questions: Which restrictions, if any, does your institution currently have with regards to AI usage?
Select: all that apply
Base: n= 1007

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Over a third of clinicians are unaware of **restrictions** on AI usage at their institution. Lack of budget is deemed a key restriction, most notably in South America



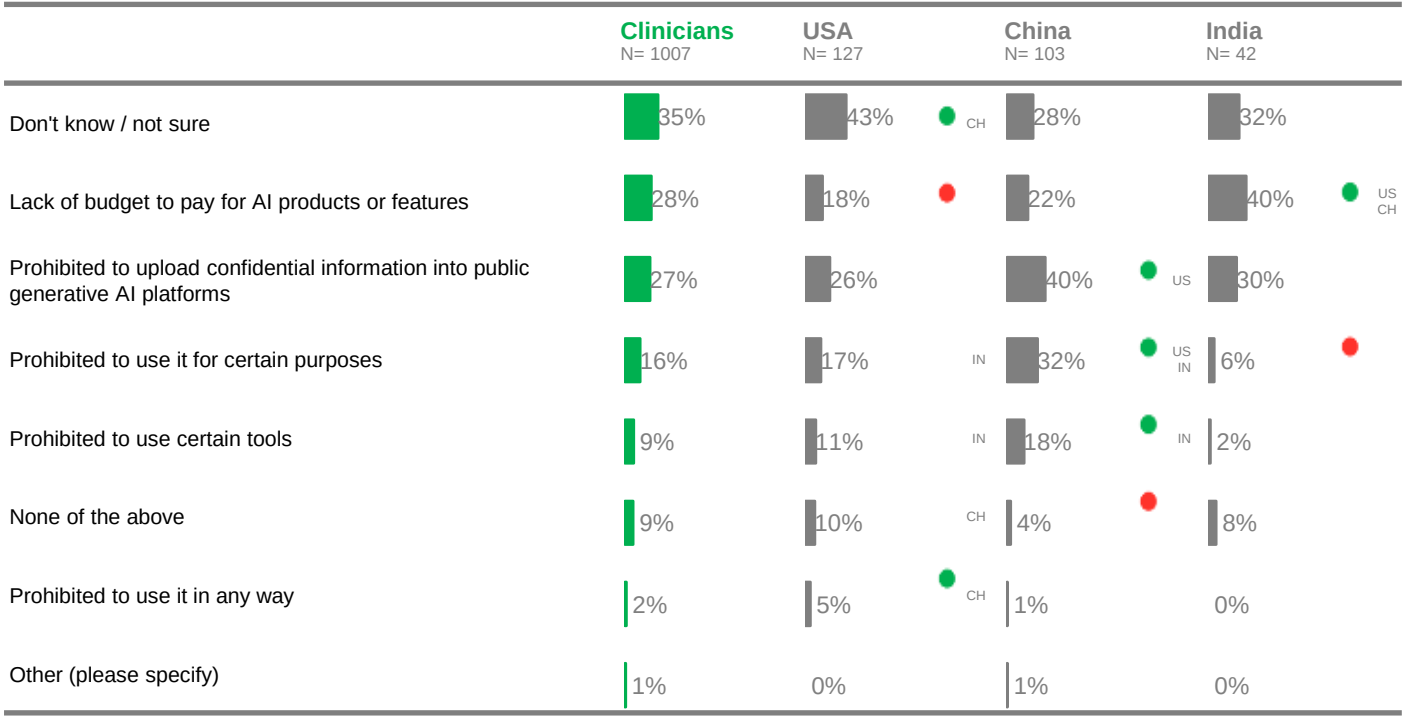
Questions: Which restrictions, if any, does your institution currently have with regards to AI usage?
Select: all that apply
Base: n= 1007

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Across the three most populous countries those in India are most likely to lack budget to use AI products in their institutions



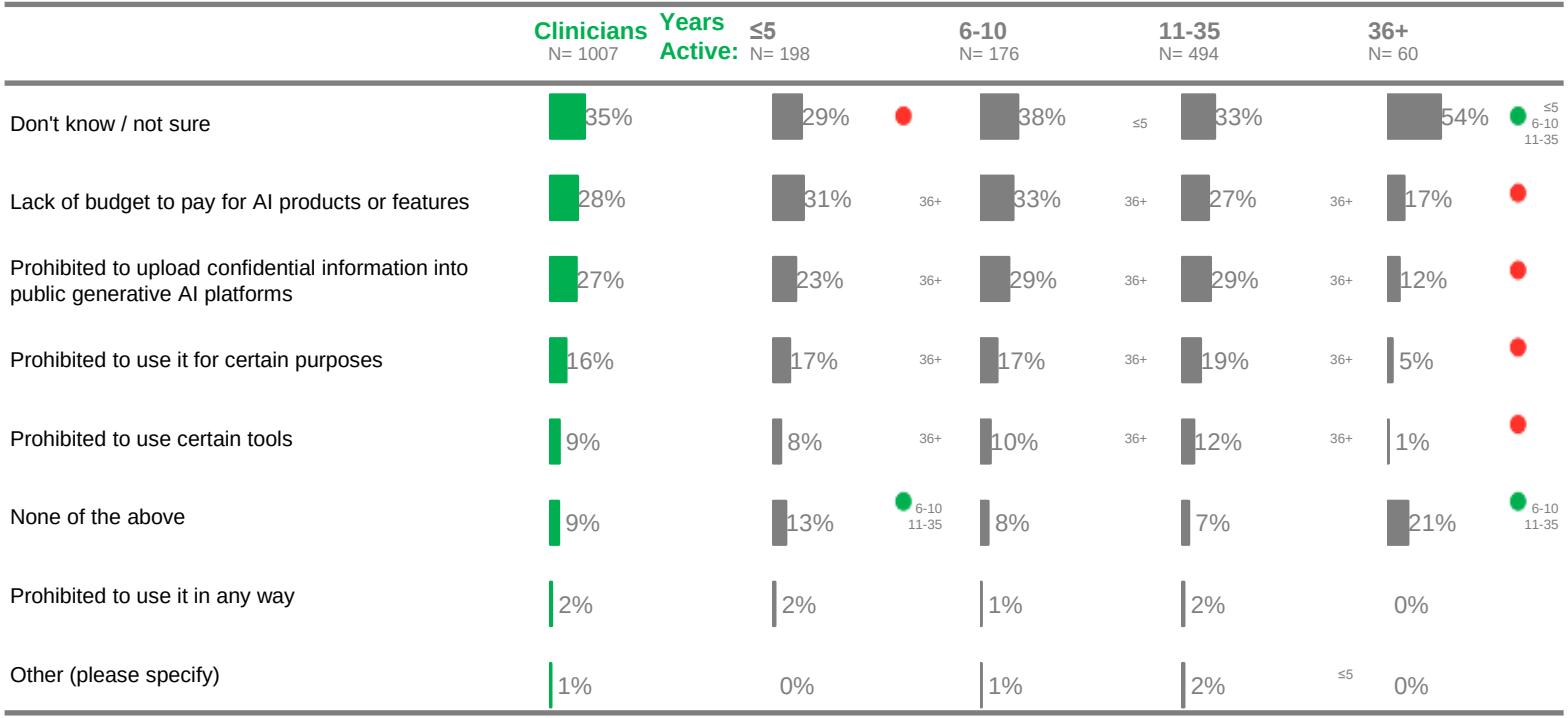
Questions: Which restrictions, if any, does your institution currently have with regards to AI usage?
Select: all that apply
Base: n= 1007

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Over a third of clinicians are unaware of **restrictions** on AI usage at their institution, increasing to over half of those who are 36+ years active in role



Questions: Which restrictions, if any, does your institution currently have with regards to AI usage?
Select: all that apply
Base: n= 1007

Clinicians

Back to home

Significantly higher/ lower than…
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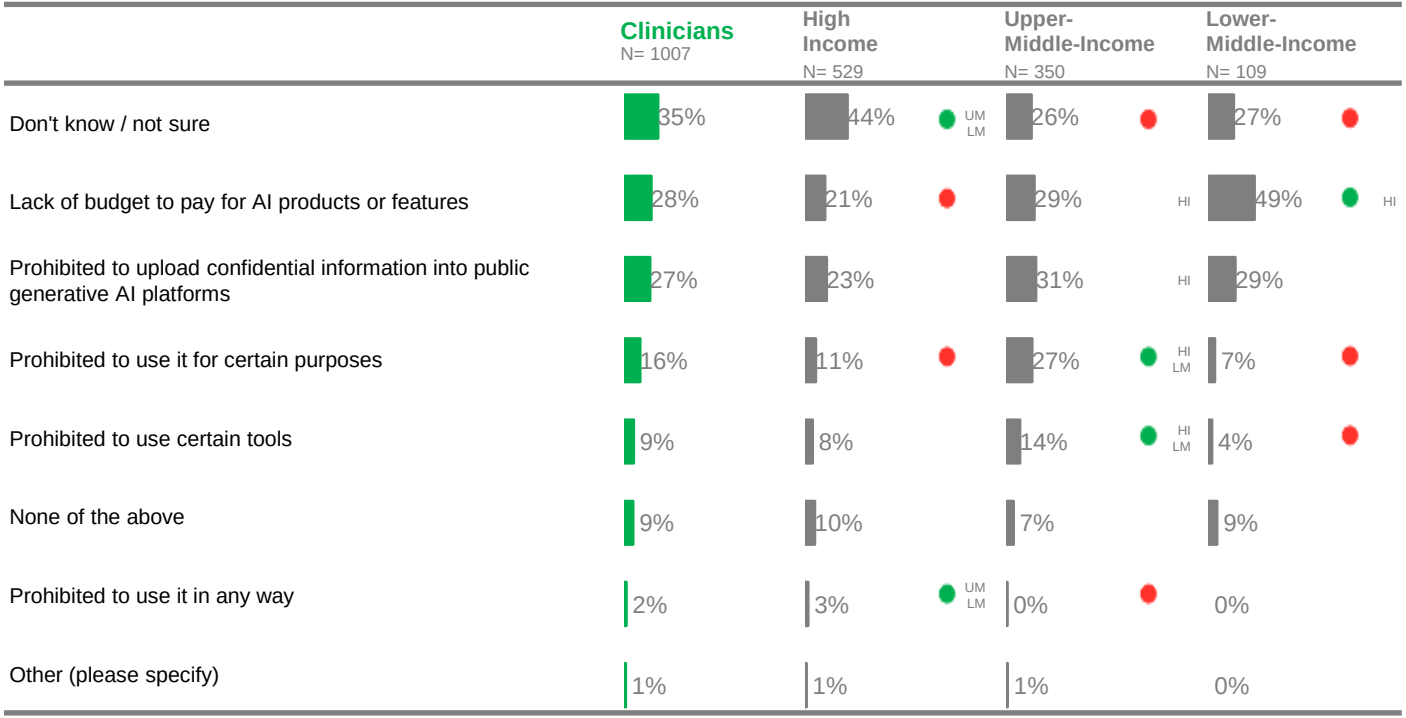
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

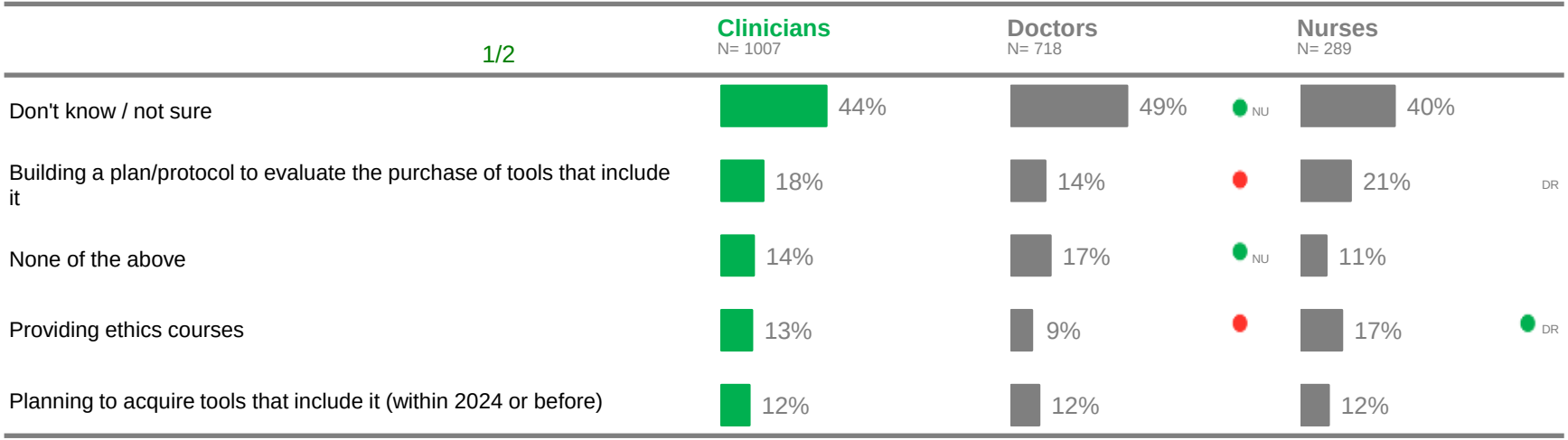
Lack of budget is the main reason for not having access to AI tools for half of lower-middle-income clinicians



Questions: Which restrictions, if any, does your institution currently have with regards to AI usage? Select: all that apply
Base: n= 1007

Many are unsure how their institution is **preparing** for AI usage: nearly half of doctors and two fifths of nurses are not aware of any preparation. Most common form of preparation is around evaluation of tools for purchase – which is higher for Nurses

1/2



Clinicians

Back to home

Significantly higher/ lower than…
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Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Questions: In which ways, if any, is your institution preparing for AI usage?
Select: all that apply
Base: n= 1007

Many are unsure how their institution is **preparing** for AI usage, various initiatives are in place. Nurses have higher awareness

2/2	Clinicians N= 1007	Doctors N= 718	Nurses N= 289
Adding a position around it to your documentation (e.g. annual plan, mission, charter etc.)	12%	10%	13% DR
Setting up a community of practice around it	11%	9%	14% DR
Appointing new operational functions around it (e.g. GenAI Librarian etc.)	10%	6%	13% DR
Appointing new leadership around it (e.g. Chief AI Officer etc.)	5%	5%	4%
Other (please specify)	1%	2%	1%

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Questions: In which ways, if any, is your institution preparing for AI usage?
Select: all that apply
Base: n= 1007

Clinicians in Europe and North America are the least aware of how their institutions are **preparing to use AI** (1/2)

1/2

	Clinicians N= 1007	Asia Pacific N= 262	Europe N= 294	North America N= 141	South America N= 251	Middle East & Africa N= 45
Don't know / not sure	44%	32%	66% AP SA MEA	59% AP SA MEA	28%	34%
Building a plan/protocol to evaluate the purchase of tools that include it	18%	26% EU NA SA	8%	8%	20% EU NA	22% EU NA
None of the above	14%	10%	14%	11%	21% AP EU NA	16%
Providing ethics courses	13%	20% EU NA SA	4%	9% EU	10% EU	23% EU NA SA
Planning to acquire tools that include it (within 2024 or before)	12%	15% EU	7%	10%	11% EU	20% EU NA SA

Questions: In which ways, if any, is your institution preparing for AI usage?
Select: all that apply
Base: n= 1007

Significantly higher/ lower than… Global
Significantly higher than… Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Clinicians in Europe and North America are the least aware of how their institutions are **preparing to use AI** (2/2)

	Clinicians 2/2 N= 1007	Asia Pacific N= 262	Europe N= 294	North America N= 141	South America N= 251	Middle East & Africa N= 45
Adding a position around it to your documentation (e.g. annual plan, mission, charter etc.)	12%	18% EU NA SA	4%	7%	9% EU	14% EU
Setting up a community of practice around it	11%	17% EU NA SA MEA	5%	9% EU	8%	7%
Appointing new operational functions around it (e.g. GenAI Librarian etc.)	10%	15% EU NA SA	4%	9% EU	7% EU	8%
Appointing new leadership around it (e.g. Chief AI Officer etc.)	5%	6% EU SA	1%	7% EU SA	3%	9% EU SA
Other (please specify)	1%	1%	1%	3% AP	3% AP EU	0%

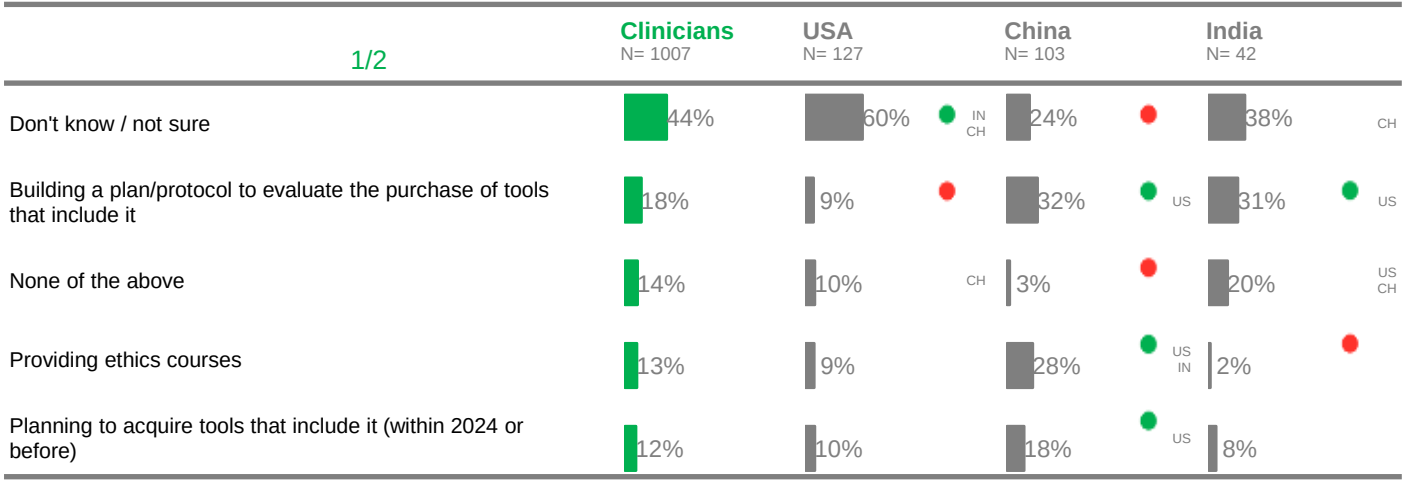
Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Questions: In which ways, if any, is your institution preparing for AI usage?
Select: all that apply
Base: n= 1007

Around a third of Chinese and Indian clinicians report their institutions are building protocols to purchase AI tools. Chinese institutions are most proactive about preparing for AI (1/2)



Questions: In which ways, if any, is your institution preparing for AI usage?
Select: all that apply
Base: n= 1007

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Around a third of Chinese and Indian clinicians report their institutions are building protocols to purchase AI tools. Chinese institutions are most proactive about preparing for AI (2/2)

2/2	Clinicians N= 1007	USA N= 127	China N= 103	India N= 42
Adding a position around it to your documentation (e.g. annual plan, mission, charter etc.)	12%	6%	23% US	12%
Setting up a community of practice around it	11%	7%	18% US	10%
Appointing new operational functions around it (e.g. GenAI Librarian etc.)	10%	10%	24% US IN	6%
Appointing new leadership around it (e.g. Chief AI Officer etc.)	5%	8% CH	4%	4%
Other (please specify)	1%	3%	0%	2%

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Questions: In which ways, if any, is your institution preparing for AI usage?
Select: all that apply
Base: n= 1007

Many are unsure how their institution is **preparing** for AI usage: this rises as experience increases, it is greatest amongst those who've been in their area of work longest (36+ years active) (1/2)

1/2

	Clinicians N= 1007	Years Active: ≤5 N= 198	6-10 N= 176	11-35 N= 494	36+ N= 60
Don't know / not sure	44%	39%	42%	45%	54% ≤5 6-10
Building a plan/protocol to evaluate the purchase of tools that include it	18%	19% 6-10 36+	13%	21% 6-10 36+	8%
None of the above	14%	15%	17% 11-35	11%	23% 11-35
Providing ethics courses	13%	14%	12%	14%	10%
Planning to acquire tools that include it (within 2024 or before)	12%	16% 36+	11%	12%	7%

Questions: In which ways, if any, is your institution preparing for AI usage?
Select: all that apply
Base: n= 1007

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Many are unsure how their institution is **preparing** for AI usage: this rises as experience increases, it is greatest amongst those who've been in their area of work longest (36+ years active) (2/2)

2/2	Clinicians N= 1007	Years Active: ≤5 N= 198	6-10 N= 176	11-35 N= 494	36+ N= 60
Adding a position around it to your documentation (e.g. annual plan, mission, charter etc.)	12%	10%	16% ≤5 11-35 36+	11% 36+	3%
Setting up a community of practice around it	11%	9%	10%	14% ≤5	8%
Appointing new operational functions around it (e.g. GenAI Librarian etc.)	10%	9% 36+	13% 36+	11% 36+	1%
Appointing new leadership around it (e.g. Chief AI Officer etc.)	5%	5%	8% 11-35 36+	4%	1%
Other (please specify)	1%	0%	2% ≤5	1% ≤5	2% ≤5

Clinicians

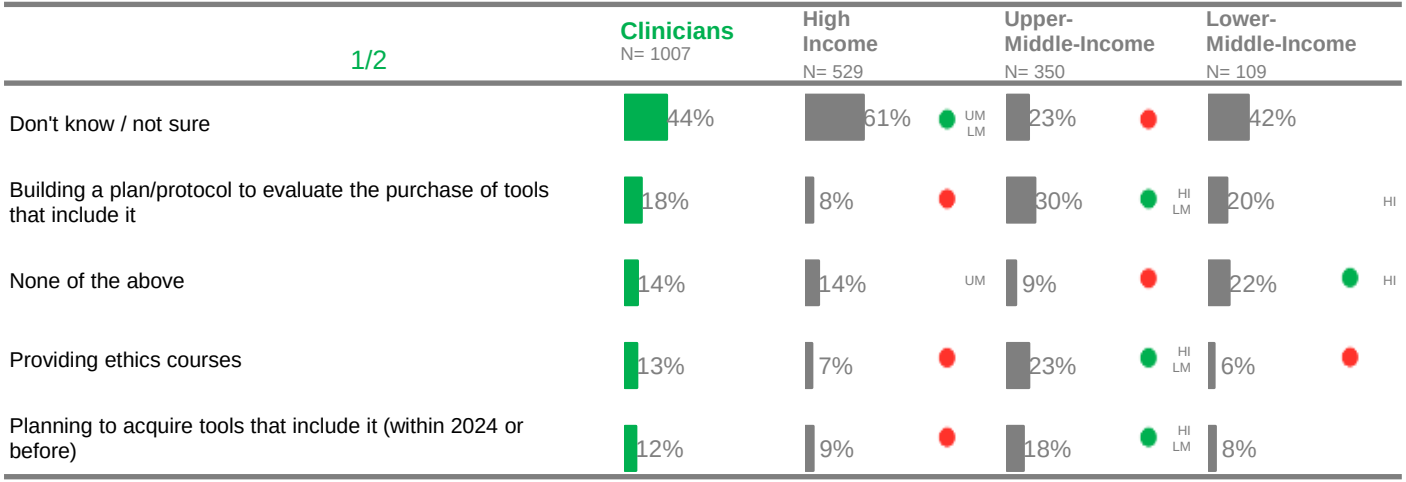
Back to home

Significantly higher/ lower than… *Global*

Significantly higher than… *Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)*

Questions: In which ways, if any, is your institution preparing for AI usage?
Select: all that apply
Base: n= 1007

Clinicians from **high income** countries are the **least aware** of how their institution is **preparing** for AI usage (1/2)



Questions: In which ways, if any, is your institution preparing for AI usage? Select: all that apply
Base: n= 1007

Clinicians from **high income** countries are the **least aware** of how their institution is **preparing** for AI usage (2/2)

2/2	Clinicians N= 1007	High Income N= 529	Upper-Middle-Income N= 350	Lower-Middle-Income N= 109
Adding a position around it to your documentation (e.g. annual plan, mission, charter etc.)	12%	5%	18% HI	16% HI
Setting up a community of practice around it	11%	8%	18% HI LM	8%
Appointing new operational functions around it (e.g. GenAI Librarian etc.)	10%	4%	20% HI LM	4%
Appointing new leadership around it (e.g. Chief AI Officer etc.)	5%	4%	5%	7%
Other (please specify)	1%	1%	1%	1%

Questions: In which ways, if any, is your institution preparing for AI usage? Select: all that apply
Base: n= 1007

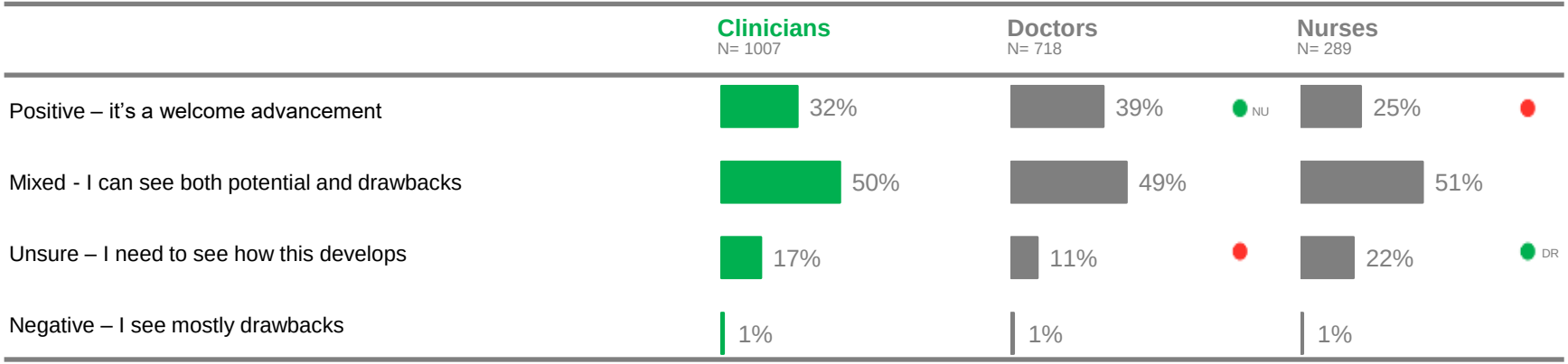
3. Perceptions of AI

Theme 3

Perceptions of AI

Back to home

Clinicians have mixed feelings about AI, albeit more positivity is observed among doctors than nurses



Questions: What are your overall feelings about the impact of AI on your area of work?

Base: n= 1007

Clinicians

Back to home

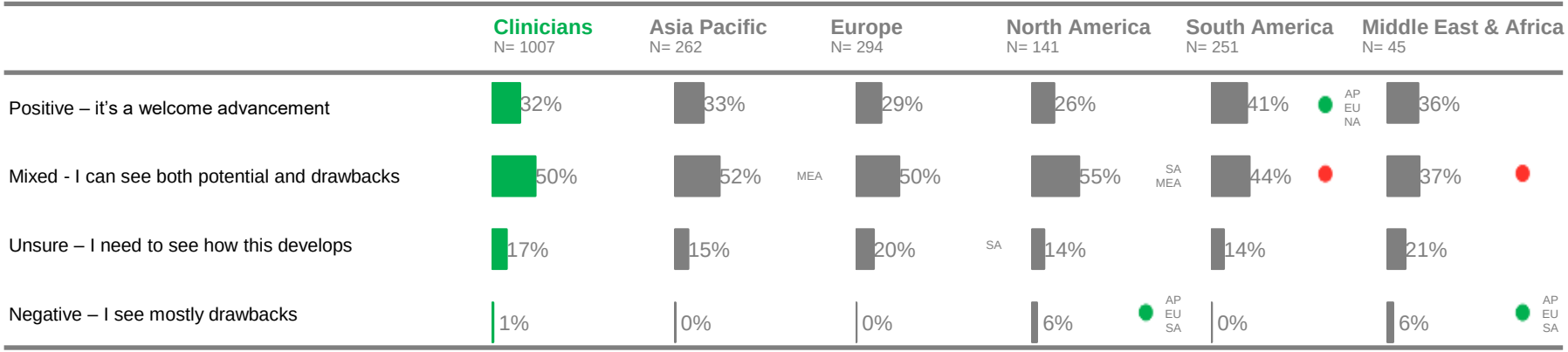
Significantly higher/ lower than…

Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Feelings around the impact of AI in clinical practice are mixed worldwide. South American clinicians are most positive about it



Questions: What are your overall feelings about the impact of AI on your area of work?

Base: n= 1007

Clinicians

Back to home

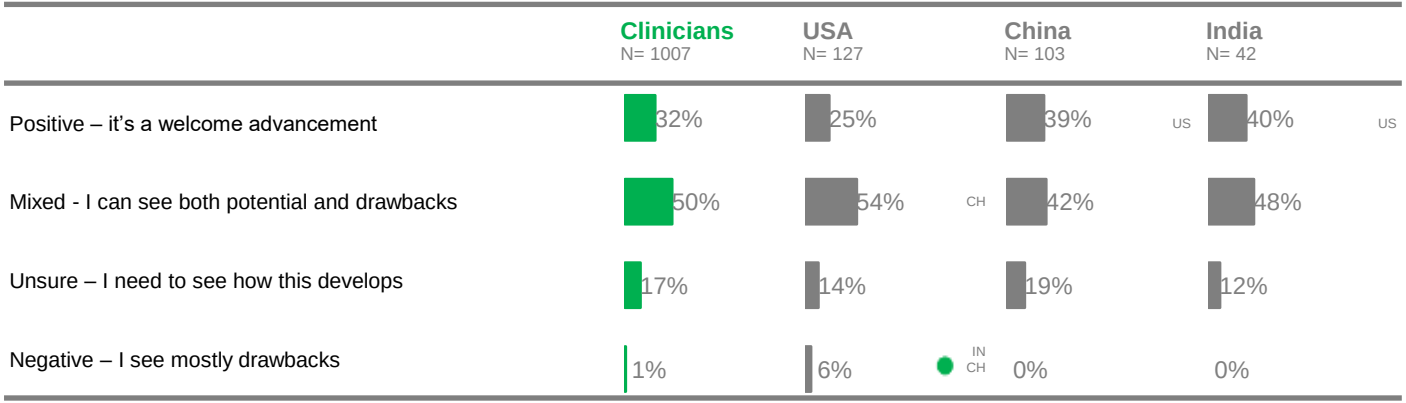
Significantly higher/ lower than…

Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

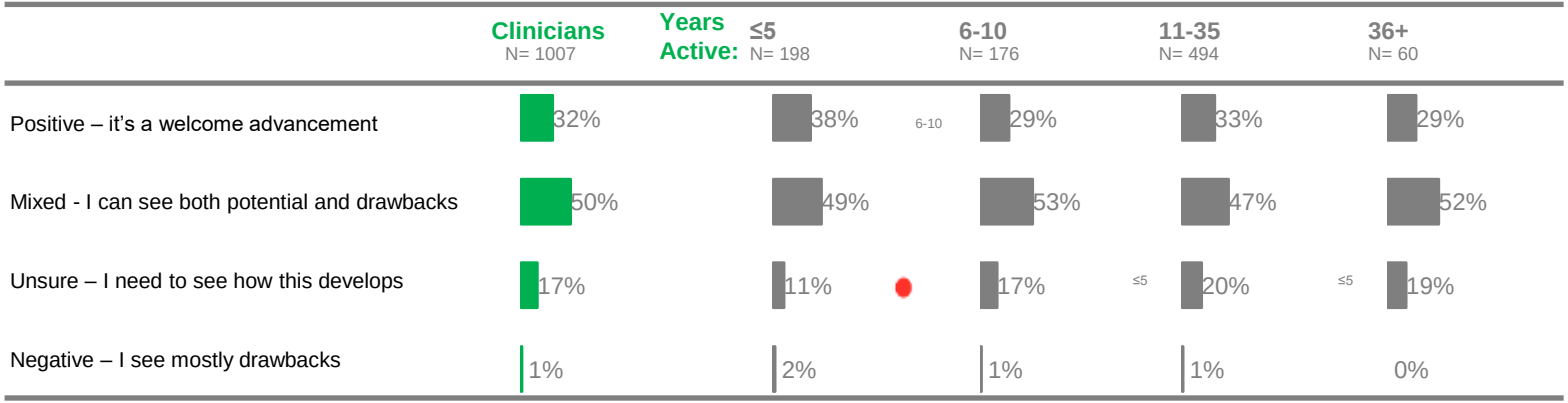
Clinicians in the USA are least positive about the impact of AI in their area of work when compared to China and India



Questions: What are your overall feelings about the impact of AI on your area of work?

Base: n= 1007

Clinicians have mixed feelings about AI, albeit more positivity is observed among those who are up to 5 years active in their area



Questions: What are your overall feelings about the impact of AI on your area of work?

Clinicians

Back to home

Significantly higher/ lower than…
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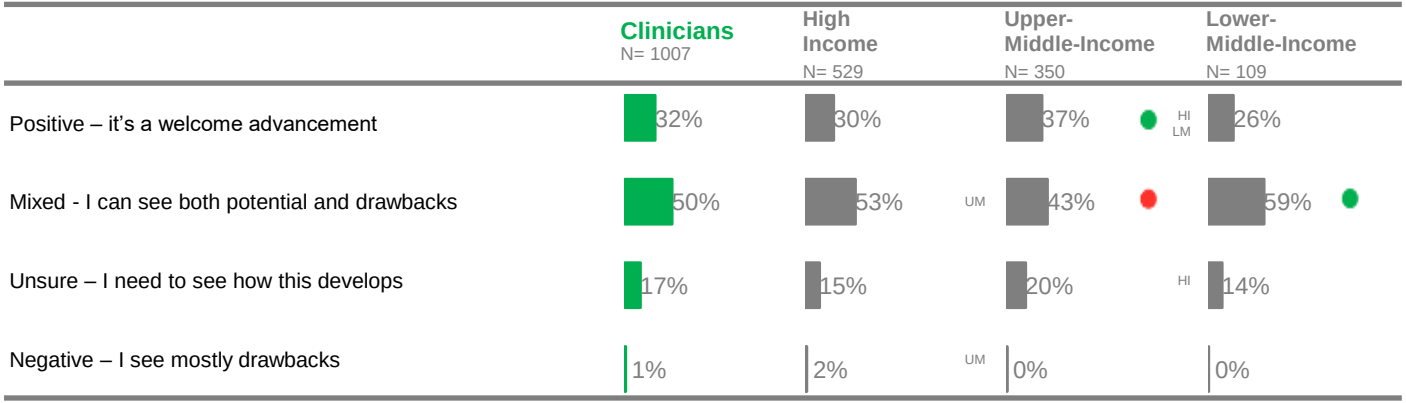
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Base: n= 1007

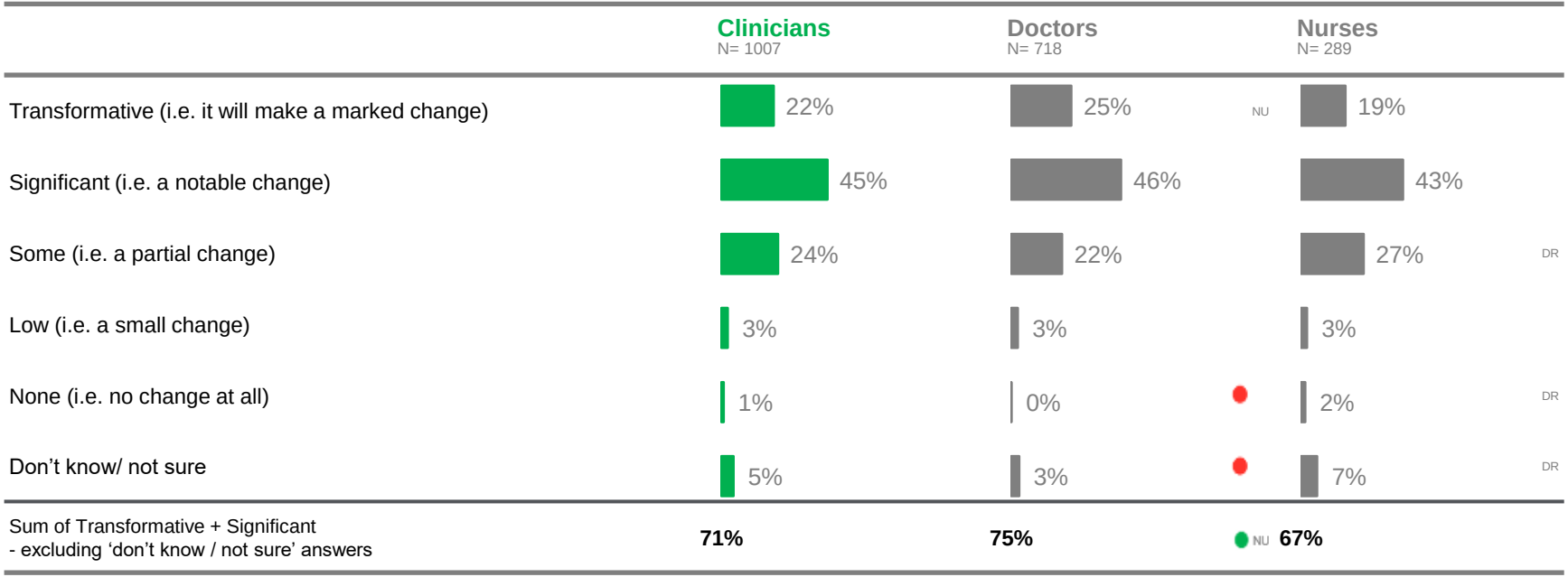
Most in lower-middle-income countries have mixed feelings about the use of AI in a clinical setting



Questions: What are your overall feelings about the impact of AI on your area of work?

Base: n= 1007

Three quarters of doctors and two thirds of nurses expect the impact of AI on their area of work will be transformative or significant



Questions: What do you think will be the level of impact of AI in your area of work in the near future?

Clinicians

Back to home

Significantly higher/ lower than…

Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Base: n= 1007

4/5 clinicians in South America expect the impact of AI on their area of work will be transformative or significant, higher than elsewhere

	Clinicians N= 1007	Asia Pacific N= 262	Europe N= 294	North America N= 141	South America N= 251	Middle East & Africa N= 45
Transformative (i.e. it will make a marked change)	22%	27% EU SA	16%	21%	18%	24%
Significant (i.e. a notable change)	45%	42%	48% NA	37%	59% AP EU NA	49%
Some (i.e. a partial change)	24%	26% SA MEA	24% SA MEA	28% SA MEA	15%	12%
Low (i.e. a small change)	3%	1%	5% AP	4% AP	3%	3%
None (i.e. no change at all)	1%	0%	2% AP	1%	1% AP	5% AP NA SA
Don't know/ not sure	5%	4%	4%	10% AP EU SA	5%	8%
Sum of Transformative + Significant - excluding 'don't know / not sure' answers	**71%**	**72%**	**67%**	**64%**	**81%** NA AP EU	**78%** NA

Questions: What do you think will be the level of impact of AI in your area of work in the near future?

Clinicians

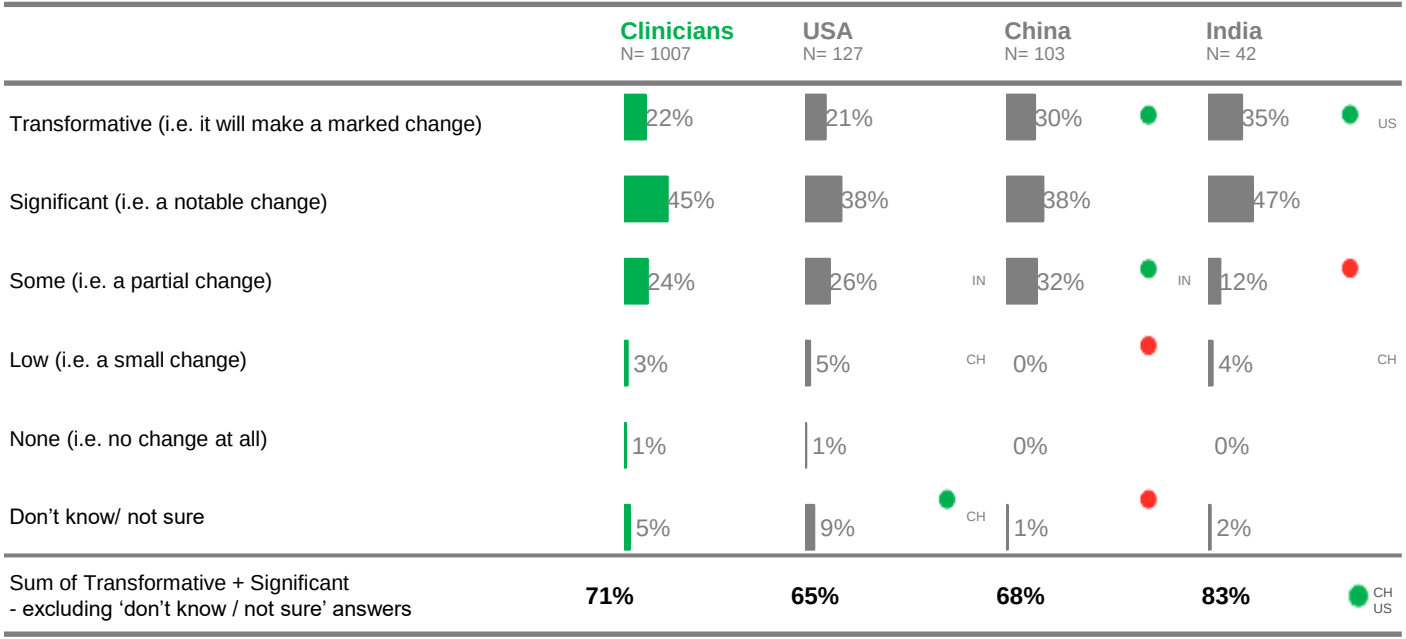
Back to home

Significantly higher/ lower than…
Significantly higher than…

Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Base: n= 1007

Indian clinicians are most likely to believe the impact of AI in their work will be transformative or significant vs. USA and China



Questions: What do you think will be the level of impact of AI in your area of work in the near future?

Base: n= 1007

Clinicians

Back to home

Significantly higher/ lower than…
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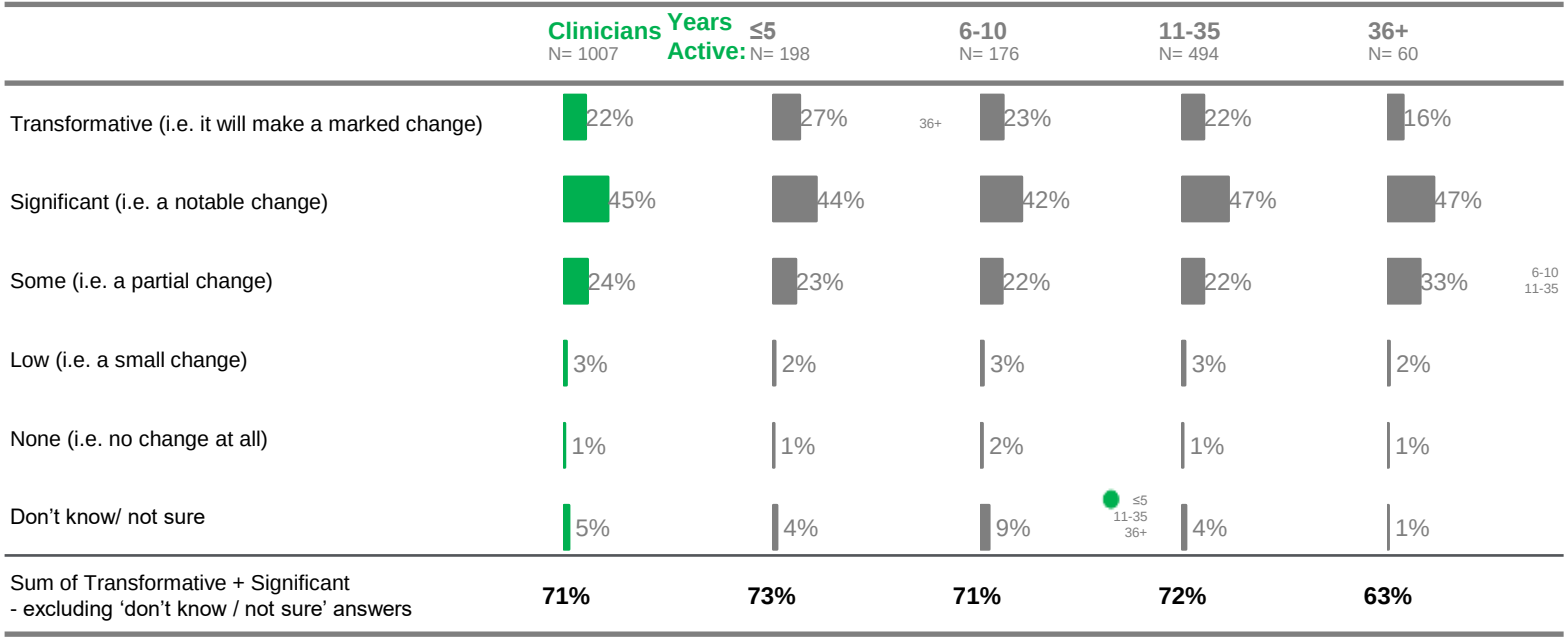
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Most think the impact of AI on their area of work will be transformative or significant – little variation by years active in role



Questions: What do you think will be the level of impact of AI in your area of work in the near future?

Base: n= 1007

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…

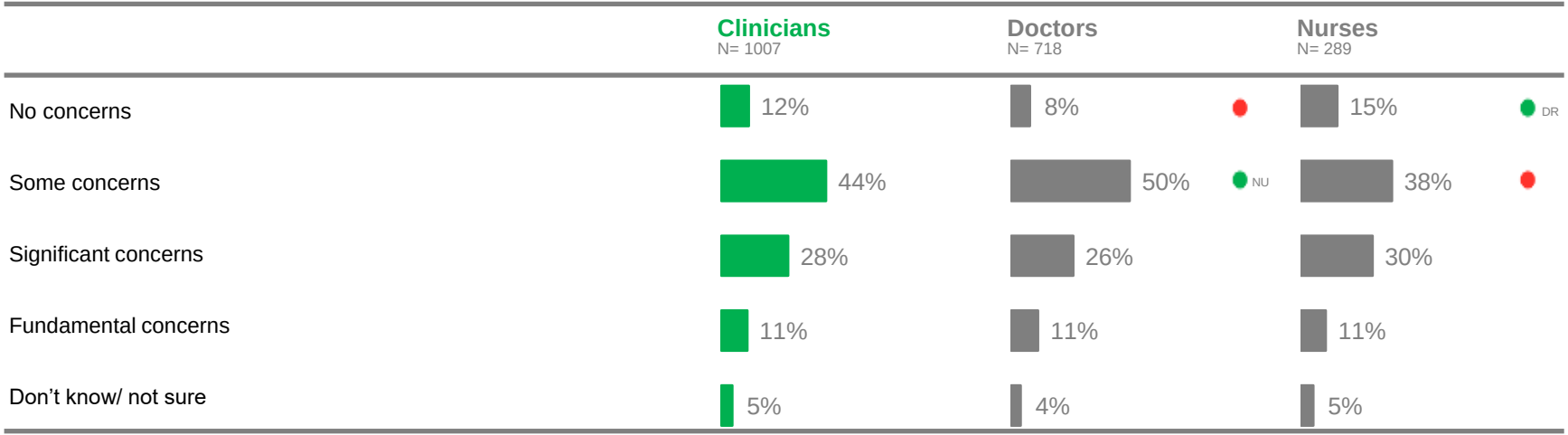
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Lower-middle-income clinicians are most likely to think the use of AI will be transformative to their clinical work

	Clinicians N= 1007	High Income N= 529	Upper-Middle-Income N= 350	Lower-Middle-Income N= 109
Transformative (i.e. it will make a marked change)	22%	19%	22%	31% HI
Significant (i.e. a notable change)	45%	43%	47%	45%
Some (i.e. a partial change)	24%	25% LM	27%	12% LM
Low (i.e. a small change)	3%	4% UM	1%	2%
None (i.e. no change at all)	1%	2% UM	0%	0%
Don't know/ not sure	5%	6% UM	2%	10%
Sum of Transformative + Significant - excluding 'don't know / not sure' answers	**71%**	**67%**	**71%**	**84%** HI UM

Questions: What do you think will be the level of impact of AI in your area of work in the near future?

Most clinicians have at least some concerns about the ethical implications of AI usage in their area of work



Questions: To what extent, if at all, do you have concerns about the ethical implications of AI in your area of work?

Base: n= 1007

Clinicians

Back to home

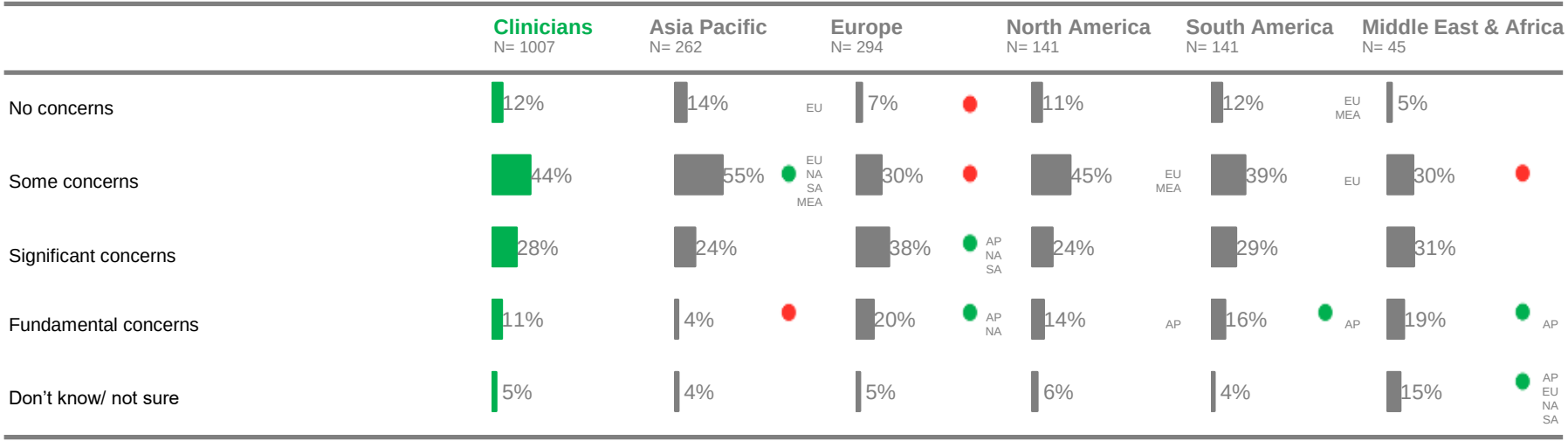
Significantly higher/ lower than…

Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

European clinicians show the highest level of concern about the ethical implications of AI in a clinical setting



Questions: To what extent, if at all, do you have concerns about the ethical implications of AI in your area of work?

Base: n= 1007

Significantly higher/ lower than…

Significantly higher than…

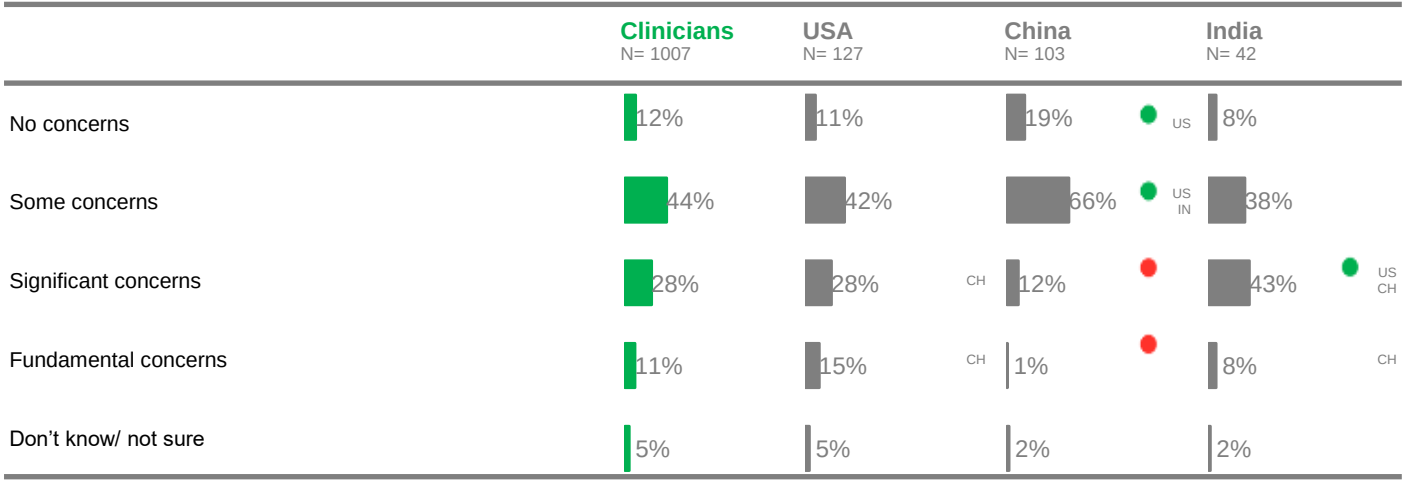
Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Clinicians

Back to home

Chinese clinicians are less concerned about the ethical implications of AI in their area of work



Questions: To what extent, if at all, do you have concerns about the ethical implications of AI in your area of work?

Clinicians

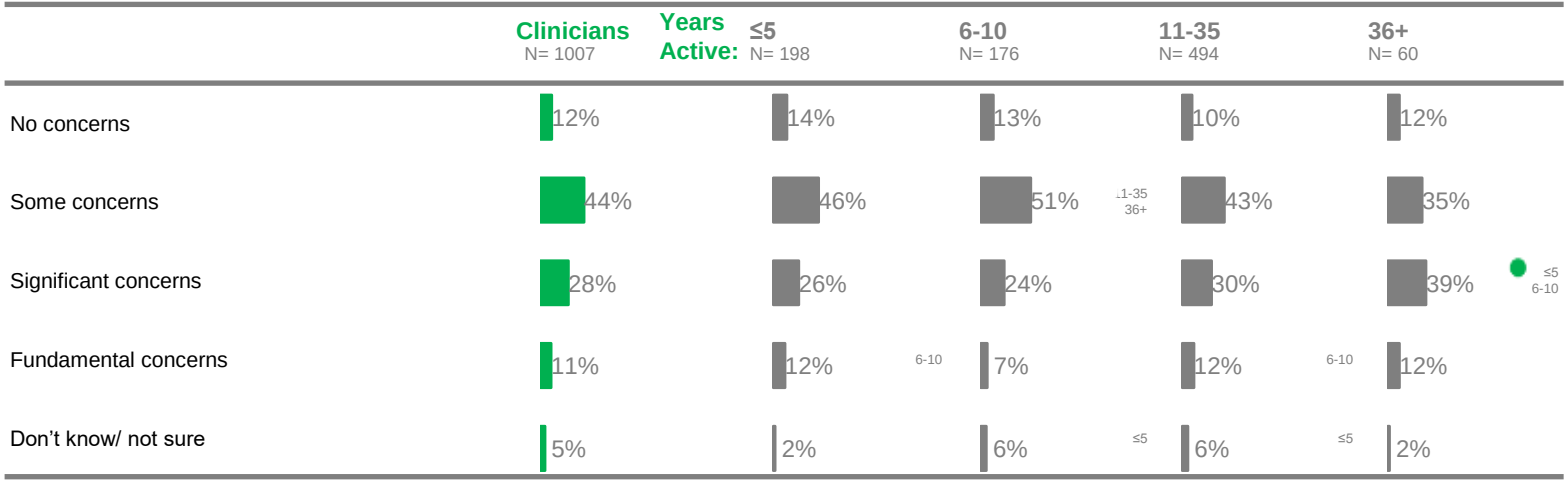
Back to home

Significantly higher/ lower than…
Significantly higher than…

Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Base: n= 1007

Most clinicians are concerned about the ethical implications of AI usage in their area of work, most significant concern is amongst those with most years in practice (36+)



Questions: To what extent, if at all, do you have concerns about the ethical implications of AI in your area of work?

Base: n= 1007

Clinicians

Back to home

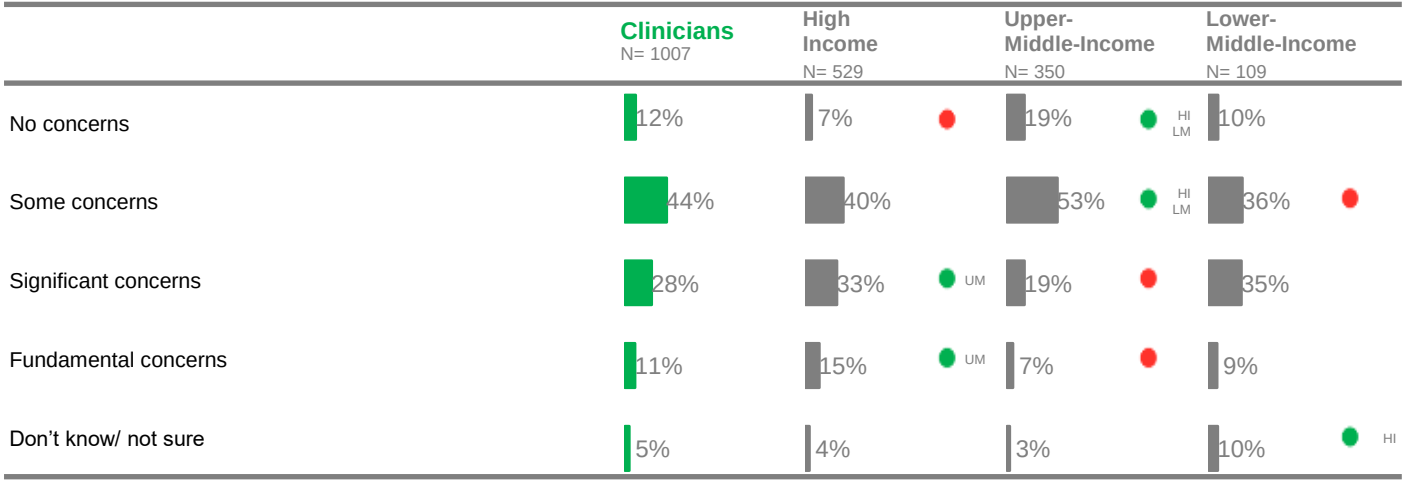
Significantly higher/ lower than…

Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Clinicians from upper-middle-income countries most likely to not have concerns around AI use in the clinical setting

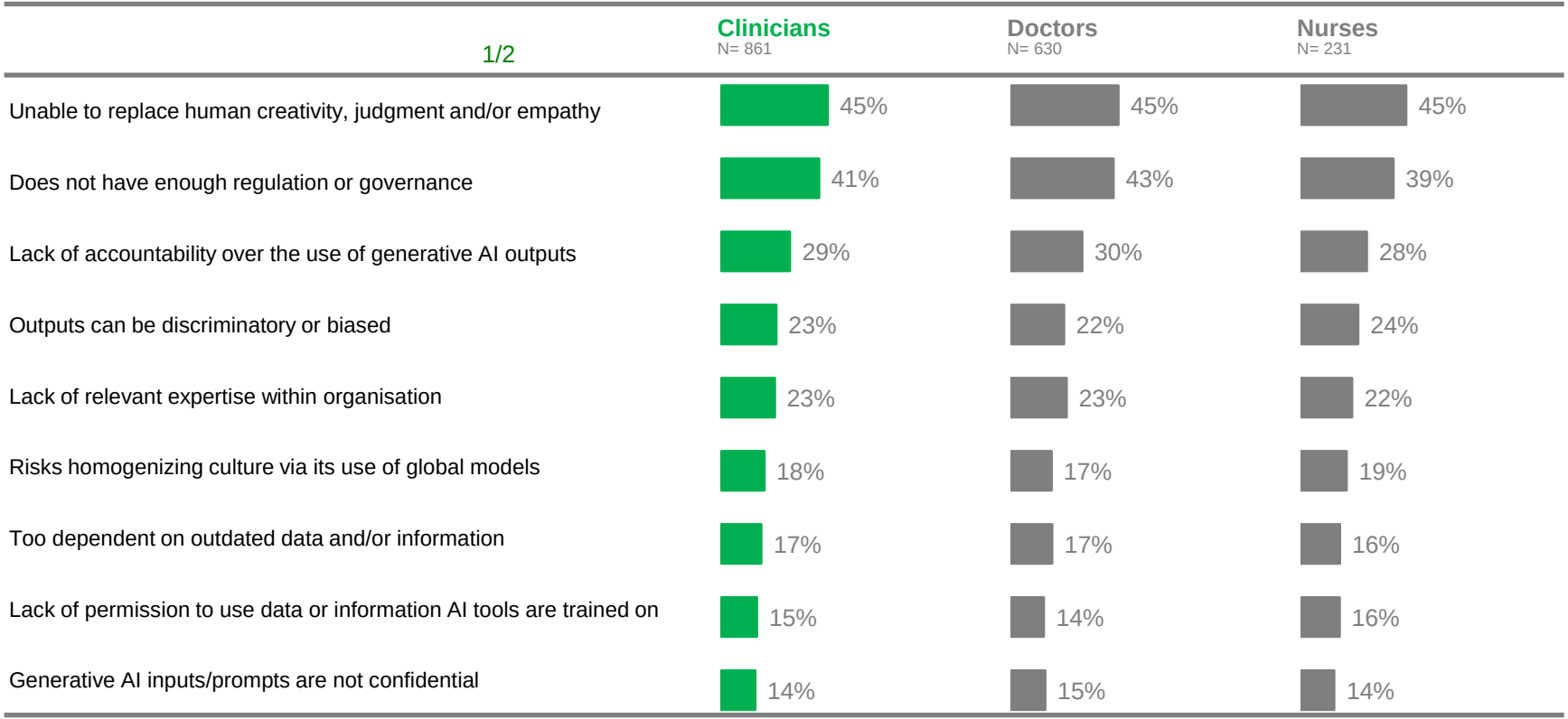


Questions: To what extent, if at all, do you have concerns about the ethical implications of AI in your area of work?

Base: n= 1007

The most selected top-three disadvantages of AI for clinicians are its inability to replace humans and its lack of regulation/governance (1/2)

ELSEVIER



Questions: You mentioned that you had concerns, what do you think are the top 3 disadvantages of AI?

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Select: up to three
Base: n= 861

The most common top-three disadvantages of AI for clinicians are its inability to replace humans and its lack of regulation/governance (2/2)

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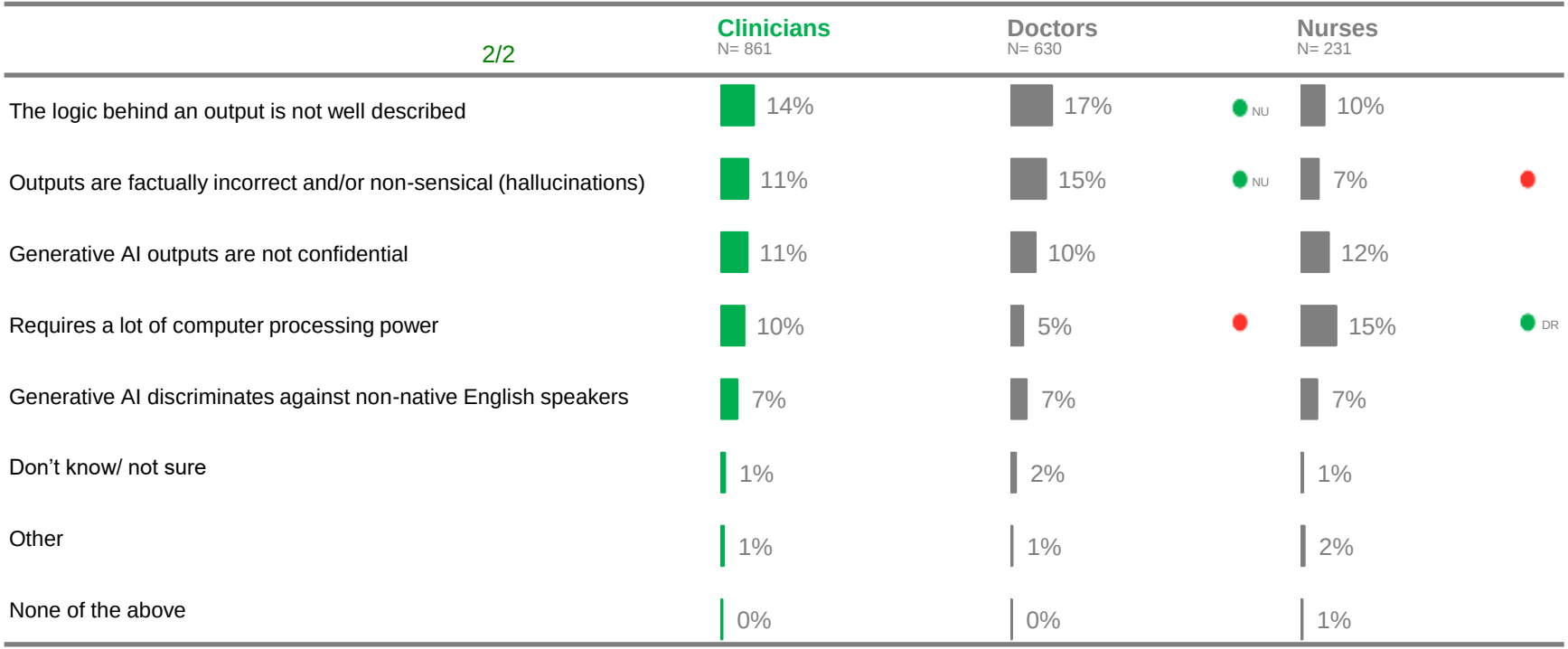


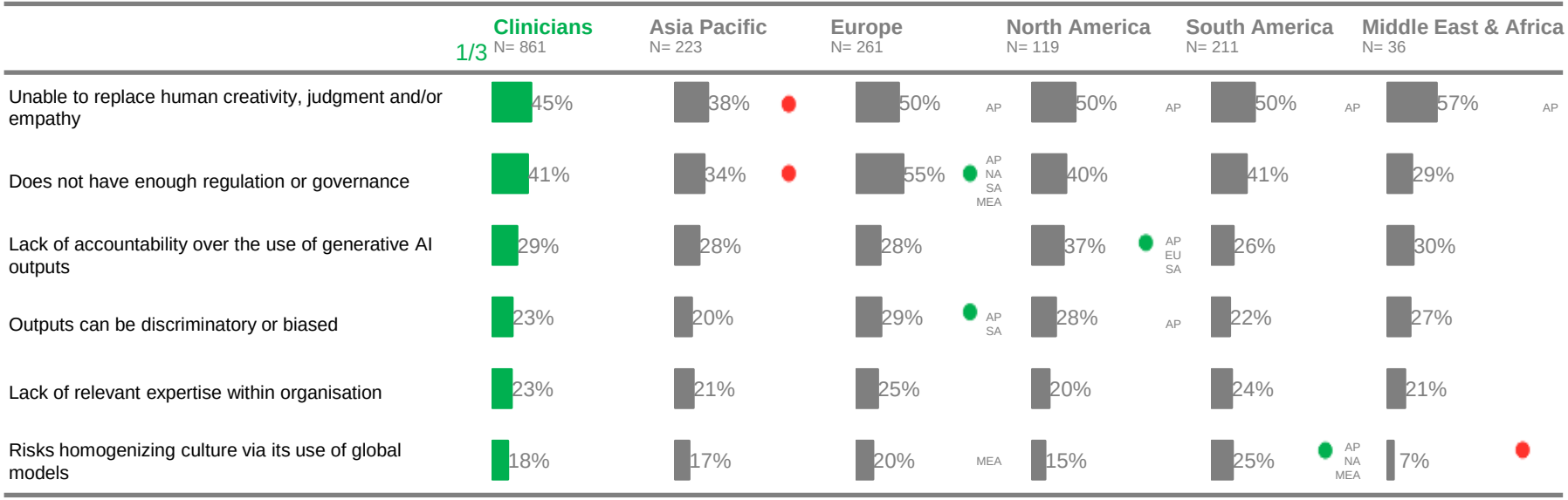
Questions: You mentioned that you had concerns, what do you think are the top 3 disadvantages of AI?
Select: up to three
Base: n= 861

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

The most selected top-three disadvantages of AI for clinicians are its inability to replace humans and its lack of regulation/governance - lack of regulation or governance is the dominant reason in Europe (1/3)



Questions: You mentioned that you had concerns, what do you think are the top 3 disadvantages of AI?
Select: up to three
Base: n= 861

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

The most selected top-three disadvantages of AI for clinicians are its inability to replace humans and its lack of regulation/governance (2/3)

ELSEVIER

2/3

	Clinicians N= 861	Asia Pacific N= 223	Europe N= 261	North America N= 119	South America N= 211	Middle East & Africa N= 36
Too dependent on outdated data and/or information	17%	22% EU NA SA	11%	14%	13%	18%
Lack of permission to use data or information AI tools are trained on	15%	17%	13%	14%	13%	13%
Generative AI inputs/prompts are not confidential	14%	15%	15%	12%	11%	9%
The logic behind an output is not well described	14%	17% SA	12%	12%	8%	17% SA
Outputs are factually incorrect and/or non-sensical (hallucinations)	11%	13% SA MEA	9%	25% SA	4% AP EU SA MEA	4%
Generative AI outputs are not confidential	11%	14% NA SA	9%	7%	8%	14%

Questions: You mentioned that you had concerns, what do you think are the top 3 disadvantages of AI? Select: up to three
Base: n= 861

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

The most selected top-three disadvantages of AI for clinicians are its inability to replace humans and its lack of regulation/governance – discrimination in the Middle East & Africa in a bigger concern than elsewhere (3/3)

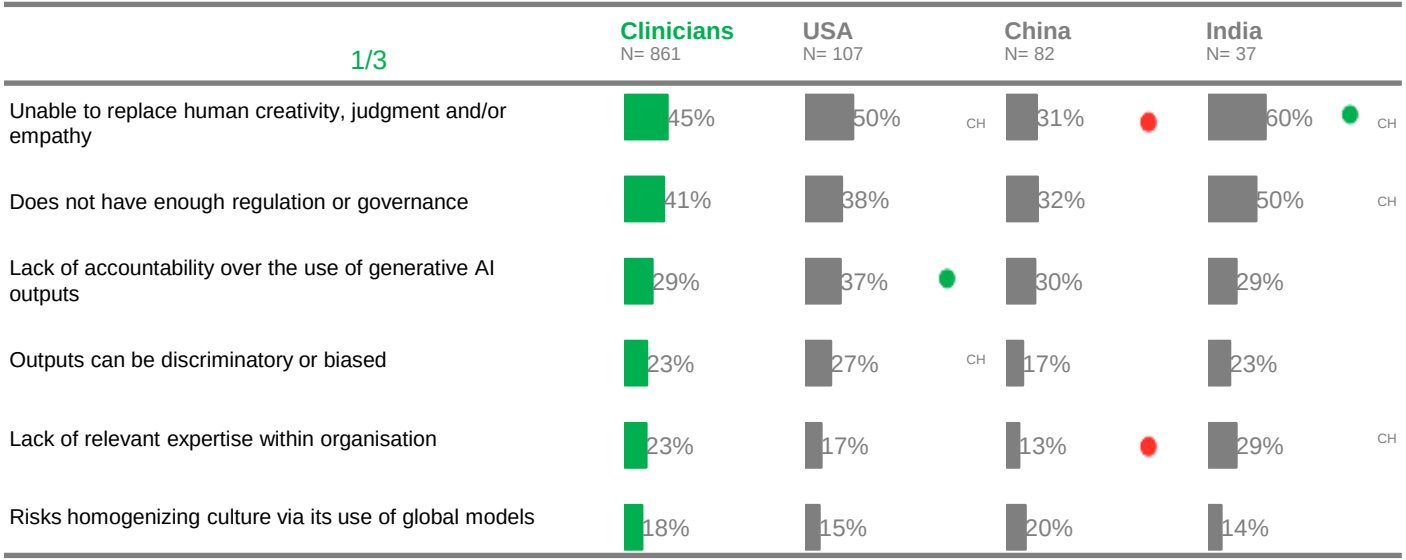
ELSEVIER

	Clinicians 3/3 N= 861	Asia Pacific N= 223	Europe N= 261	North America N= 119	South America N= 211	Middle East & Africa N= 36
Requires a lot of computer processing power	10%	12% EU	6%	8%	11% EU	4%
Generative AI discriminates against non-native English speakers	7%	9% EU NA	3%	3%	7% EU	15% EU NA SA
Don't know/ not sure	1%	1%	1%	1%	3%	0%
Other	1%	2% SA	1%	1%	0%	0%
None of the above	0%	0%	1%	0%	2% AP	2% AP

Questions: You mentioned that you had concerns, what do you think are the top 3 disadvantages of AI?
Select: up to three
Base: n= 861

Significantly higher/ lower than… Global
Significantly higher than… Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

The most selected top-three disadvantage of AI for clinicians is its inability to replace human creativity. This notably is higher in India and lower in China (1/3)



Questions: You mentioned that you had concerns, what do you think are the top 3 disadvantages of AI?
Select: up to three
Base: n= 861

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

The most selected top-three disadvantage of AI for clinicians is its inability to replace human creativity. This notably is higher in India and is lower in China (2/3)

2/3	Clinicians N= 861	USA N= 107	China N= 82	India N= 37
Too dependent on outdated data and/or information	17%	16%	27% US IN	9%
Lack of permission to use data or information AI tools are trained on	15%	13%	18%	13%
Generative AI inputs/prompts are not confidential	14%	11%	19%	IN 2%
The logic behind an output is not well described	14%	13%	16%	IN 5%
Outputs are factually incorrect and/or non-sensical (hallucinations)	11%	27% IN CH	8%	5%
Generative AI outputs are not confidential	11%	7%	19% US IN	7%

Questions: You mentioned that you had concerns, what do you think are the top 3 disadvantages of AI?
Select: up to three
Base: n= 861

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

The most selected top-three disadvantage of AI for clinicians is its inability to replace human creativity. This notably is higher in India and is lower in China (3/3)

3/3	Clinicians N= 861	USA N= 107	China N= 82	India N= 37
Requires a lot of computer processing power	10%	9%	13%	5%
Generative AI discriminates against non-native English speakers	7%	4%	10%	US IN 0%
Don't know/ not sure	1%	1%	1%	5%
Other	1%	1%	1%	2%
None of the above	0%	0%	0%	0%

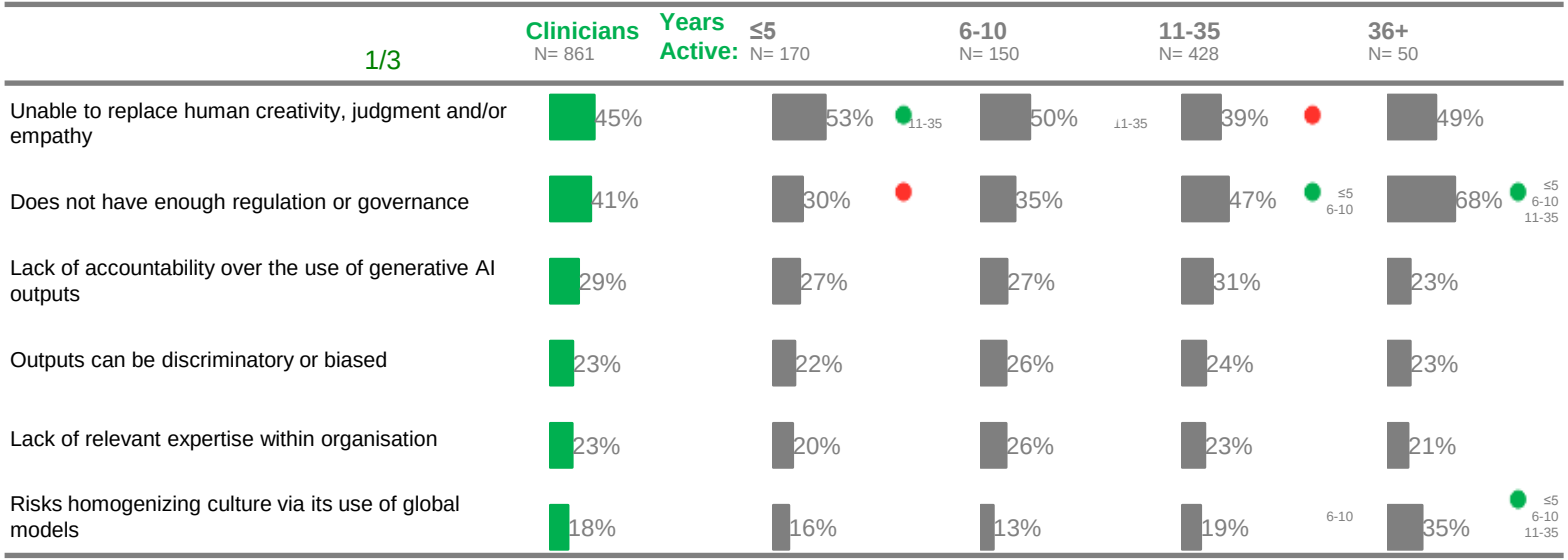
Questions: You mentioned that you had concerns, what do you think are the top 3 disadvantages of AI?
Select: up to three
Base: n= 861

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

The most common top-three disadvantages of AI for clinicians are its inability to replace humans (higher for those with less than 5 years active) and its lack of regulation/governance (higher for those with 36+ years active) (1/3)



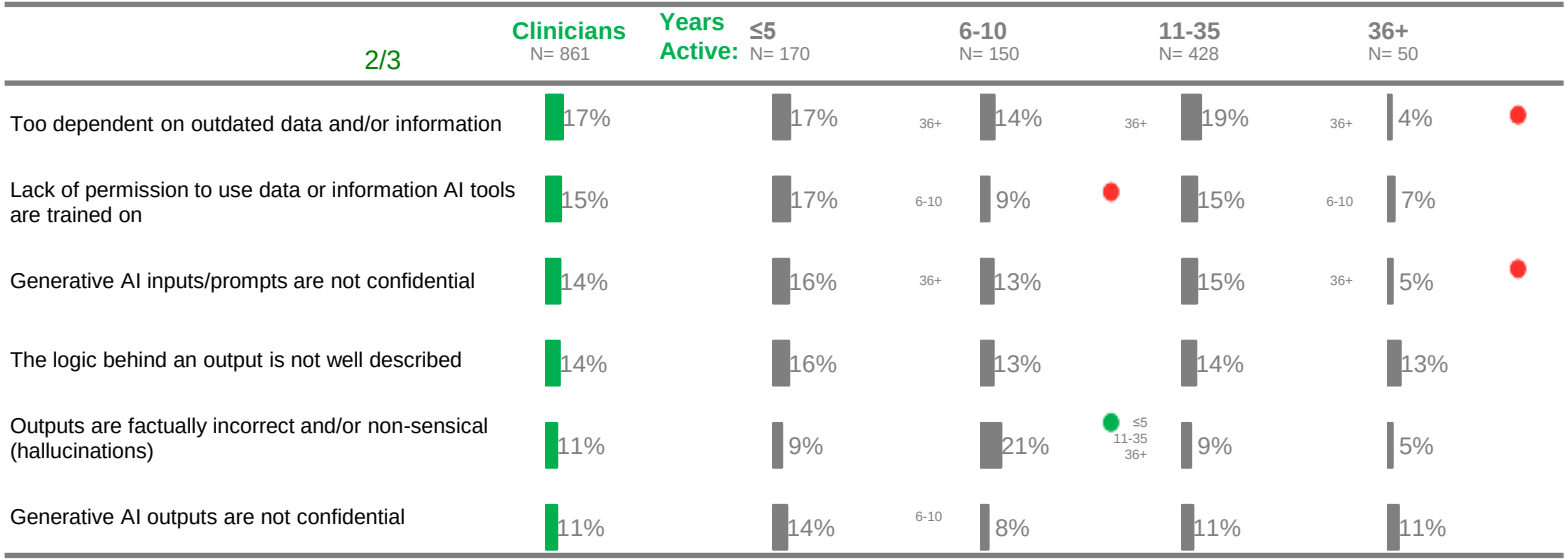
Questions: You mentioned that you had concerns, what do you think are the top 3 disadvantages of AI?
Select: up to three
Base: n= 861

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

The most common top-three disadvantages of AI for clinicians are its inability to replace humans (higher for those with less than 5 years active) and its lack of regulation/governance (higher for those with 36+ years active) (2/3)



Questions: You mentioned that you had concerns, what do you think are the top 3 disadvantages of AI?
Select: up to three
Base: n= 861

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

The most common top-three disadvantages of AI for clinicians are its inability to replace humans (higher for those with less than 5 years active) and its lack of regulation/governance (higher for those with 36+ years active) (3/3)

3/3	Clinicians N= 861	Years Active: ≤5 N= 170	6-10 N= 150	11-35 N= 428	36+ N= 50
Requires a lot of computer processing power	10%	13%	13%	9%	6%
Generative AI discriminates against non-native English speakers	7%	6%	4%	7%	6%
Don't know/ not sure	1%	1%	2%	1%	5% ≤5 11-35
Other	1%	0%	0%	1%	2% ≤5 6-10
None of the above	0%	0%	2% ≤5 11-35	0%	0%

Questions: You mentioned that you had concerns, what do you think are the top 3 disadvantages of AI?
Select: up to three
Base: n= 861

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

The most common top-three disadvantages of AI for clinicians are its inability to replace humans and then its lack of regulation/governance. In high income markets, governance is of equal concern (1/3)

1/3	Clinicians N= 861	High Income N= 470	Upper-Middle-Income N= 286	Lower-Middle-Income N= 89
Unable to replace human creativity, judgment and/or empathy	45%	48% UM	38%	51%
Does not have enough regulation or governance	41%	48% UM LM	36%	30%
Lack of accountability over the use of generative AI outputs	29%	30%	26%	30%
Outputs can be discriminatory or biased	23%	27% UM	20%	19%
Lack of relevant expertise within organisation	23%	22%	18%	36% HI
Risks homogenizing culture via its use of global models	18%	16%	23% HI	16%

Questions: You mentioned that you had concerns, what do you think are the top 3 disadvantages of AI? Select: up to three
Base: n= 861

The most common top-three disadvantages of AI for clinicians are its inability to replace humans and then its lack of regulation/governance. In high income markets, governance is of equal concern (2/3)

2/3	Clinicians N= 861	High Income N= 470	Upper-Middle-Income N= 286	Lower-Middle-Income N= 89
Too dependent on outdated data and/or information	17%	12%	25% HI LM	14%
Lack of permission to use data or information AI tools are trained on	15%	16%	15%	13%
Generative AI inputs/prompts are not confidential	14%	15%	15%	12%
The logic behind an output is not well described	14%	16% LM	14% LM	6%
Outputs are factually incorrect and/or non-sensical (hallucinations)	11%	17% UM LM	5%	6%
Generative AI outputs are not confidential	11%	8%	14% HI	16% HI

Questions: You mentioned that you had concerns, what do you think are the top 3 disadvantages of AI? Select: up to three
Base: n= 861

The most common top-three disadvantages of AI for clinicians are its inability to replace humans and then its lack of regulation/governance. In high income markets, governance is of equal concern (3/3)

3/3	Clinicians N= 861	High Income N= 470	Upper-Middle-Income N= 286	Lower-Middle-Income N= 89
Requires a lot of computer processing power	10%	6%	15% HI	12% HI
Generative AI discriminates against non-native English speakers	7%	5%	9% HI	5%
Don't know/ not sure	1%	1%	1%	2%
Other	1%	1%	0%	4% HI
None of the above	0%	0%	0%	1%

Questions: You mentioned that you had concerns, what do you think are the top 3 disadvantages of AI? Select: up to three
Base: n= 861

AI is anticipated to have a positive impact in many areas, it is expected to help accelerate knowledge discovery, increase research outputs, and change higher education over the next 2-5 years

ELSEVIER

Positive Impacts

% Not at all/At least to some extent	Clinicians N= 976	Doctors N= 699	Nurses N= 277
Rapidly increase the volume of scholarly and medical research	4% 96%	4% 96%	3% 97%
Accelerate knowledge discovery	4% 96%	5% 95%	3% 97%
Change the way students are taught and study in universities and medical schools	4% 96%	4% 96%	5% 95%
Increase your work efficiency	6% 94%	6% 94%	6% 94%
Provide cost savings to institutions and businesses	8% 92%	8% 92%	8% 92%
Increase your work quality	12% 88%	8% 92%	NU 15% 85%
Increase your work consistency	14% 86%	12% 88%	16% 84%
Free your time for higher value work	15% 85%	14% 86%	16% 84%
Increase collaboration	16% 84%	15% 85%	16% 84%

Questions: Thinking about the impact AI will have on society and your work, to what extent do you think over the next 2 to 5 years it will…?
Scale: A great extent, some extent, not at all, don't know/not sure (bottom box and top 2 box excl. don't know)
Base: n= 976

Clinicians

Significantly higher/ lower than…
Significantly higher than…
Global
Gender/Generation (indicated by first letter e.g. M= Men)

Back to home

Clinicians also expect AI has the potential to be used for misinformation and to cause critical errors

Negative Impacts

% Not at all/At least to some extent	Clinicians N= 948	Doctors N= 674	Nurses N= 274
Be used for misinformation	7% / 93%	6% / 94%	8% / 92%
Cause critical errors or mishaps (e.g. accidents)	15% / 85%	14% / 86%	15% / 85%
Mean physicians become over reliant on AI to make clinical decisions *Only asked to doctors*	18% / 82%	18% / 82%	
Erode human critical thinking skills	19% / 81%	17% / 83%	21% / 79%
Cause disruption to society (e.g. unemployment for large numbers of people)	21% / 79%	16% / 84%	NU 27% / 73%

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Gender/Generation (indicated by first letter e.g. M= Men)

Questions: Thinking about the impact AI will have on society and your work, to what extent do you think over the next 2 to 5 years it will…?
Scale: A great extent, some extent, not at all, don't know/not sure (bottom box and top 2 box excl. don't know)
Base: n= 948

AI is anticipated to have a positive impact in many areas over the next 2-5 years, clinicians in North America and Europe generally believe it will be less than the global average

Positive Impacts

Questions: Thinking about the impact AI will have on society and your work, to what extent do you think over the next 2 to 5 years it will…?
Scale: A great extent, some extent, not at all, don't know/not sure (bottom box and top 2 box excl. don't know)
Base: n= 976

Significantly higher/ lower than… Global
Significantly higher than… Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Clinicians think AI has the potential to have a negative impact and could be used for misinformation and cause critical errors, those in North America are more likely to think AI will cause critical errors and disruption to society

Negative Impacts

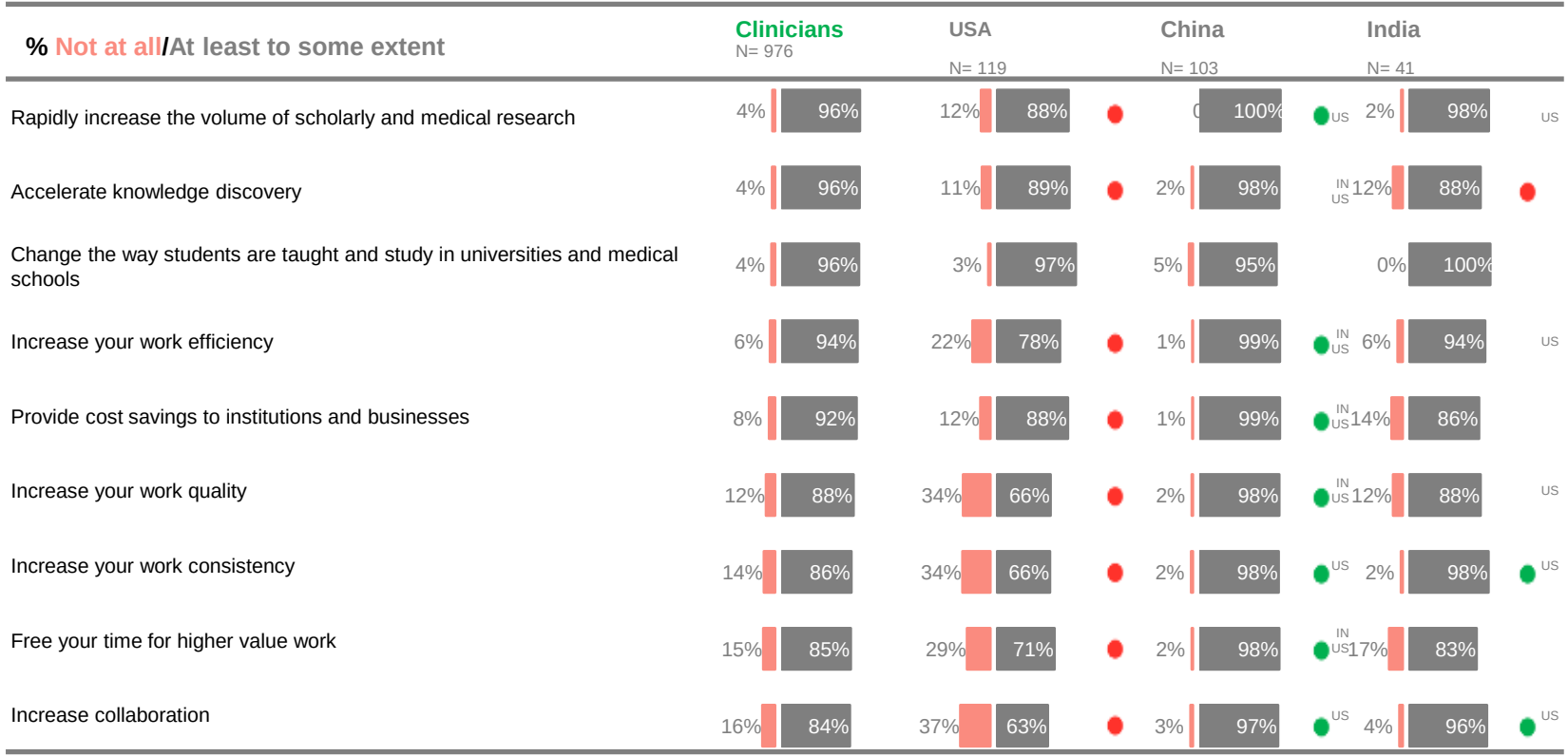
% Not at all/At least to some extent	Clinicians N= 948	Asia Pacific N= 253	Europe N= 273	North America N= 130	South America N= 238	Middle East & Africa N= 42
Be used for misinformation	7% / 93%	5% / 95%	EU SA 9% / 91%	SA 6% / 94%	SA 14% / 86%	9% / 91%
Cause critical errors or mishaps (e.g. accidents)	15% / 85%	16% / 84%	17% / 83%	6% / 94%	AP EU SA 13% / 87%	10% / 90%
Mean physicians become over reliant on AI to make clinical decisions	18% / 82%	13% / 87%	EU NA SA 26% / 74%	23% / 77%	21% / 79%	12% / 88% EU
Erode human critical thinking skills	19% / 81%	22% / 78%	17% / 83%	16% / 84%	14% / 86%	AP 18% / 82%
Cause disruption to society (e.g. unemployment for large numbers of people)	21% / 79%	26% / 74%	23% / 77%	15% / 85%	AP EU 14% / 86%	AP EU 6% / 94% AP EU

Questions: Thinking about the impact AI will have on society and your work, to what extent do you think over the next 2 to 5 years it will…?
Scale: A great extent, some extent, not at all, don't know/not sure (bottom box and top 2 box excl. don't know)
Base: n= 948

Significantly higher/ lower than… Global
Significantly higher than… Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Chinese clinicians are most likely to think AI will positively impact society and their work across multiple parameters, USA least likely

Positive Impacts



Questions: Thinking about the impact AI will have on society and your work, to what extent do you think over the next 2 to 5 years it will…?
Scale: A great extent, some extent, not at all, don't know/not sure (bottom box and top 2 box excl. don't know)
Base: n= 976

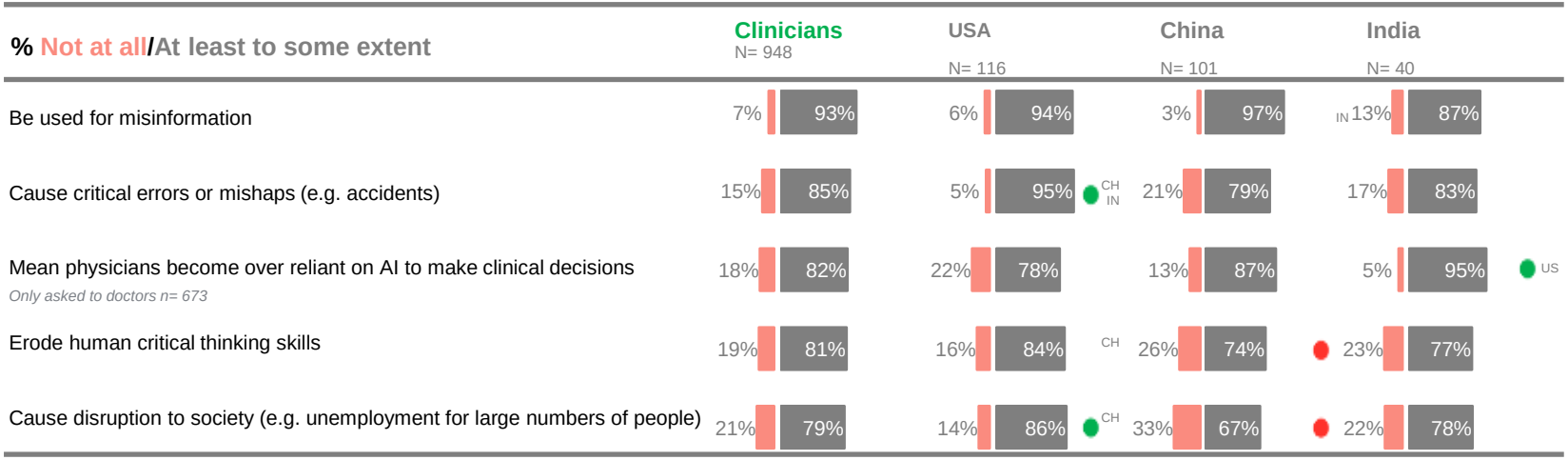
Clinicians

Back to home

Significantly higher/ lower than… Global
Significantly higher than… Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Clinicians think AI has the potential to have a negative impact and could be used for misinformation and cause critical errors, US clinicians are most likely to think AI will cause critical errors

Negative Impacts



Questions: Thinking about the impact AI will have on society and your work, to what extent do you think over the next 2 to 5 years it will…?

Scale: A great extent, some extent, not at all, don't know/not sure (bottom box and top 2 box excl. don't know)
Base: n= 948

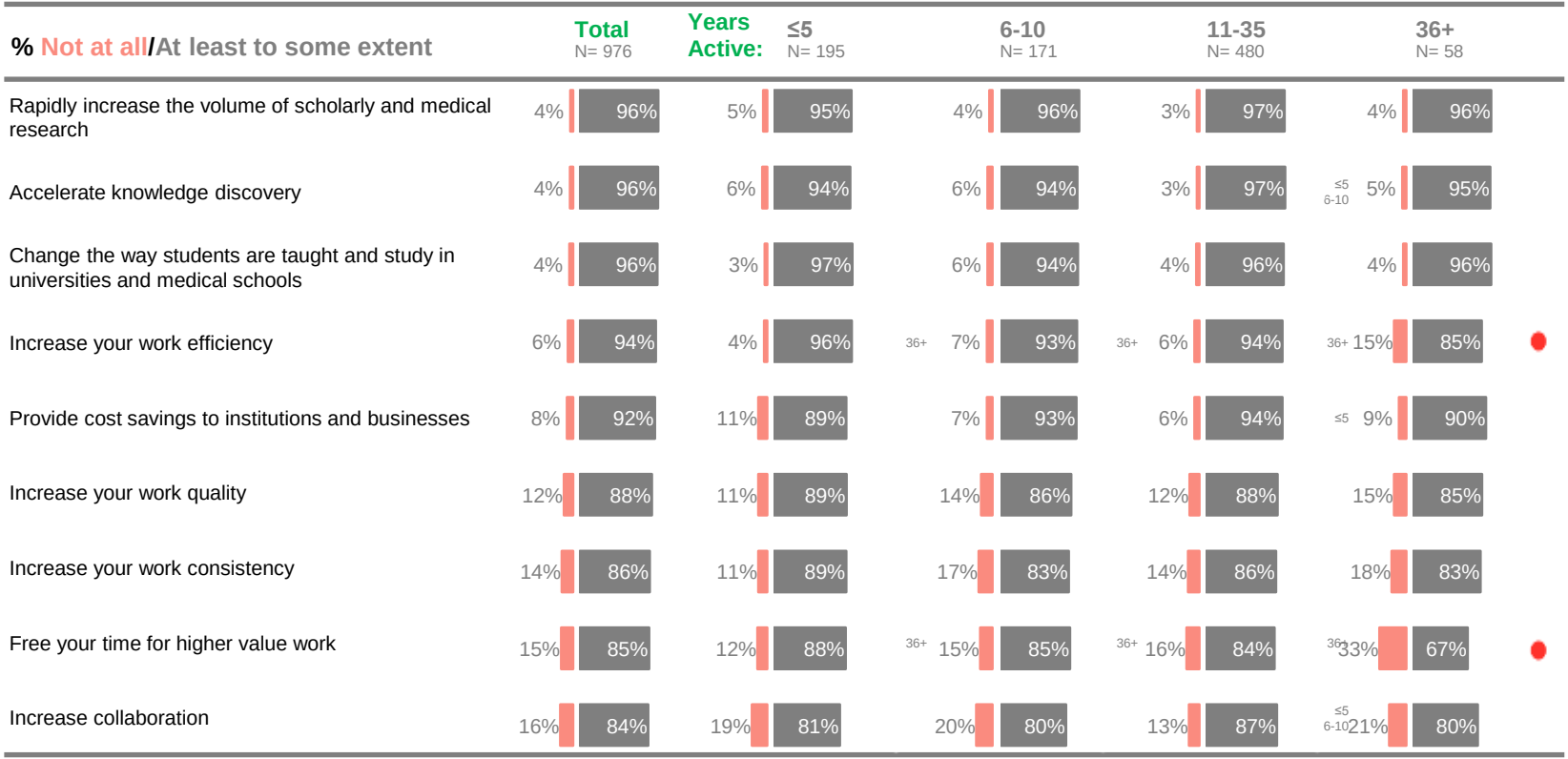
Clinicians

Significantly higher/ lower than… *Global*
Significantly higher than… *Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)*

Back to home

Clinicians expect AI will have an impact across a range of areas over the next 2-5 years, there is little difference by years active in role

Positive Impacts



Questions: Thinking about the impact AI will have on society and your work, to what extent do you think over the next 2 to 5 years it will…?
Scale: A great extent, some extent, not at all, don't know/not sure (bottom box and top 2 box excl. don't know)
Base: n= 976

Clinicians

Significantly higher/ lower than… Global
Significantly higher than… Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Back to home

Clinicians think AI has the potential to have a negative impact and could be used for misinformation and cause critical errors, there is little difference by years active in role

Negative Impacts

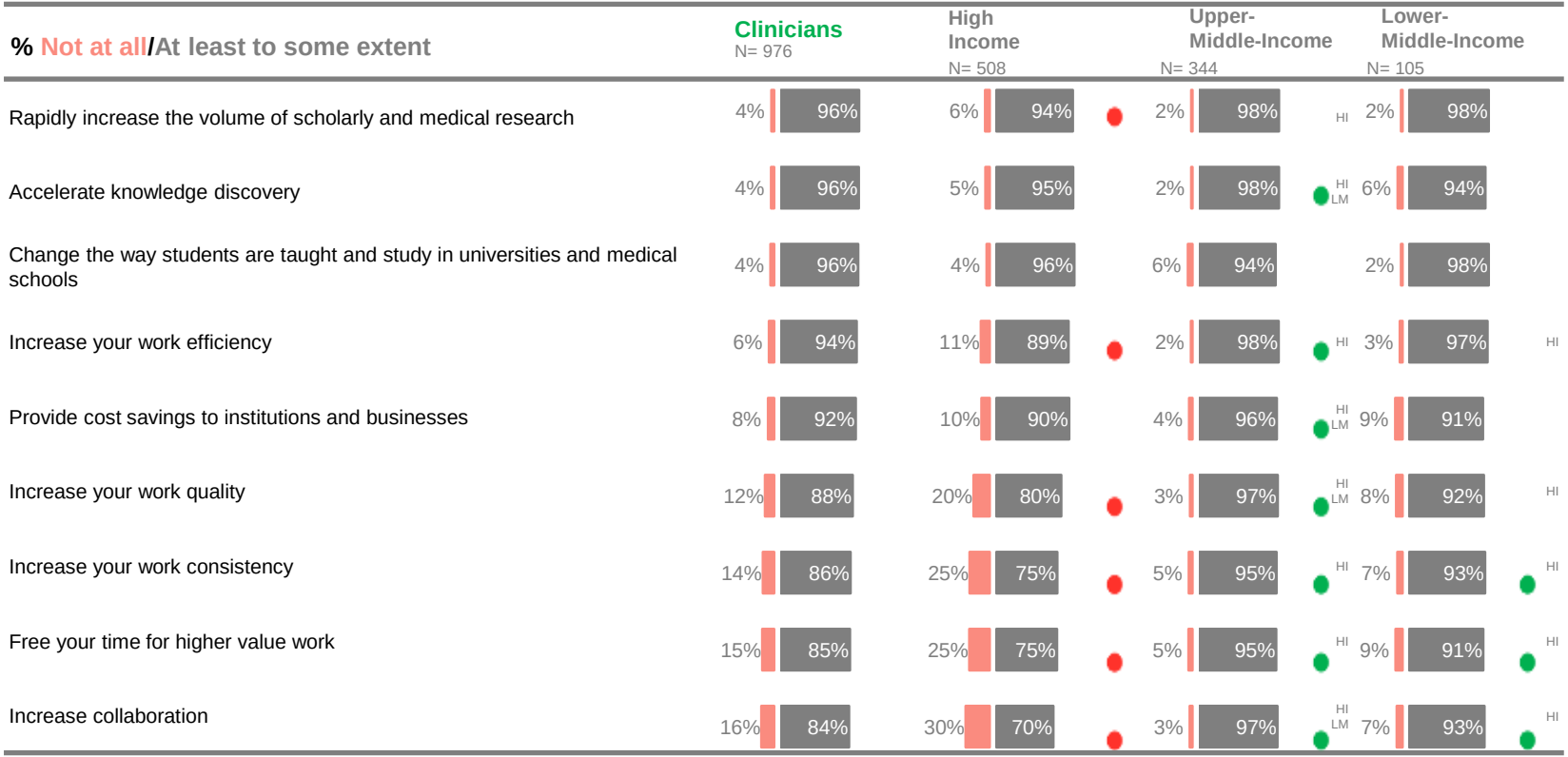
% Not at all/At least to some extent	Total N= 948	Years Active: ≤5 N= 192	6-10 N= 164	11-35 N= 462	36+ N= 57
Be used for misinformation	7% / 93%	9% / 91%	7% / 93%	6% / 94%	11% / 89%
Cause critical errors or mishaps (e.g. accidents)	15% / 85%	15% / 85%	11% / 89%	11-35 17% / 83%	16% / 85%
Mean physicians become over reliant on AI to make clinical decisions *Only asked to doctors n= 673*	18% / 82%	19% / 81%	20% / 80%	15% / 85%	20% / 80%
Erode human critical thinking skills	19% / 81%	14% / 86%	11-35 17% / 83%	21% / 79%	17% / 84%
Cause disruption to society (e.g. unemployment for large numbers of people)	21% / 79%	19% / 81%	20% / 80%	24% / 76%	17% / 83%

Questions: Thinking about the impact AI will have on society and your work, to what extent do you think over the next 2 to 5 years it will…?
Scale: A great extent, some extent, not at all, don't know/not sure (bottom box and top 2 box excl. don't know)
Base: n= 948

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

AI is anticipated to have a positive impact in many areas over the next 2-5 years those in high income countries tend to think the extent of impact will be less

Positive Impacts



Questions: Thinking about the impact AI will have on society and your work, to what extent do you think over the next 2 to 5 years it will…?
Scale: A great extent, some extent, not at all, don't know/not sure (bottom box and top 2 box excl. don't know)
Base: n= 976

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Clinicians think AI has the potential to have a negative impact and could be used for misinformation and cause critical errors, this tends to higher in high income countries

Negative Impacts

Questions: Thinking about the impact AI will have on society and your work, to what extent do you think over the next 2 to 5 years it will…?
Scale: A great extent, some extent, not at all, don't know/not sure (bottom box and top 2 box excl. don't know)
Base: n= 948

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Most expect generative AI to always be paired with human expertise and to be informed if a tool they used depends on AI, little difference by role

% Disagree/Agree	Clinicians N= 963	Doctors N= 691	Nurses N= 272
generative AI to always be paired with human expertise (i.e. qualified people validate outputs)	6% 86%	6% 86%	6% 85%
to be informed whether the tools I use depend on generative AI	6% 81%	6% 84%	NU 6% 78%
to be informed if the peer-review recommendations I receive about my manuscript utilized generative AI, even if alongside human oversight	8% 80%	7% 81%	
generative AI will work well with non-text modalities (i.e. chemical or biological compounds, chemical reactions, graphs, plans)	7% 77%	6% 78%	8% 76%
to be given a choice to turn off generative AI in the tools that I use	8% 74%	8% 78%	NU 8% 70%
generative AI dependent tools' results be based on high quality trusted sources only	6% 73%	6% 76%	6% 71%
most authors who use generative AI to create the content of a manuscript will not declare that they have	14% 71%	13% 73%	

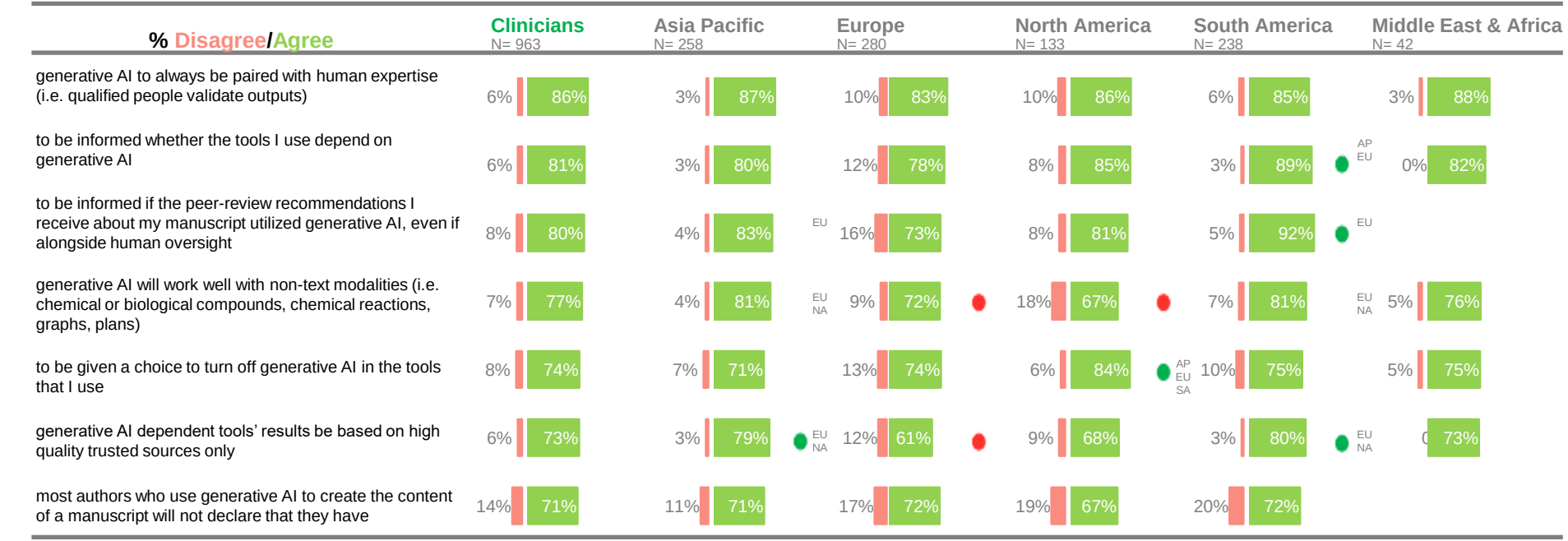
Clinicians

Back to home

Questions: Thinking about the use of generative AI in your area of work, how much do you agree or disagree with the following either presently or in the near future?
Scale: Strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, strongly disagree, don't know/not applicable (bottom 2 box and top 2 box, excl. don't know)
Significantly higher/ lower than… *Global*
Significantly higher than…
Gender/Generation (indicated by first letter e.g. M= Men)
Base: n= 963

Most expect generative AI to always be paired with human expertise and to be informed if a tool they used depends on AI, little difference by region

ELSEVIER



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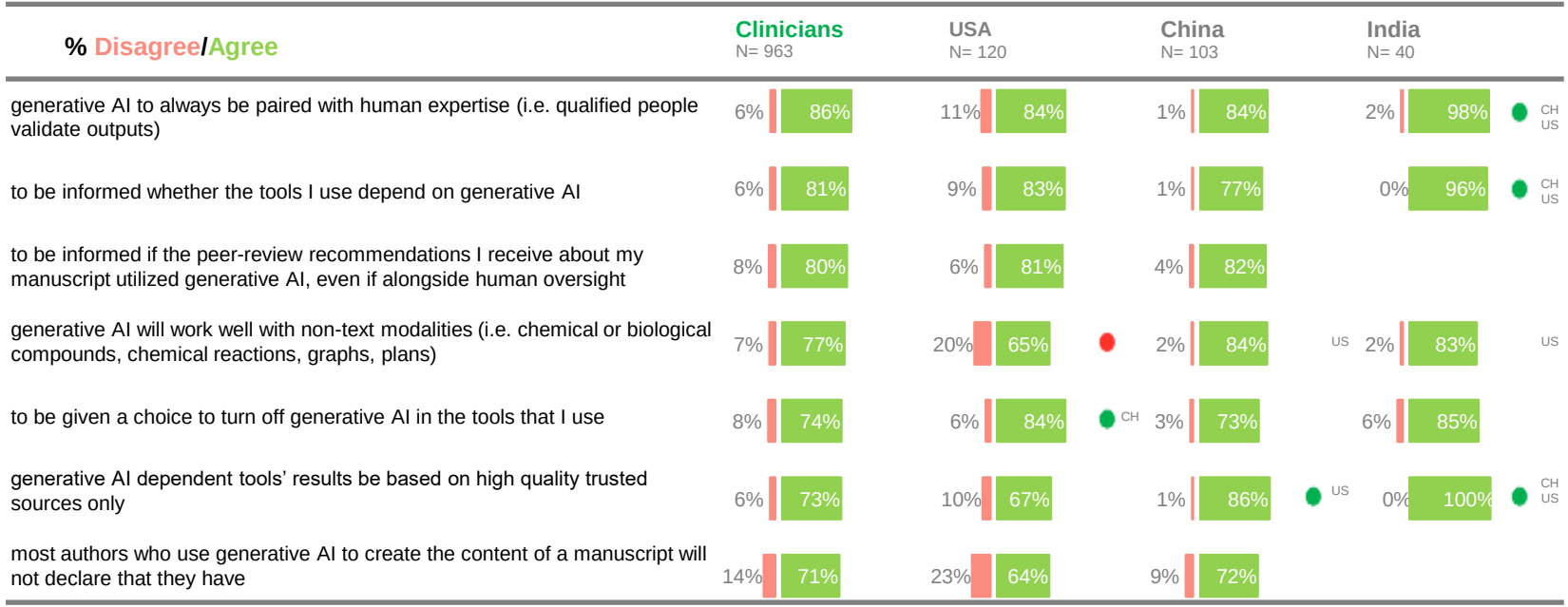
Scale: Strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, strongly disagree, don't know/not applicable (bottom 2 box and top 2 box, excl. don't know)
Base: n= 963

Significantly higher/ lower than… Global
Significantly higher than… Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Most expect generative AI to always be paired with human expertise and to be informed if a tool they used depends on AI both notably higher in India



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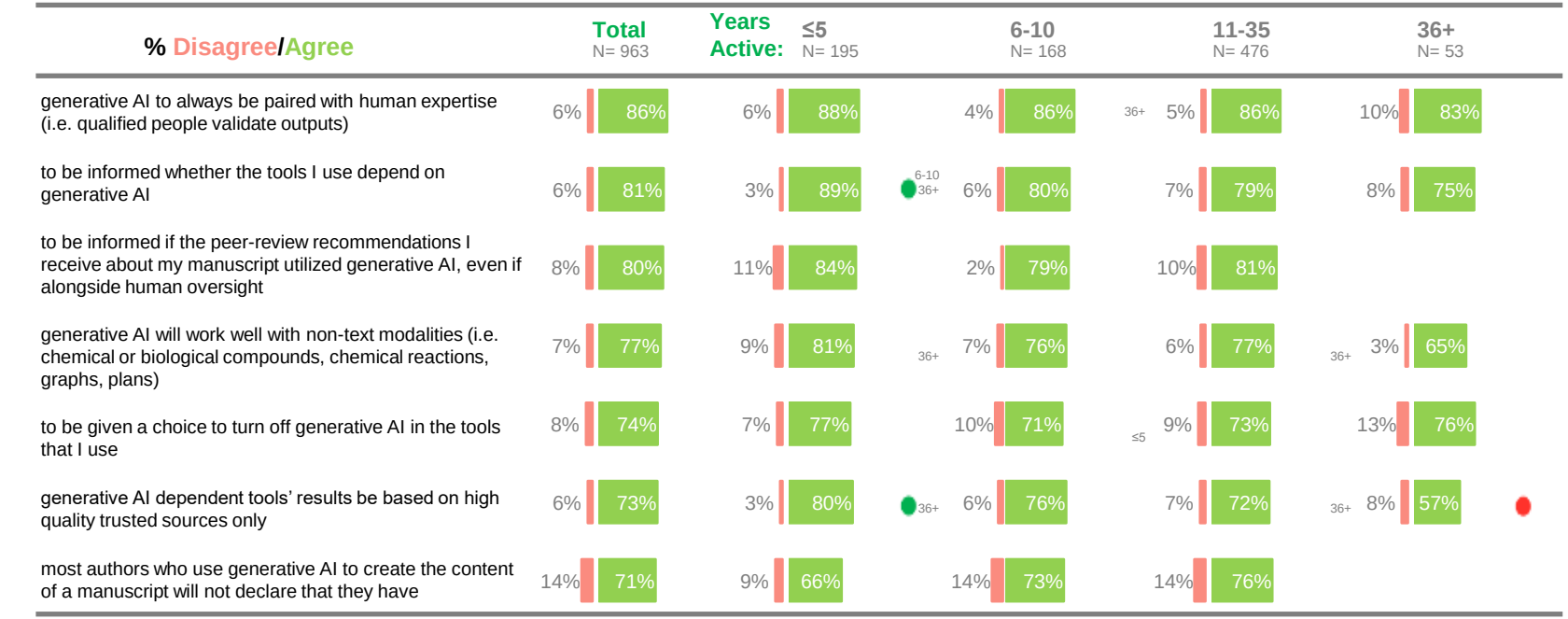
Scale: Strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, strongly disagree, don't know/not applicable (bottom 2 box and top 2 box, excl. don't know)
Base: n= 963

Significantly higher/ lower than… Global
Significantly higher than… Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Most expect generative AI to always be paired with human expertise and to be informed if a tool they used depends on AI, little difference by years active in role



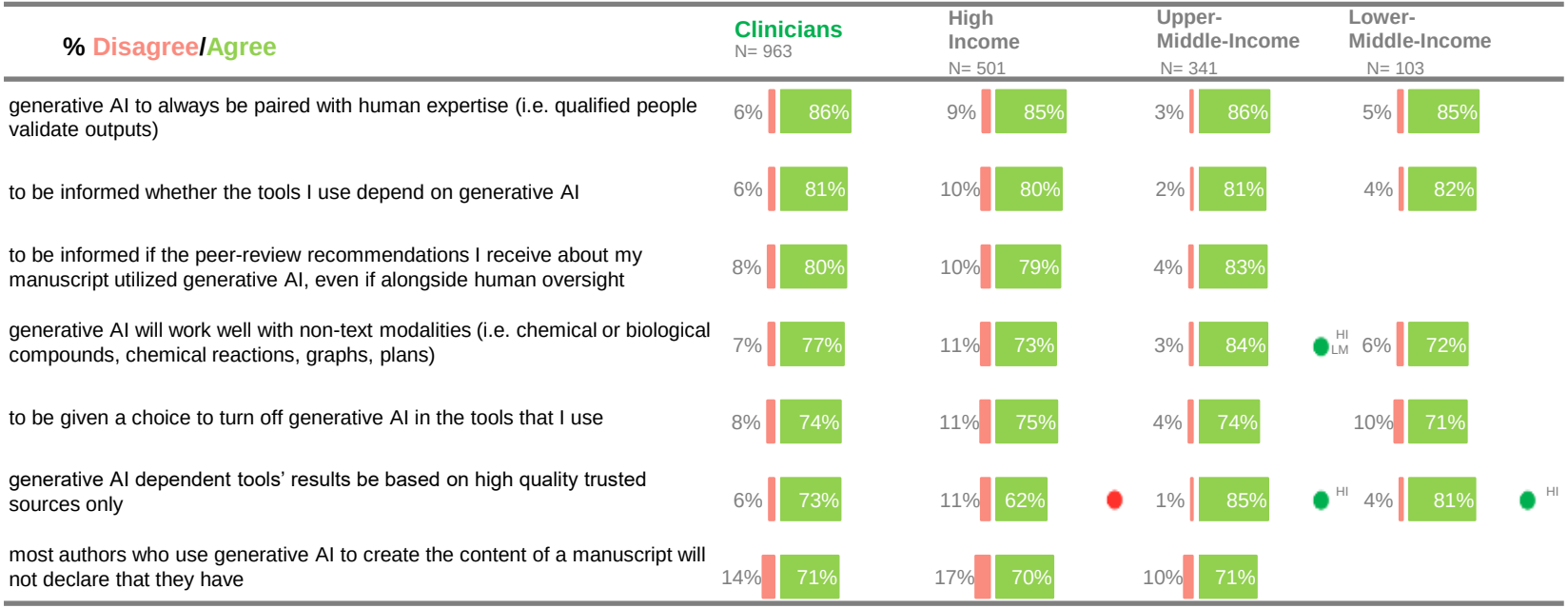
Clinicians

Back to home

Questions: Thinking about the use of generative AI in your area of work, how much do you agree or disagree with the following either presently or in the near future?
Scale: Strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, strongly disagree, don't know/not applicable (bottom 2 box and top 2 box, excl. don't know)
Base: n= 963

Significantly higher/ lower than… *Global*
Significantly higher than… *Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)*

Most expect generative AI to always be paired with human expertise and to be informed if a tool they used depends on AI, clinicians in high income countries least likely to expect that AI will be based on high quality trusted sources



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Scale: Strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, strongly disagree, don't know/not applicable (bottom 2 box and top 2 box, excl. don't know)
Base: n= 963

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Factors impacting **trust** in generative AI tools. Training an AI tool to not to be harmful, to only use peer-reviewed content & cite references would strongly increase clinicians' trust in generative AI tools, all are higher for doctors

ELSEVIER

% No impact/Strongly increase my trust	Clinicians N= 960	Doctors N= 684	Nurses N= 276
Training the model to be factually accurate, moral, and not harmful (safety)	5% 59%	4% 63%	NU 5% 54%
Only using high-quality peer-reviewed content to train the model (quality model input)	4% 58%	5% 63%	NU 3% 54%
Citing references by default (transparency)	6% 57%	4% 62%	NU 7% 51%
Keeping the information input confidential (security)	7% 55%	8% 60%	NU 5% 50%
Abidance by any laws governing development and implementation (legality)	5% 54%	7% 59%	NU 3% 49%
Training the model for high coherency outputs (quality model output)	5% 53%	5% 58%	NU 4% 49%

Questions: To what extent, if at all, would the following factors increase your trust in tools that utilize generative AI?
Scale: Strongly increase my trust, slightly increase my trust, no impact on my level of trust, don't know / not applicable (bottom box and top box, excl. don't know)
Base: n= 960

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Gender/Generation (indicated by first letter e.g. M= Men)

Factors impacting **trust** in generative AI tools. Training an AI tool to not to be harmful, to only use peer-reviewed content & cite references would strongly increase clinicians' trust in generative AI tools. These are all higher in Europe

% No impact/Strongly increase my trust	Clinicians N= 960	Asia Pacific N= 249	Europe N= 280	North America N= 132	South America N= 245	Middle East & Africa N= 42
Training the model to be factually accurate, moral, and not harmful (safety)	5% 59%	3% 52%	5% 67% AP NA	9% 59%	7% 62%	AP 7% 68% AP
Only using high-quality peer-reviewed content to train the model (quality model input)	4% 58%	3% 52%	3% 65% AP	8% 59%	7% 60%	AP 4% 60%
Citing references by default (transparency)	6% 57%	4% 48%	7% 65% AP	10% 58% AP	5% 62%	AP 6% 72% AP
Keeping the information input confidential (security)	7% 55%	5% 48%	9% 66% AP NA	13% 47%	7% 63% AP NA	7% 60%
Abidance by any laws governing development and implementation (legality)	5% 54%	4% 47%	6% 62% AP NA	9% 49%	5% 62% AP NA	11% 52%
Training the model for high coherency outputs (quality model output)	5% 53%	3% 42%	6% 66% AP NA	11% 50%	6% 65% AP NA	5% 65% AP

Clinicians

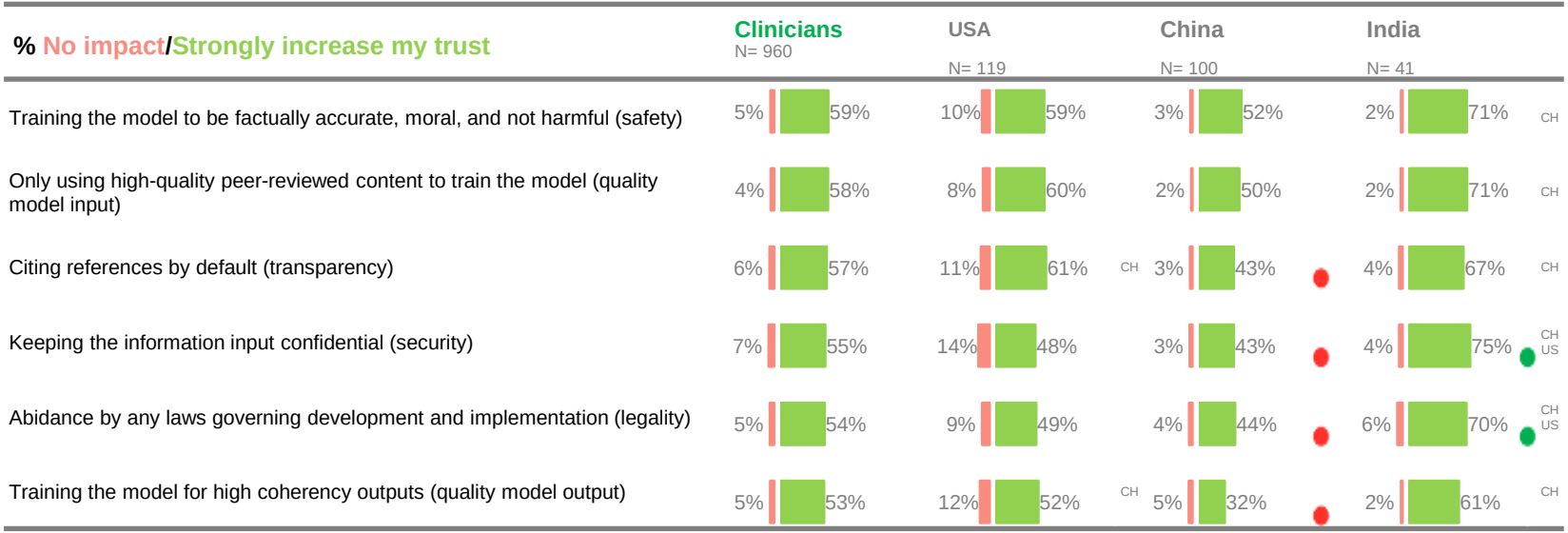
Back to home

Significantly higher/ lower than… Global

Significantly higher than… Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Questions: To what extent, if at all, would the following factors increase your trust in tools that utilize generative AI?
Scale: Strongly increase my trust, slightly increase my trust, no impact on my level of trust, don't know / not applicable (bottom box and top box, excl. don't know)
Base: n= 960

Factors impacting **trust** in generative AI tools. Training an AI tool to not to be harmful, to only use peer-reviewed content & cite references would strongly increase clinicians' trust in generative AI tools. Clinicians in India's place greater emphasis on security and abided by any laws



Questions: To what extent, if at all, would the following factors increase your trust in tools that utilize generative AI?
Scale: Strongly increase my trust, slightly increase my trust, no impact on my level of trust, don't know / not applicable (bottom box and top box, excl. don't know)
Base: n= 960

Clinicians

Back to home

Significantly higher/ lower than… Global
Significantly higher than… Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Factors impacting **trust** in generative AI tools. Training an AI tool to not to be harmful, to only use peer-reviewed content & cite references would strongly increase clinicians' trust in generative AI tools. Little difference by years active

% No impact/Strongly increase my trust	Total N= 960	Years Active: ≤5 N= 196	6-10 N= 167	11-35 N= 475	36+ N= 57
Training the model to be factually accurate, moral, and not harmful (safety)	5% 59%	5% 57%	5% 57%	4% 63%	3% 63%
Only using high-quality peer-reviewed content to train the model (quality model input)	4% 58%	3% 60%	4% 55%	4% 62%	0 64%
Citing references by default (transparency)	6% 57%	3% 61%	4% 52%	6% 59%	16% 52%
Keeping the information input confidential (security)	7% 55%	6% 59%	5% 57%	7% 55%	5% 53%
Abidance by any laws governing development and implementation (legality)	5% 54%	6% 49%	7% 55%	4% 58%	3% 61%
Training the model for high coherency outputs (quality model output)	5% 53%	4% 52%	5% 45%	5% 58%	0 69%

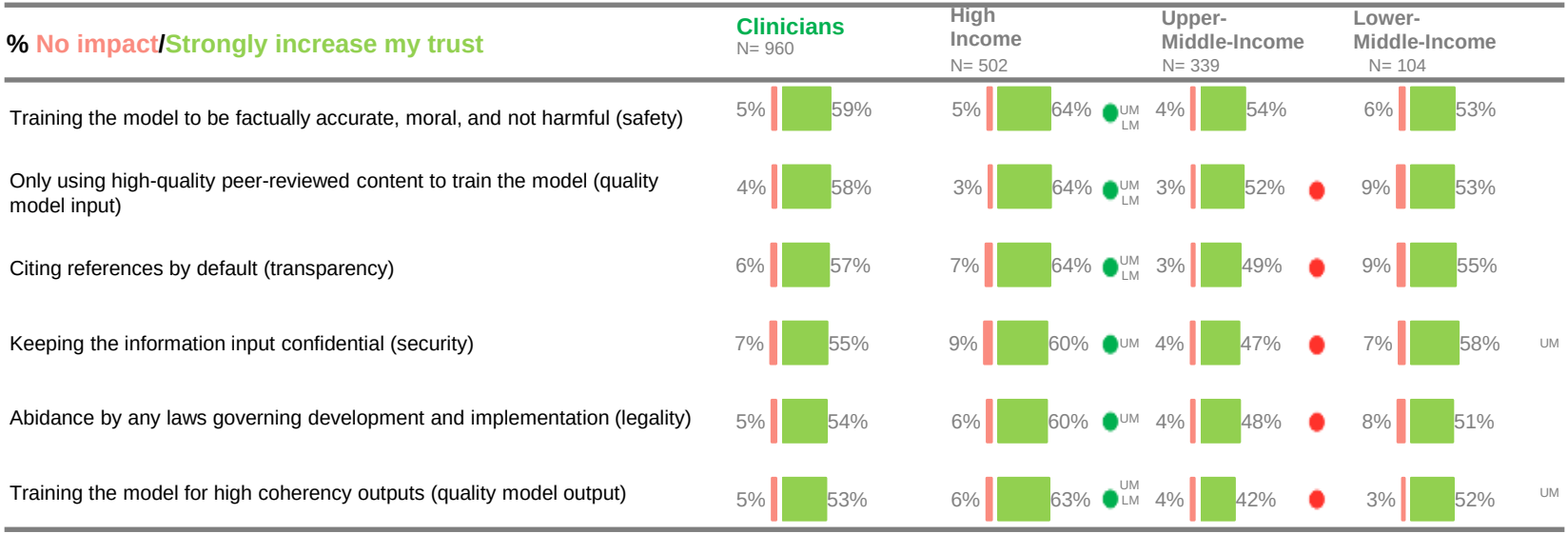
Questions: To what extent, if at all, would the following factors increase your trust in tools that utilize generative AI?
Scale: Strongly increase my trust, slightly increase my trust, no impact on my level of trust, don't know / not applicable (bottom box and top box, excl. don't know)
Base: n= 960

Clinicians

Back to home

Significantly higher/ lower than… *Global*
Significantly higher than… *Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)*

Factors impacting **trust** in generative AI tools. Training an AI tool to not to be harmful, to only use peer-reviewed content & cite references would strongly increase clinicians' trust in generative AI tools. Clinicians from high income countries would be more impacted



Questions: To what extent, if at all, would the following factors increase your trust in tools that utilize generative AI?
Scale: Strongly increase my trust, slightly increase my trust, no impact on my level of trust, don't know / not applicable (bottom box and top box, excl. don't know)
Base: n= 960

What increases **comfort** of using a tool dependent on generative AI? Over a third of clinicians think that they'd be more comfortable using tools knowing privacy is respected, the model is up to date & there is human oversight – no difference by doctors and nurses (1/2)

ELSEVIER

1/2	Clinicians N= 1007	Doctors N= 718	Nurses N= 289
That privacy is respected on user inputs	37%	36%	39%
That the information the model uses is up-to-date	37%	38%	36%
That there is accountability through human oversight	37%	39%	34%
Robust governance on data and information used to train the model	35%	36%	33%
That the real-world impact on people has been considered	34%	31%	38%

DR

Questions: Which information areas about a tool's dependency on generative AI would most increase your comfort in using that tool?

Select: up to three
Base: n= 1007

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…

Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

What increases **comfort** of using a tool dependent on generative AI? Over a third of clinicians think that they'd be more comfortable using tools knowing privacy is respected, the model is up to date & there is human oversight – no difference by doctors and nurses (2/2)

2/2	Clinicians N= 1007	Doctors N= 718	Nurses N= 289
That privacy is respected on outputs generated by the model	29%	28%	29%
That actions have been taken to prevent unfair bias	27%	29%	26%
That the way the solution works can be, and is, explained	24%	25%	24%
Don't know / not sure	5%	5%	4%
None of the above	2%	2%	1%

Questions: Which information areas about a tool's dependency on generative AI would most increase your comfort in using that tool?

Select: up to three
Base: n= 1007

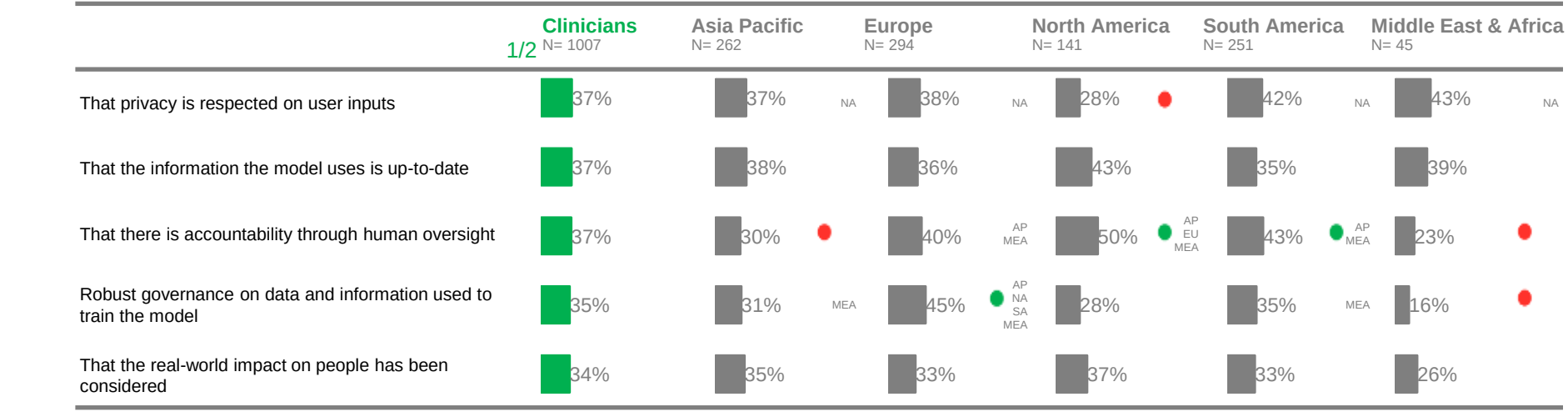
Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…

Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

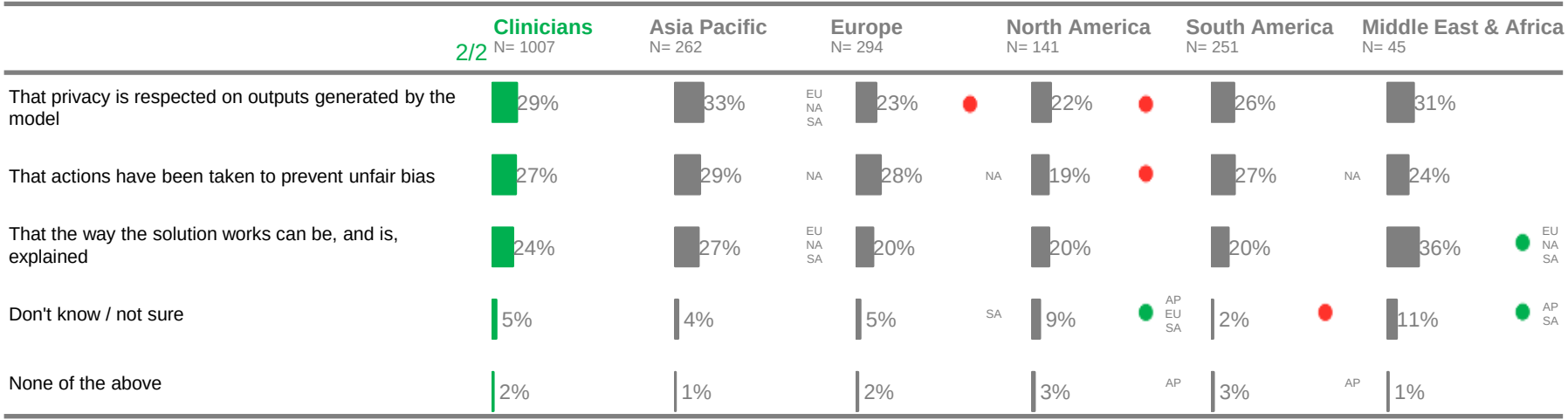
What increases **comfort** of using a tool dependent on generative AI? Over a third of clinicians think that they'd be more comfortable using tools knowing privacy is respected, the model is up to date & there is human oversight – privacy is less of a concern in South America (1/2)



Questions: Which information areas about a tool's dependency on generative AI would most increase your comfort in using that tool?
Select: up to three
Base: n= 1007

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

What increases **comfort** of using a tool dependent on generative AI? Over a third of clinicians think that they'd be more comfortable using tools knowing privacy is respected, the model is up to date & there is human oversight – privacy is less of a concern in South America (2/2)



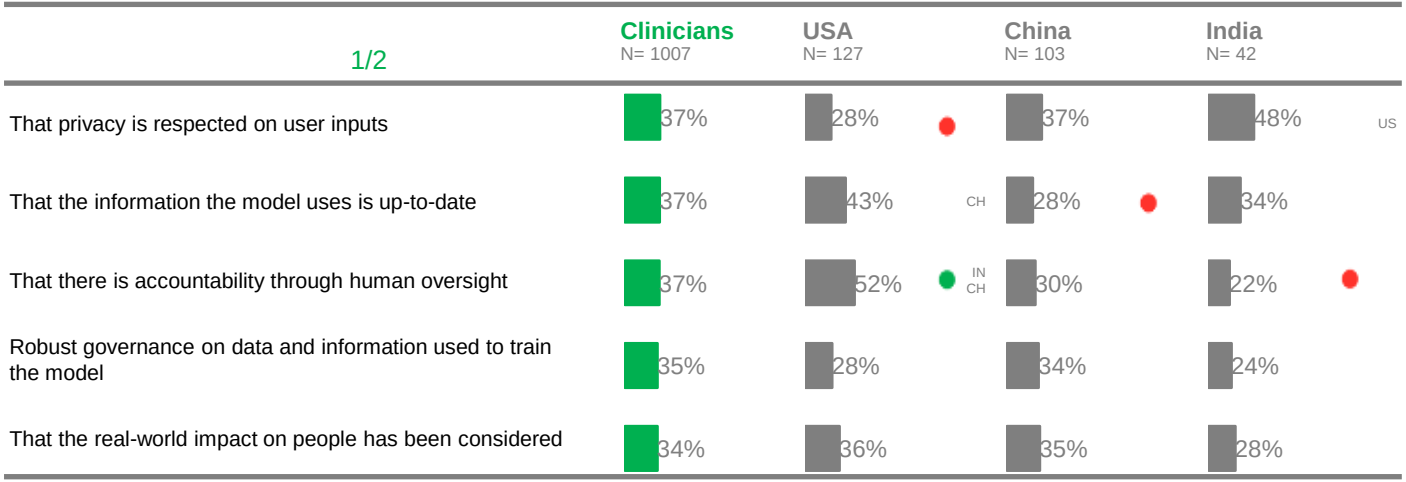
Questions: Which information areas about a tool's dependency on generative AI would most increase your comfort in using that tool?
Select: up to three
Base: n= 1007

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

While Indian and Chinese clinicians would be most **comfortable** using AI tools that respect privacy, those in the USA are more focused on having human oversight (1/2)



Questions: Which information areas about a tool's dependency on generative AI would most increase your comfort in using that tool?
Select: up to three
Base: n= 1007

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

While Indian and Chinese clinicians would be most **comfortable** using AI tools that respect privacy, those in the USA are more focused on having human oversight (2/2)

2/2	Clinicians N= 1007	USA N= 127	China N= 103	India N= 42
That privacy is respected on outputs generated by the model	29%	20%	34% US	40% US
That actions have been taken to prevent unfair bias	27%	20%	25%	32% US
That the way the solution works can be, and is, explained	24%	20%	34% US	22%
Don't know / not sure	5%	9% CH	2%	6%
None of the above	2%	3%	2%	0%

Questions: Which information areas about a tool's dependency on generative AI would most increase your comfort in using that tool?
Select: up to three
Base: n= 1007

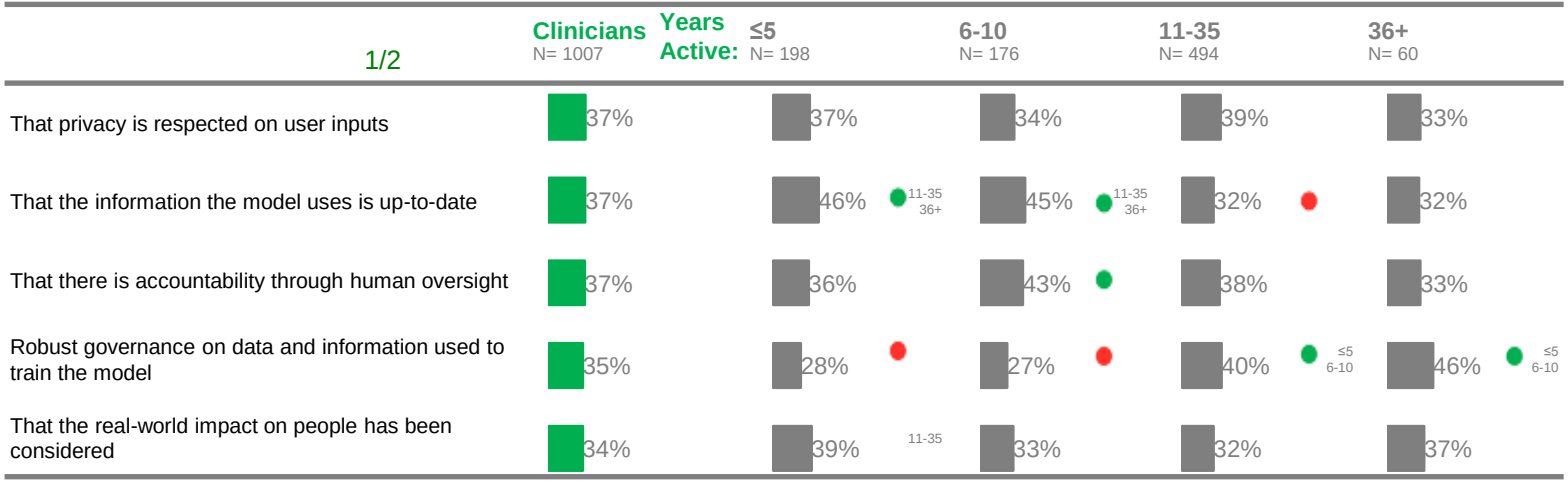
Clinicians

Significantly higher/ lower than… *Global*
Significantly higher than… *Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)*

Back to home

What increases **comfort** of using a tool dependent on generative AI? Those active less than 11 years think that they'd be more comfortable using tools knowing the model is up to date for those over 35 it is a focus on robust governance (1/2)

1/2



Questions: Which information areas about a tool's dependency on generative AI would most increase your comfort in using that tool?

Select: up to three

Base: n= 1007

Clinicians

Back to home

Significantly higher/ lower than… *Global*

Significantly higher than… *Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)*

What increases **comfort** of using a tool dependent on generative AI? Those active less than 11 years think that they'd be more comfortable using tools knowing the model is up to date for those over 35 it is a focus on robust governance and actions to mitigate against bias (2/2)

2/2

	Clinicians N= 1007	Years Active: ≤5 N= 198	6-10 N= 176	11-35 N= 494	36+ N= 60
That privacy is respected on outputs generated by the model	29%	33% 6-10	21%	30% 6-10	30%
That actions have been taken to prevent unfair bias	27%	19%	28% ≤5	31% ≤5	42% ≤5 6-10 11-35
That the way the solution works can be, and is, explained	24%	24%	22%	26%	27%
Don't know / not sure	5%	4%	4%	4%	2%
None of the above	2%	1%	2%	1%	3%

Questions: Which information areas about a tool's dependency on generative AI would most increase your comfort in using that tool?

Select: up to three
Base: n= 1007

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…

Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Clinicians in lower-middle-income countries would be most comfortable using a tool dependent on generative AI if privacy of user inputs is respected, while accountability and governance most increase comfort for clinicians from high income countries (1/2)

1/2	Clinicians N= 1007	High Income N= 529	Upper-Middle-Income N= 350	Lower-Middle-Income N= 109
That privacy is respected on user inputs	37%	32%	40% HI	47% HI
That the information the model uses is up-to-date	37%	39%	34%	39%
That there is accountability through human oversight	37%	43% UM LM	33%	26%
Robust governance on data and information used to train the model	35%	40% UM LM	33%	23% LM
That the real-world impact on people has been considered	34%	34%	33%	41%

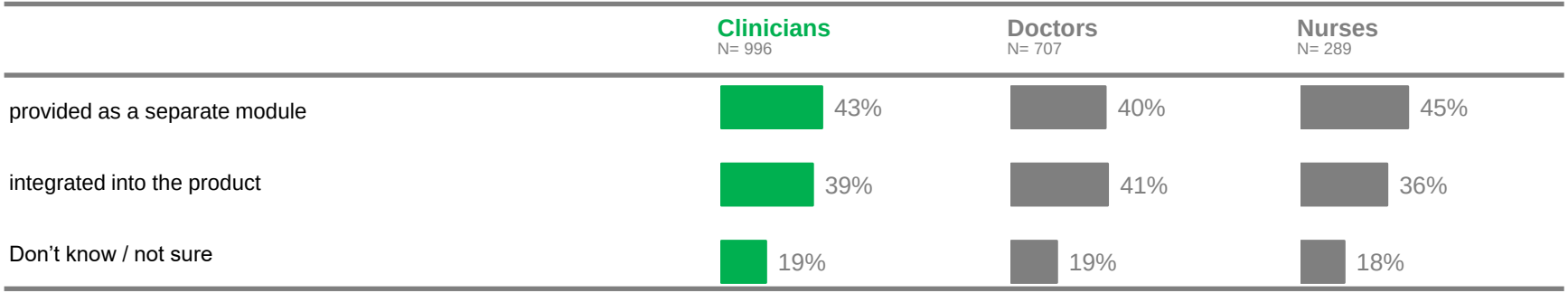
Questions: Which information areas about a tool's dependency on generative AI would most increase your comfort in using that tool? Select: up to three
Base: n= 1007

Clinicians in lower-middle-income countries would be most comfortable using a tool dependent on generative AI if privacy of user inputs is respected, while accountability and governance most increase comfort for clinicians from high income countries (2/2)

2/2	Clinicians N= 1007	High Income N= 529	Upper-Middle-Income N= 350	Lower-Middle-Income N= 109
That privacy is respected on outputs generated by the model	29%	25%	31% HI	34% HI
That actions have been taken to prevent unfair bias	27%	27%	28%	24%
That the way the solution works can be, and is, explained	24%	22%	29% HI LM	20%
Don't know / not sure	5%	6% UM	2%	8%
None of the above	2%	2%	1%	1%

Questions: Which information areas about a tool's dependency on generative AI would most increase your comfort in using that tool? Select: up to three
Base: n= 1007

There are mixed views whether AI functionality should be integrated in a product or offered as a separate module



Questions: Would you prefer any generative AI functionality included in a product you use already to be…?

Select: only one

Base: n= 996

Clinicians

Back to home

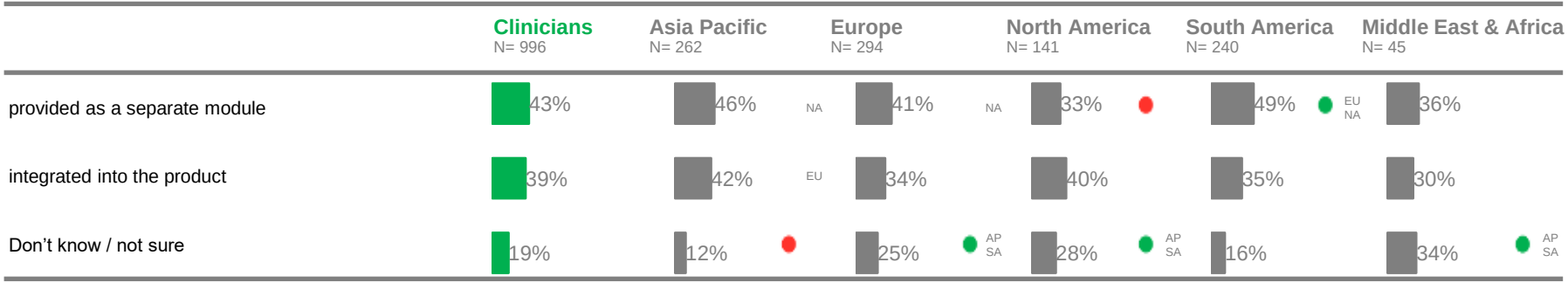
Significantly higher/ lower than…

Significantly higher than…

Global

Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Mixed views about whether generative AI should be integrated into products or provided as separate modules. MEA show highest uncertainty



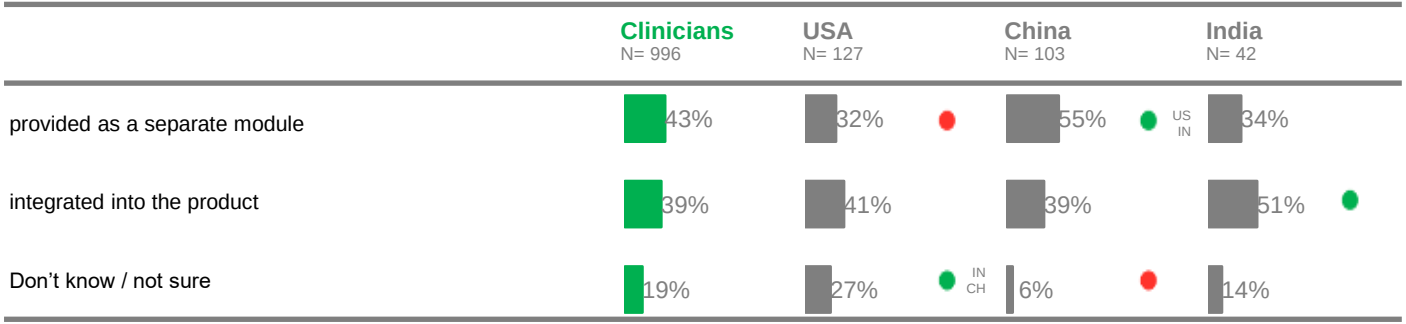
Questions: Would you prefer any generative AI functionality included in a product you use already to be…?
Select: only one
Base: n= 996

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Mixed views about whether generative AI should be integrated into products or provided as separate modules. More clinicians in China think it should be separate



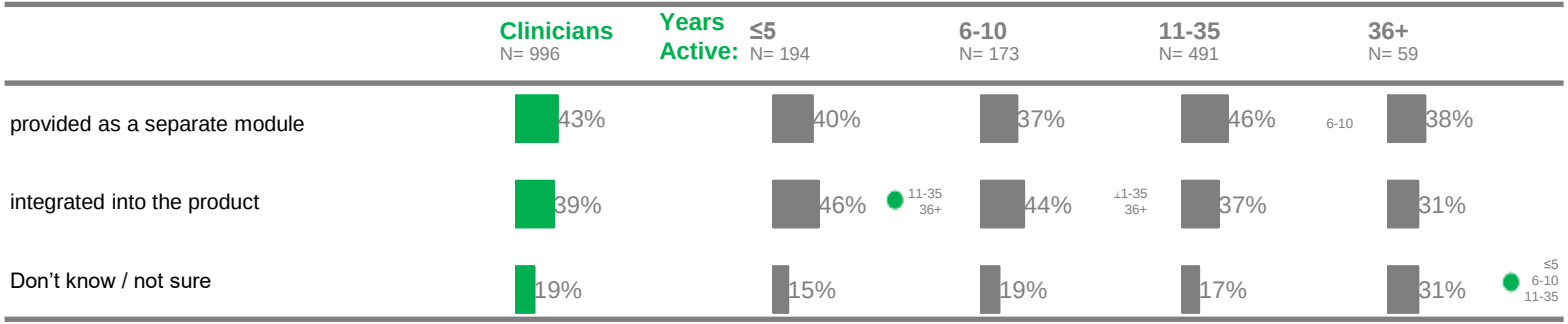
Questions: Would you prefer any generative AI functionality included in a product you use already to be…?
Select: only one
Base: n= 996

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Mixed views about whether generative AI should be integrated into products or provided as separate modules. Little difference by years active



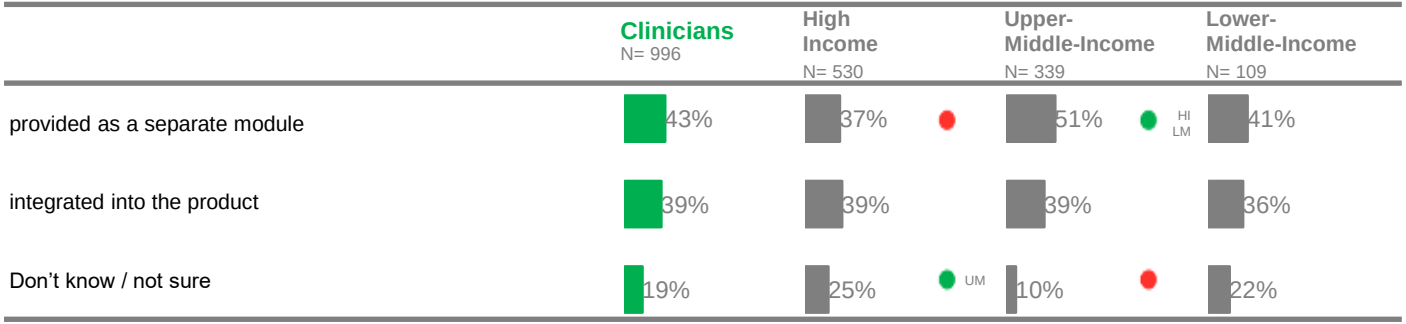
Questions: Would you prefer any generative AI functionality included in a product you use already to be…?
Select: only one
Base: n= 996

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Mixed views about whether generative AI should be integrated into products or provided as separate modules. Upper-middle-income countries have a preference for a separate module



Questions: Would you prefer any generative AI functionality included in a product you use already to be…?
Select: only one
Base: n= 996

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

4. Areas That Would Benefit From AI

Theme 4

Areas That Would Benefit From AI (General)

Thinking about the general areas of activity you need to complete, how much benefit, if any, do you believe the assistance of AI would bring? Only shown by overall

Slide 122

Back to home

Clinicians believe AI would be benefit in various activity areas including using scientific content, teaching, clinical practice and funding related activities

% No Benefit/At least some benefit	Clinicians N= 964
Using scientific content (e.g. keeping up-to-date)	3% 97%
Teaching/Lecturing activities	3% 97%
Clinical activities (e.g. clinical diagnoses, patient summaries)	5% 95%
Funding related activities	10% 90%

Clinicians

Questions: Thinking about the general areas of activity you need to complete, how much benefit, if any, do you believe the assistance of AI would bring?
Scale: A lot of benefit, some benefit, no benefit, don't know/not applicable (bottom box and top two boxes, excl. don't know)
Base: n= 964

Back to home

5. Likelihood To Use an AI Assistant

Theme 5

Likelihood To Use an AI Assistant

If you had a reliable and secure AI assistant to help you… [general activity area]
asked to those who see AI benefit to these areas

how likely would you be to use it to…
All only available by region & key market

complete research related activities	review prior studies	Slide 125
completing clinical activities	assess symptoms	Slide 125

Back to home

Likelihood to use a reliable and secure AI assistant, among those who believe AI can bring benefit to their work, is high

ELSEVIER

% Unlikely/Likely	Clinicians N= 156 - 680
review prior studies, identify gaps in knowledge and generate a new research hypothesis for testing	3% 97%
assess symptoms and identify possibility of a disease/condition (e.g. provides confidence levels for diagnosis and recommends any confirmatory tests	6% 94%

Clinicians

Back to home

Questions: If you had a reliable and secure AI assistant to help you [general activity area], how likely would you be to use it to…
Scale: Very Likely, likely, somewhat likely, unlikely, not at all likely, don't know, not applicable (bottom 2 box and top 3 box, excl. don't know)
Base: n= 156 - 680

Likelihood to use a reliable and secure AI assistant, among those who believe AI can bring benefit to their work, is high for APAC

% Unlikely/Likely	Clinicians N= 156 - 680	Asia Pacific N= 68 - 173	Europe N= 32 - 194	North America N= 22 - 83	South America N= 25 - 194	Middle East & Africa N= 7 - 27
review prior studies, identify gaps in knowledge and generate a new research hypothesis for testing	3% 97%	1% 99%	5% 95%			
assess symptoms and identify possibility of a disease/condition (e.g. provides confidence levels for diagnosis and recommends any confirmatory tests)	6% 94%	4% 96%	8% 92%	6% 94%	6% 94%	

Clinicians

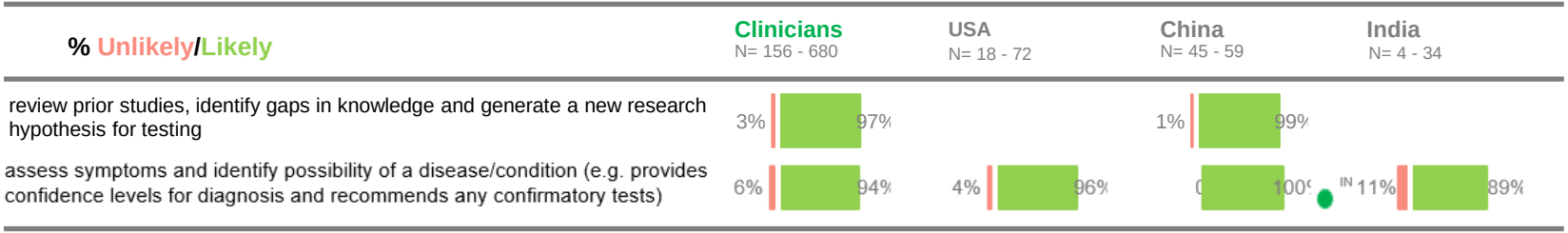
Back to home

Significantly higher/ lower than… Global

Significantly higher than… Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Questions: If you had a reliable and secure AI assistant to help you complete research related activities, how likely would you be to use it to…
Scale: Very Likely, likely, somewhat likely, unlikely, not at all likely, don't know, not applicable (bottom 2 box and top 3 box, excl. don't know)
Base: n= 156 - 680

Likelihood to use a reliable and secure AI assistant, among those who believe AI can bring benefit to their work, is high for China



Questions: If you had a reliable and secure AI assistant to help you complete research related activities, how likely would you be to use it to…

Clinicians

Back to home

Significantly higher/ lower than… Global

Significantly higher than… Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Base: n= 156 - 680

6. AI and Elsevier

Theme 6

AI & Elsevier

Thinking about the use of generative AI in your area of work and the role of Elsevier, how much do you agree or disagree with the following?

Slide 130

Back to home

Around three quarters of clinicians (and ~80% of doctors) believe Elsevier is well positioned to develop AI tools and would trust the tools

% Disagree/Agree	Clinicians N= 912	Doctors N= 648	Nurses N= 264
Elsevier is well positioned to develop generative AI tools	2% 77%	3% 80%	NU 1% 74%
I would trust tools developed by Elsevier that utilize generative AI	2% 74%	2% 79%	NU 2% 69%

Questions: Thinking about the use of generative AI in your area of work and the role of Elsevier, how much do you agree or disagree with the following:
Scale: Strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, strongly disagree, don't know/not applicable (bottom 2 box and top 2 box, excl. don't know)
Base: n= 912

Clinicians

Back to home

Significantly higher/ lower than…
Significantly higher than…
Global
Gender/Generation (indicated by first letter e.g. M= Men)

Elsevier is considered to be well placed and trusted to develop AI tools, notably by South American clinicians

% Disagree/Agree	Clinicians N= 912	Asia Pacific N= 239	Europe N= 257	North America N= 122	South America N= 238	Middle East & Africa N= 42
Elsevier is well positioned to develop generative AI tools	2% 77%	1% 75%	2% 76%	7% 70%	3% 85% AP EU NA	2% 85% NA
I would trust tools developed by Elsevier that utilize generative AI	2% 74%	0% 69%	3% 79% AP NA	10% 66%	4% 78%	AP NA 3% 81% NA

Questions: Thinking about the use of generative AI in your area of work and the role of Elsevier, how much do you agree or disagree with the following:
Scale: Strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, strongly disagree, don't know/not applicable (bottom 2 box and top 2 box, excl. don't know)
Base: n= 912

Clinicians

Significantly higher/ lower than… Global

Significantly higher than… Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)

Back to home

Indian clinicians are most likely to trust and think Elsevier is well positioned to develop AI tools vs. China and USA

% Disagree/Agree	Clinicians N= 912	USA N= 110	China N= 98	India N= 38
Elsevier is well positioned to develop generative AI tools	2% 77%	8% 69%	2% 72%	88% CH US
I would trust tools developed by Elsevier that utilize generative AI	2% 74%	11% 63%	66%	90% CH US

Clinicians

Questions: Thinking about the use of generative AI in your area of work and the role of Elsevier, how much do you agree or disagree with the following:
Scale: Strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, strongly disagree, don't know/not applicable (bottom 2 box and top 2 box, excl. don't know)
Base: n= 912

Significantly higher/ lower than… *Global*
Significantly higher than… *Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)*

Back to home

Around three quarters of clinicians believe Elsevier is well positioned to develop AI tools and would trust the tools

% Disagree/Agree	Total N= 912	Years Active: ≤5 N= 187	6-10 N= 152	11-35 N= 454	36+ N= 53
Elsevier is well positioned to develop generative AI tools	2% 77%	2% 86%	3% 77%	2% 75%	0 83%
I would trust tools developed by Elsevier that utilize generative AI	2% 74%	2% 83%	4% 73%	2% 70%	0 82%

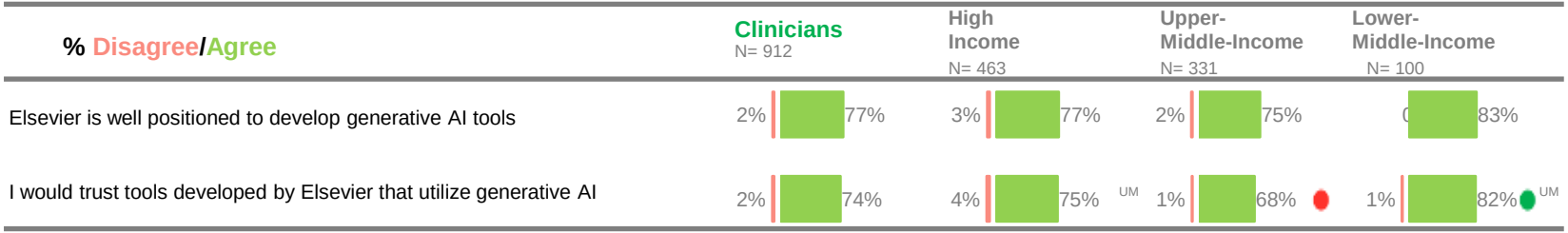
Questions: Thinking about the use of generative AI in your area of work and the role of Elsevier, how much do you agree or disagree with the following:
Scale: Strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, strongly disagree, don't know/not applicable (bottom 2 box and top 2 box, excl. don't know)
Base: n= 912

Clinicians

Back to home

Significantly higher/ lower than… *Global*
Significantly higher than… *Role/ Region/ Country (indicated by first two letters e.g. AP = APAC)*

Lower-middle-income market clinicians are in highest agreement that Elsevier is well positioned and trusted to develop AI tools



Questions: Thinking about the use of generative AI in your area of work and the role of Elsevier, how much do you agree or disagree with the following:
Scale: Strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, strongly disagree, don't know/not applicable (bottom 2 box and top 2 box, excl. don't know)
Base: n= 912

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