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Trust Assessment of Smart Health Devices

Final presentation

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Plan

Introduction

Trust Characteristics

Architecture of Health Monitoring Systems

Trust Networks

Summing up

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Summing up

Introduction

- Smart health systems are evolving rapidly
- Impact lives in different ways
  - Saving life
  - Improving life or performance
  - Data monitoring
- Can these devices be trusted?

Introduction - The Pacemaker

- Bradycardia: heart rate too slow
- Pacemaker provides electrical impulse

  → keep heart rate from dropping
- IoT pacemaker: wireless connection
  - exchange information with hospital and doctors
  - can be remotely monitored
- Replace regular visits to the doctor's office for a check with the remote monitoring?
- How far can we **trust this device** to function properly at all times and how can we **assess trust** in them?

Introduction - Problem

- Trust is a complex subject
- Many works propose different mathematical methods
- Focus on TNA-SL (Trust Network Analysis using Subjective Logic)
  - method for quantifying trust
  - covered in different works in literature
  - can be applied on IoT and smart health networks

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Trust

Definition: “a state involving confident positive expectations about another’s motives with respect to oneself in situations entailing risk”
(D Susan and John G Holmes, 1991)

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- Trust relationship involves two or more entities:
  a trustor and a trustee
- Trust involves risk
- Trustor believes in the trustee’s honesty and benevolence

Trust - Characteristics

- Directed: oriented relationship
- Subjective
- Context-dependant
- Measurable
- Influenced by past experience
- Dynamic: may change over time

Trust Modeling and Trust Management

Trust model

- Evaluates, sets up trust relationships amongst entities
- Helps in trust measurement
- Many works propose different models for different goals

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Trust management

- *Trust establishment*: trust relationship between trustor and trustee
- *Trust monitoring*: performance of trustee, collect evidence for
- *Trust assessment*: evaluate trustworthiness of trustee
- *Trust control and re-establishment*: trust relationship in case broken before

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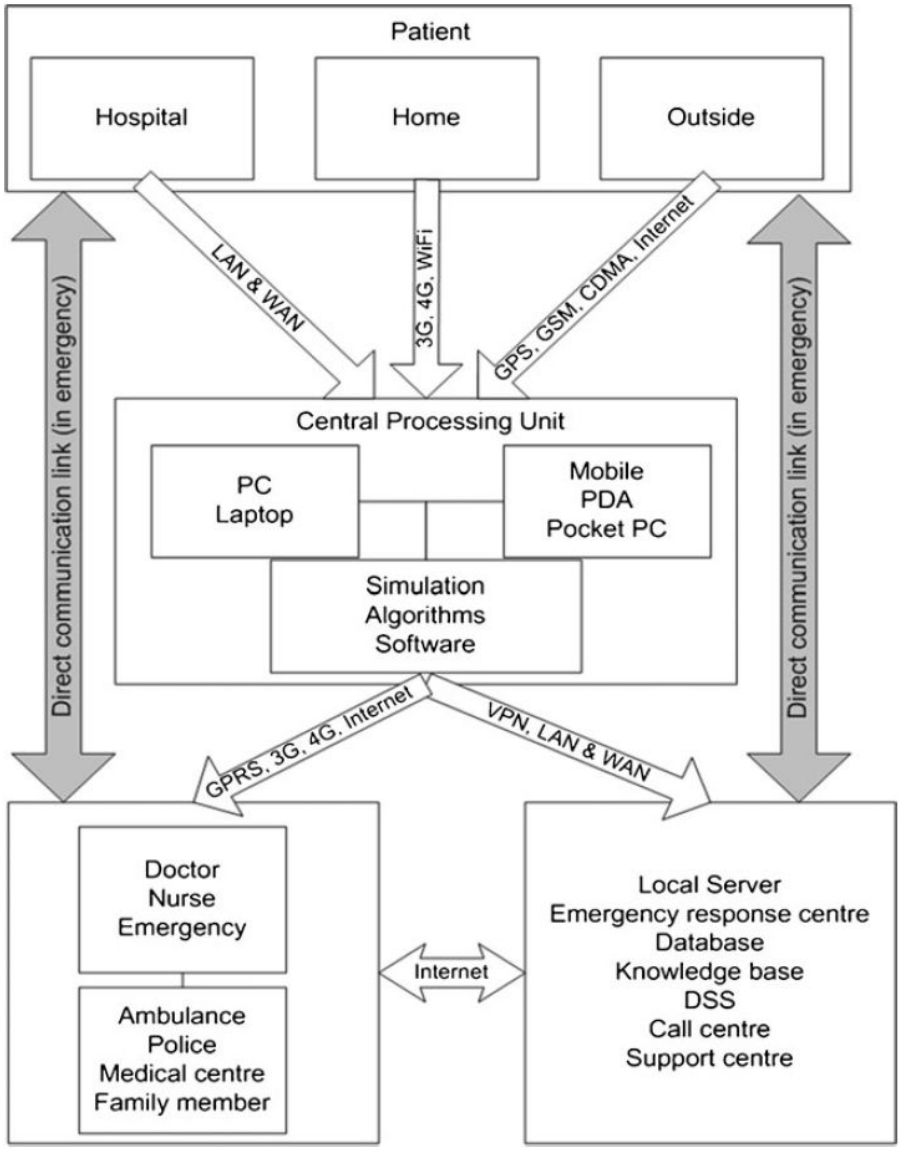
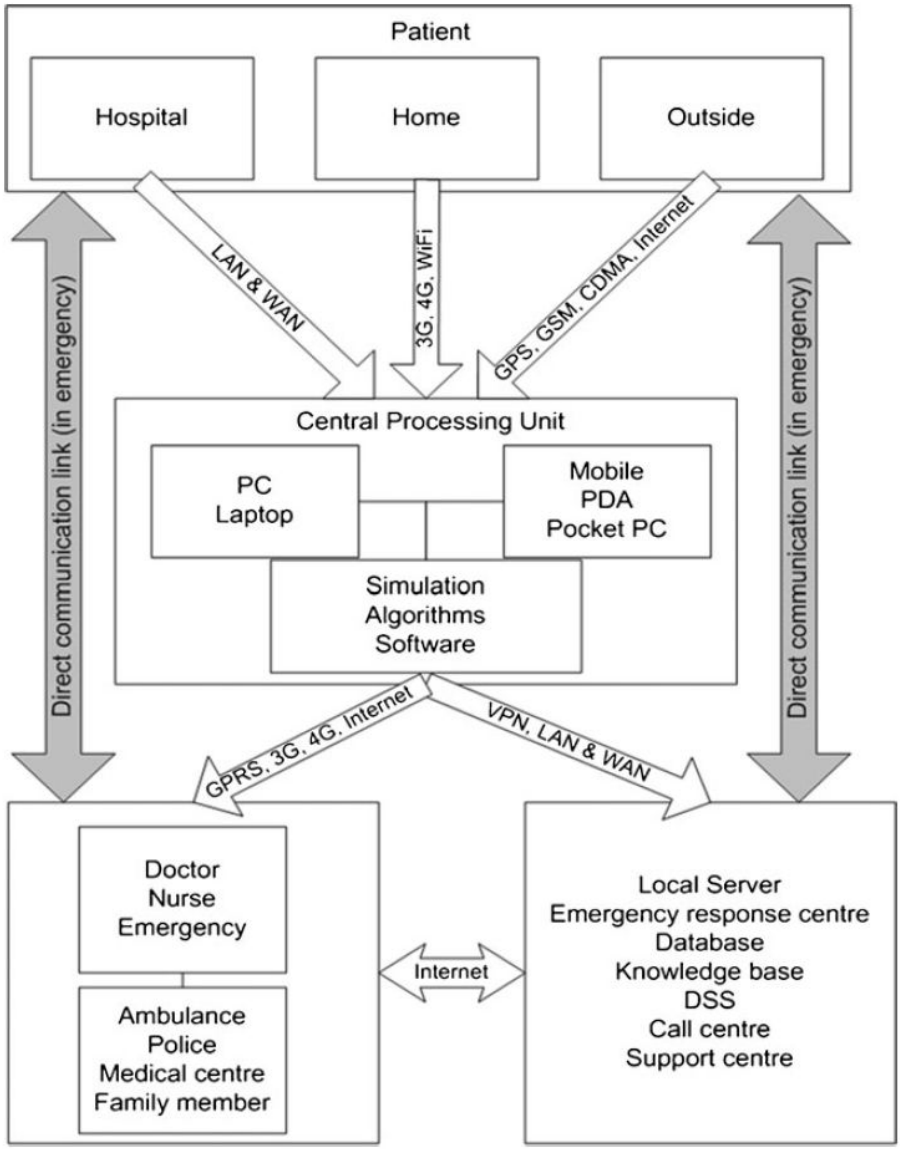
Architecture and risks of Health Monitoring Systems



- Patient Unit
- Central Processing Unit
- Doctor and Emergency Units

Architecture and risks of Health Monitoring Systems



- Patient Unit
- Central Processing Unit
- Doctor and Emergency Units

Risks

- System shutdown
- Software error
- Unreliable communication
- Personal

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Trust Networks (TNA-SL)

Summing up

Trust Networks

- Many works propose different trust models
- TNA-SL (trust network analysis using subjective logic)
  - Transitive trust relationships between people, organizations and possibly software agents.

TNA-SL - Subjective logic, opinion

$$\omega_x^A = (b, d, u, a)$$

- **A** is the *trustor* of the *statement* **x**
- **b** represents *belief*
- **d** represents *disbelief*
- **u** represents *uncertainty*, where $b, d, u \in [0, 1]$ and $b + d + u = 1$

TNA-SL - Subjective logic, opinion

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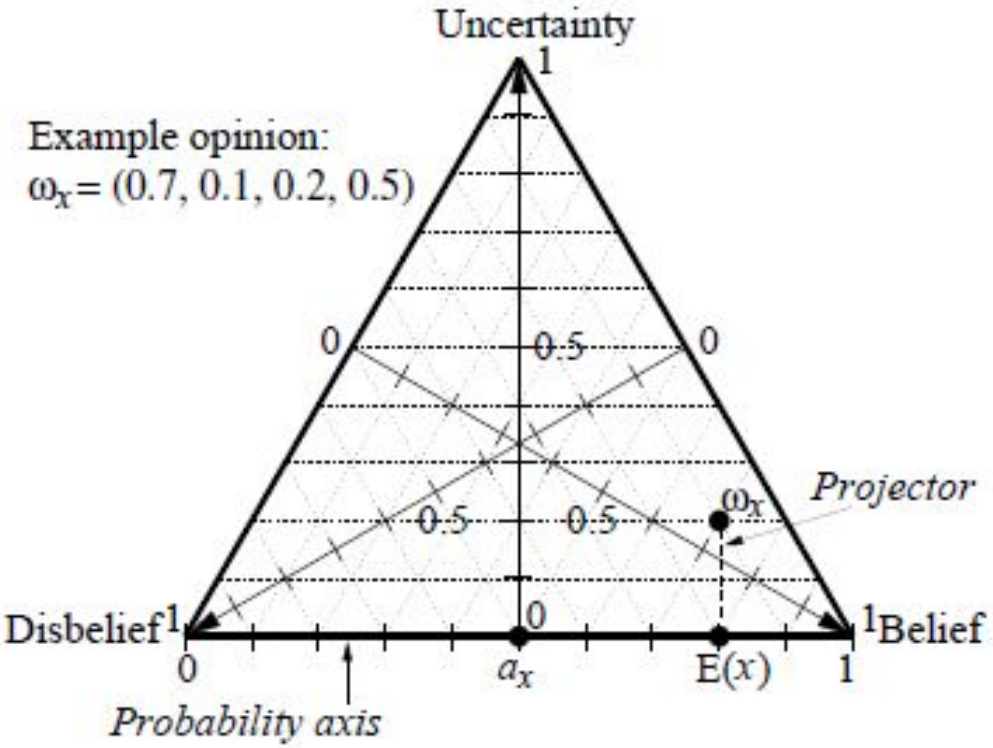
- **u** represents *uncertainty*, where $b, d, u \in [0, 1]$ and $b + d + u = 1$
- **a** ∈ [0, 1] is the *base rate*
  - represents the *initial trust* put in any member of the community before any positive or negative experience was observed.

TNA-SL - Probability expectation



$$E(\omega_x^A) = b + au$$

TNA-SL - Subjective logic

Two opinions $\boldsymbol{\omega}_x$ and $\boldsymbol{\omega}_y$ are ordered following rules by priority.
The greatest opinion is the opinion with:

- the greatest probability expectation
- the least uncertainty
- the least base rate

TNA-SL - PDF

Probability density function (PDF) denoted as (α,β):

$$\alpha = r + 2a, \beta = s + 2(1 - a)$$

- **r** represents a number of *positive* past observations
- **s** represents a number of *negative* past observations,

Can be expressed as:

(Audun Jøsang, Simon Pope, and David McAnally, 2006) & (Morris H DeGroot and Mark J Schervish, 2012)

$$\begin{cases} b_x = r/(r+s+2) \\ d_x = s/(r+s+2) \\ u_x = 2/(r+s+2) \\ a_x = \text{base rate of } x \end{cases} \iff \begin{cases} r = 2b_x/u_x \\ s = 2d_x/u_x \\ 1 = b_x + d_x + u_x \\ a = \text{base rate of } x \end{cases}$$

TNA-SL - Assessing trust

Reputation score of *Z* at time *t*:

$$R^t(Z) = \frac{r + 2a}{r + s + 2} \qquad \text{with } 0 \leq R^t(Z) \leq 1$$

- probability indicating the reliability of an agent *Z* in the future

TNA-SL - Assessing trust

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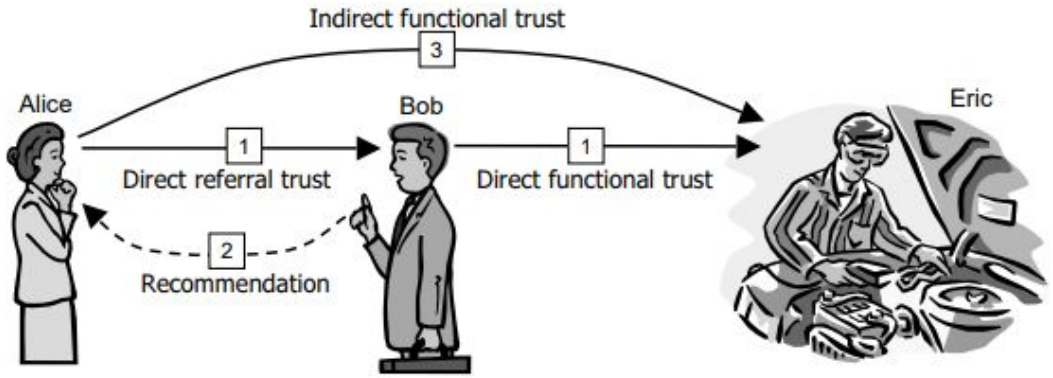
- probability indicating the reliability of an agent *Z* in the future
- if **a** is high, that means the initial trust in the agent is relatively high, a single negative rating **s** will have more impact on the reputation score than a single positive rating **r**.
- if **a** is low, a single positive rating will have more impact than a single negative rating.
- “it takes many good experiences to balance out one bad experience”

TNA-SL - Applying to smart health

- Consists of transitive trust relationships betw.
  - people
  - organizations
  - software agents
- IoT perspective: entities represent components communicating with each other
- Applicable on different types of entities
  → usable for different types of network

Trust acts on different levels or hierarchies!

TNA-SL - Applying to smart health

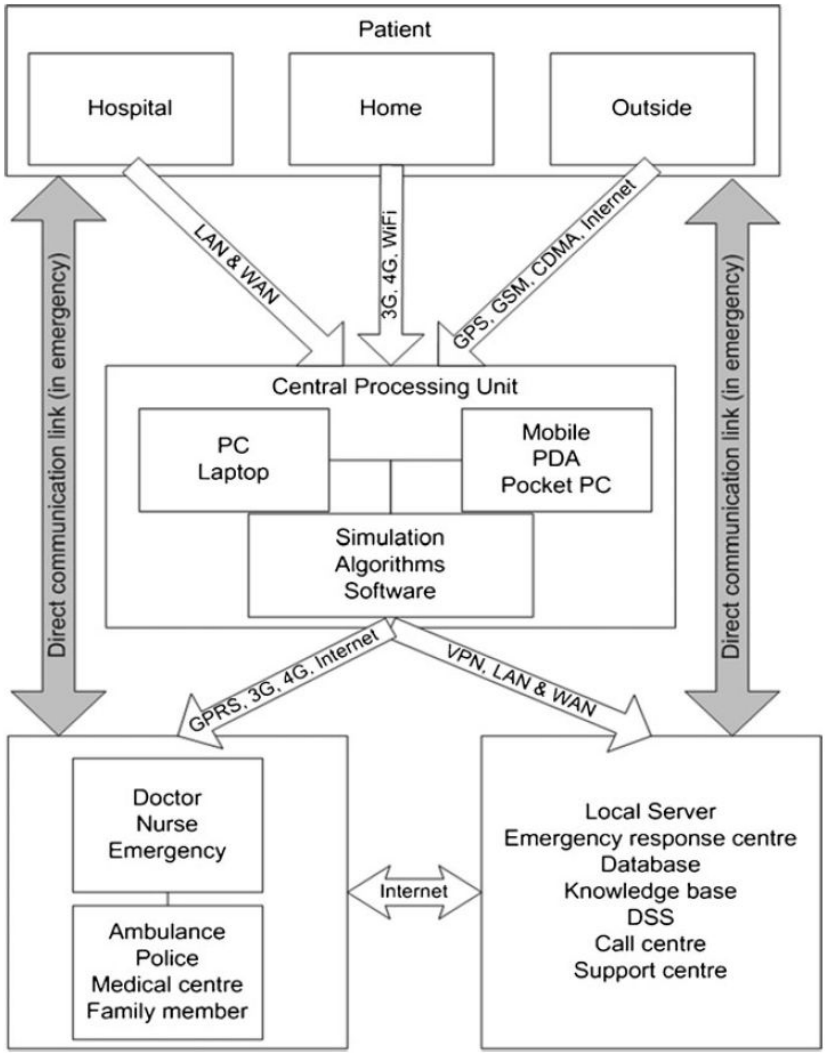


- Human trust
  - network of humans
  - some have direct functional trust towards a smart health device

TNA-SL - Applying to smart health

Component-based network (see Fig.)

- choose preferred unit for best result
- administrator can interpret which units need some improving

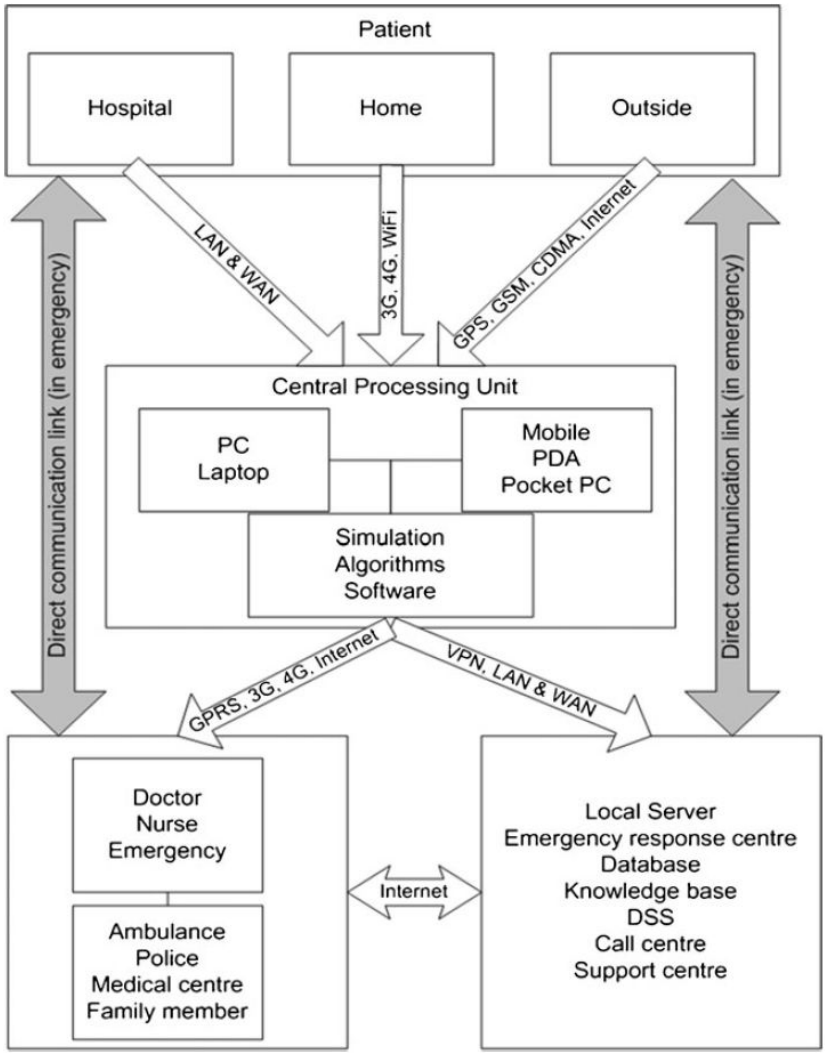


TNA-SL - Applying to smart health

Component-based network (see Fig.)

- choose preferred unit for best result
- administrator can interpret which units need some improving

TNA-SL depends on the number of known relationships (Geir M Køien, 2011)
→ network with more entities has better result than a smaller one
→ For small networks, this method is likely not effective



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- Introduced smart health with use cases
- Characteristics of trust
- Architecture of health monitoring
- TNA-SL
  - Human trust, component-based networks, …
  - Requires many entities for accurate result

Summing up - Further research

- Review different trust assessment models
- Health IoT needs to be trustable on each layer of the architecture
- Health monitoring architecture: go over each channel and unit and analyze reliability
- Research psychological difference on trust between using IoT and smart health IoT

Thank you!