

## **REPORT 4**

### **Foundations of Information Systems - Speculative Design**

**[ANONYMIZED REPORT - FULL IPSIS LITTERIS TRANSLATION]**

#### **Abstract**

The growing population and increased life expectancy have led to a higher demand for healthcare services, surpassing the supply of healthcare professionals. This situation results in dissatisfaction among patients and healthcare professionals due to inadequate digitalization of health services and the burdensome documentation process, which can lead to professional burnout. This study investigates the application of real-time automatic speech recognition (ASR) systems for medical consultations, using advanced Natural Language Processing (NLP) and Artificial Neural Networks (ANN) technologies. A speculative design approach is employed to imagine future scenarios in which virtual health assistants improve service accessibility and quality. A hybrid telemedicine platform that combines AI efficiency with human expertise is proposed to mitigate potential negative implications. This study highlights the importance of ethical, inclusive, and effective implementation of ASR technologies in healthcare, suggesting further research in real-world contexts and stakeholder engagement to refine the proposed solutions.

## **1. Introduction**

### **1.1 Identification of the Problem**

As a result of factors such as population growth and increased life expectancy—which consequently lead to an observed increase in comorbidities [Malta, 2021]—but without a proportional increase in healthcare professionals to meet this greater demand for health services, healthcare systems are unable to meet the population's needs, either in quantity or in quality.

A comparison of results from the National Health Survey (PNS) conducted in 2013 and 2019 revealed a 22% increase in demand for healthcare services in the 15 days prior to the survey,

accompanied by an 11% reduction in access to services, a scenario repeated in most [Omitted for blind review] states and capitals [Silva et al., 2021].

Although the use of medical scribes enables physicians to see more patients per hour, dissatisfaction remains among patients, who consider health services to be poorly digitized and express concern about the quality of physician interaction [Fuerst, 2017].

[Omitted for blind review] guarantees universal and free access to healthcare through the Federal Constitution and the [Omitted for blind review]. However, the digitalization of healthcare has produced mixed effects. While technology optimizes certain processes, it may also contribute to professional burnout, particularly due to the use of electronic medical records [Hodgson & Coiera, 2016].

Patients still prefer face-to-face communication, valuing direct human interaction. Human speech plays a fundamental role in expressing thoughts, ideas, and emotions. Therefore, it is hypothesized that a system capable of recording, transcribing, and automatically populating medical records during consultations could improve both professional working conditions and patient satisfaction.

## **1.2 Challenges**

Automatic Speech Recognition (ASR) faces several challenges, including:

- Scarcity of annotated data;
- Linguistic variability due to regional accents and slang;
- Spontaneous speech phenomena, such as hesitations and pauses;
- Phonetic complexity;
- High costs associated with high-quality speech data collection.

In healthcare, additional challenges include interoperability between systems, ethical issues related to patient privacy, and accessibility across different socioeconomic contexts.

### **1.3 Risks**

The use of ASR technology in healthcare involves risks related to bias. If training datasets are not sufficiently diverse—considering age, gender, regional accents, and speech impairments—system performance may be uneven, leading to discriminatory outcomes.

### **1.4 Research Proposal**

Due to the complexity involved in integrating multiple systems, this work focuses specifically on automatic speech recognition and transcription in Brazilian Portuguese, rather than on full system integration.

### **1.5 Structure of the Work**

This work is structured as follows:

- Presentation of reference books and articles;
- Definition of concepts necessary to understand the technology;
- Overview of the state of the art in ASR;
- Introduction to speculative design;
- Mapping of the current scenario (*Where are we?*);
- Exploration of possible futures (*Where are we going?*);
- Projection of a desirable future (*Where do we want to go?*);
- Conclusion.

## **2. Presentation of the Main References**

### **2.1 Book**

Selected chapters from *Natural Language Processing: Concepts, Techniques, and Applications in Portuguese* were used, addressing core NLP concepts, speech processing, resources, and healthcare applications.

## **2.2 Articles**

Nine articles were selected covering automatic speech recognition, healthcare speech technologies, and artificial intelligence applications in medicine. Summaries were translated using the DeepL translation tool.

## **3. Automatic Speech Recognition**

### **3.1 Natural Language Processing**

Natural Language Processing (NLP) is the field responsible for computational processing of human language in written, spoken, or signed form. Speech processing differs from text processing due to its acoustic, temporal, and contextual characteristics.

### **3.2 Concept of Automatic Speech Recognition**

ASR systems convert spoken language into text by capturing audio signals, extracting features, applying acoustic and phonetic models, and using linguistic models to generate textual output.

### **3.3 Artificial Neural Networks**

Artificial Neural Networks (ANNs) are currently the most effective approach for ASR tasks. Architectures include DNNs, CNNs, RNNs, LSTMs, and Transformers.

### **3.4 State of the Art**

There is no single consolidated ASR architecture, but deep neural network approaches dominate. Two notable open-source models are:

- **wav2vec 2.0**, based on convolutional neural networks;
- **Whisper**, based on Transformer architectures and trained on multilingual datasets.

## **4. Speculative Design**

Speculative design, introduced by Dunne and Raby, creates artifacts to reflect on possible futures. It does not aim to predict the future, but to provoke discussion, reduce uncertainty, and explore preferable futures.

## **5. Mapping the Current Scenario**

### ***Where Are We?***

During medical consultations, professionals must manually fill out clinical documentation, either digitally or on paper. This process interrupts communication, generating silences and disrupting patients' flow of thought.

Identified actors include:

1. Patients
2. Healthcare professionals
3. ASR technologies
4. Data
5. Healthcare institutions
6. Regulation and ethics
7. Society

Trend analysis (e.g., Google Trends) indicates growing interest in speech transcription technologies, particularly after the rise of generative AI.

## **6. Exploring Possible Futures**

### ***Where Are We Going?***

Using speculative tools, future scenarios for 2030 were envisioned. These include widespread ASR adoption, virtual health assistants capable of real-time transcription and emotional analysis, and ethical dilemmas related to privacy, consent, and bias.

## 7. Projecting a Desirable Future

### *Where Do We Want to Go?*

A hybrid telemedicine platform is proposed in which:

- AI performs transcription and preliminary analysis;
- Human professionals validate diagnoses;
- Complex cases are escalated to direct human care;
- Continuous professional training is emphasized.

This approach seeks to balance efficiency and empathy.

## 8. Conclusion

This work explored the application of real-time automatic speech transcription for healthcare consultations, integrating NLP, ANN technologies, and speculative design. While promising, ethical, cultural, and institutional challenges remain. Future work should involve real-world testing and broader stakeholder participation.

Future work should involve field studies in simulated and real clinical environments, broader stakeholder engagement, and regional evaluations to ensure ethical, inclusive, and effective implementation.

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