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Mapping Sentiment, Readiness,
and the Need for AI Governance

Healthcare AI Sentiment in Public Health

A 2026 REPORT

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Executive Summary

This report captures sentiment from county and state public health leaders. Respondents represent a cross-section of executive decision-makers, program leaders, policy stakeholders, and IT and data professionals responsible for guiding AI adoption while safeguarding compliance, ethics, and public trust.

The results show strong interest in AI but limited structural preparedness.

Nearly 58% rated overall AI readiness as low, and over 70% reported low workforce AI literacy. Governance clarity remains weak, with 64% reporting low clarity, while risk concern is extremely high, with more than 82% expressing strong concern about unmanaged AI use. More than half also indicated their data infrastructure is not yet AI-ready.

At the same time, momentum is building. Nearly half identified AI governance as a top priority for the next 12 months.

The takeaway is clear. Public health agencies are not questioning whether to adopt AI. They are seeking the guardrails, literacy, and infrastructure required to do so responsibly and at scale.

Signals from Analysts

"As we move beyond the question of whether AI belongs in healthcare, the new question is how to deploy it responsibly at scale, and most organizations are not there yet. AI will reshape this industry, and the organizations that recognize that are asking the right questions. But asking the right questions and being ready to act on the answers are two different things.
The real paradox is that leaders across the industry recognize that AI can solve problems we have been wrestling with for decades, yet trust is still missing leading to a reticence to adopt.
My advice? Get your house in order now. Build the governance, develop the literacy, shore up data foundations. When the moment arrives, readiness will be the only thing that separates the leaders from everyone else."

Benjamin Cassity,
Director of Research and Strategy, KLAS Research

KLAS RESEARCH

"Public health is entering the decisive phase of AI adoption: the question is no longer whether agencies will use AI, but whether they can industrialize trust as quickly as they deploy intelligence. The organizations that lead this next era will treat governance, data discipline, and workforce fluency not as compliance overhead, but as the operating system for scalable innovation. In the end, the real differentiator will not be the boldest pilot, but the ability to turn AI from experimentation into repeatable public value."

Douglas Brown, MHA
Founder, Black Book Research

BLACK BOOK RESEARCH

Objective

Mapping Sentiment, Readiness, and the Need for AI Governance

Our online survey sought to understand how county and state public health stakeholders perceive their organization's current position in the AI adoption journey, not just in terms of interest, but in terms of preparedness to use AI safely and consistently.

This matters because AI is already being used across public health, often informally, while policies, training, and data safeguards are still catching up. By mapping sentiment across seven dimensions (AI readiness, workforce literacy, governance maturity, infrastructure preparedness, risk awareness, and forward-looking priorities) on a five-point scale (1 = Very Low, 5 = Very High), the survey creates a baseline: where agencies feel confident, where they feel exposed, and where support is most urgently needed.

Rather than measuring technical capability alone, the poll captures organizational psychology, the gap between ambition and structure, curiosity and caution. The findings help leaders prioritize the right next steps: establishing governance guardrails, building literacy, strengthening data foundations, and choosing scalable use cases that protect public trust.

Autonomy with Guardrails: Enabling Responsible Innovation

A consistent theme in the supporting readings on adoption and change is that people do their best work when they have autonomy, clear ownership and discretion over how work gets done, paired with accountability.

In public health, AI can increase autonomy by giving teams faster access to insights, freeing time for higher-value community and program work.

Autonomy without guardrails becomes a risk

When staff are left to experiment with unvetted tools, autonomy turns into inconsistency, different teams making different calls on data handling, privacy, and the defensibility of AI-supported decisions.

Governance is what makes autonomy safe

It defines what tools are approved, what data can be used, how outputs should be validated, and who is accountable, so teams can move quickly without putting public trust at stake.

In other words, the goal is not to restrict innovation, it is to **enable responsible autonomy at scale**

With shared policies, training, and data foundations in place, agencies can empower teams to adopt AI confidently, make consistent decisions across programs, and defend their approach under audit, public records requests, and regulatory scrutiny.

Parallels from Our Public Health AI Governance Report

Our survey responses echo what we documented earlier in our public health AI governance report:

Adoption is moving faster than governance, and teams are trying to scale AI while policies, data readiness, and AI literacy are still catching up.

Across both, the message is consistent:

Trust and risk concerns (privacy, bias, compliance) aren't blockers, they're the triggers for putting the right guardrails in place.

This reinforces our core takeaway: to move from pilots to sustainable, everyday use, we need to pair momentum with clear governance, stronger foundations, and the kind of guardrails that actually enable autonomy at scale.

Personas

The respondents represent a cross-section of public health and organizational leadership across 35 professionals spanning 22 U.S. states and territories.

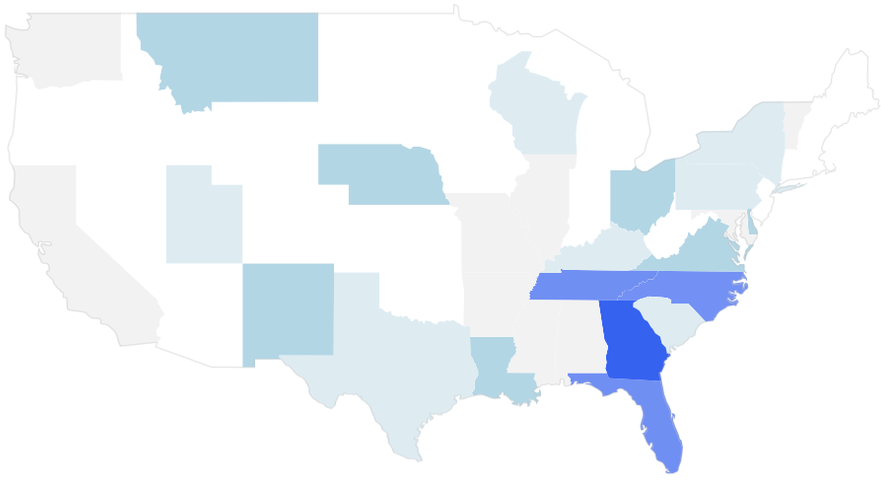
The group includes senior decision-makers such as Chief Medical Officers, Deputy Directors, Senior Directors, and Quality Improvement Directors, alongside epidemiologists, public health nurses, research scientists, physicians, program coordinators, and IT managers.

Geographically, representation was strongest in the Southeast, particularly Georgia, North Carolina, and Florida, with additional voices from the Northeast, Midwest, South, and West.

Collectively, this audience reflects organizations that are actively exploring AI but still building the internal frameworks needed for responsible, scalable implementation.

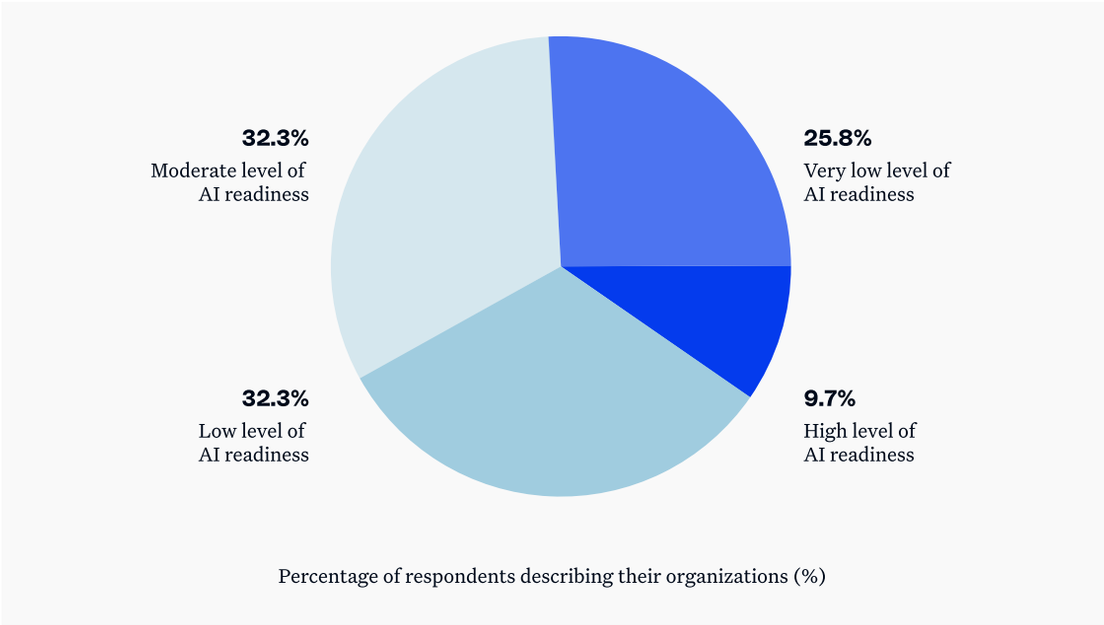
Where our respondents come from?

Shade intensity reflects the concentration of respondents, from highest (darkest) to lowest (lightest).



I. AI Readiness Remains Early-Stage

Survey respondents rated overall AI readiness in four levels



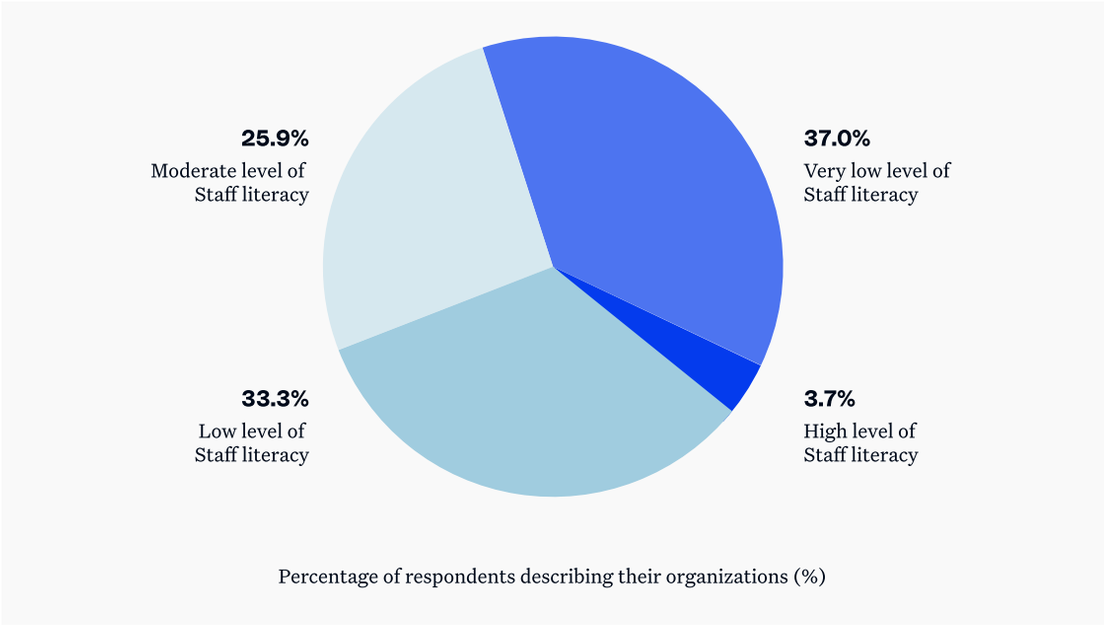
When asked to rate overall AI readiness, nearly 58% of respondents described their organizations as either “Low” or “Very Low.” An additional 32% rated readiness as moderate, while fewer than 10% described their organization as highly ready.

This distribution suggests that most organizations view themselves as being in early or transitional phases rather than in advanced implementation stages.

The sentiment here is not resistance, it is realism. Organizations recognize that readiness requires more than pilot projects; it requires systems, governance, literacy, and alignment.

II. AI Literacy is a Significant Capability Gap

Survey respondents rated staff's literacy to evaluate AI tools



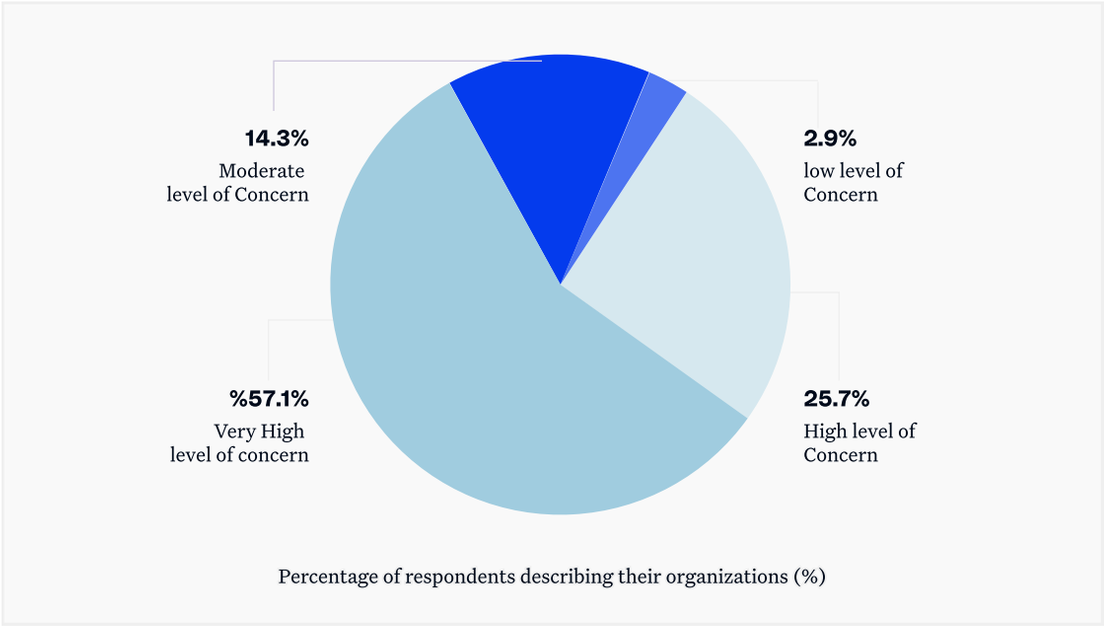
Workforce readiness emerged as one of the most pronounced weaknesses. More than 70% of respondents reported low or very low AI literacy within their organizations, and only a small fraction indicated high literacy levels.

This indicates that while leadership may be discussing AI strategy, staff across the organization may lack the foundational understanding necessary to evaluate tools responsibly.

Without improving literacy, organizations risk either over-adopting tools without scrutiny or under-utilizing them due to uncertainty.

III. Risk Awareness is Extremely High

Survey respondents expressed concern regarding ungoverned use of AI in public health.



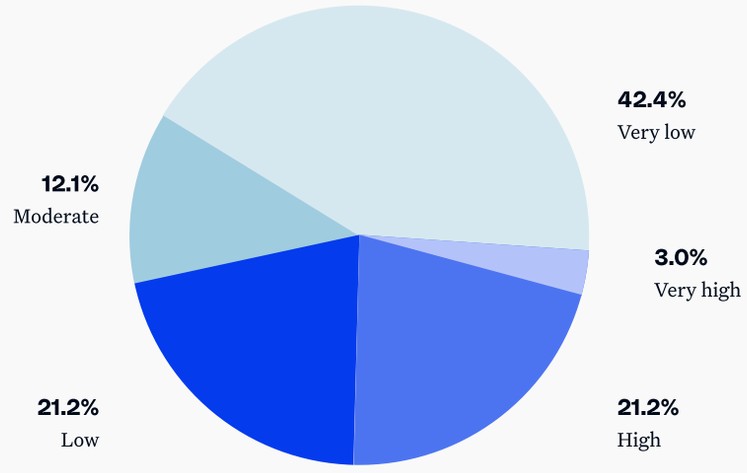
In contrast to readiness and literacy, concern about ungoverned AI use is strikingly elevated.

Over 82% of respondents reported high or very high concern regarding the risks of unmanaged AI use, with more than half selecting the highest possible rating.

This divergence is important. Organizations are not complacent. They are acutely aware of ethical, compliance, and reputational risks. The anxiety surrounding unstructured AI adoption appears to be a major driver of the demand for governance frameworks.

IV. Governance Policies are Underdeveloped

Survey respondents rated the clarity regarding policies governing AI use



Percentage of respondents describing their organizations (%)

Despite high concern, policy clarity remains limited. Approximately 64% of respondents reported low or very low clarity around AI governance policies within their organizations. Only a small minority indicated strong policy presence.

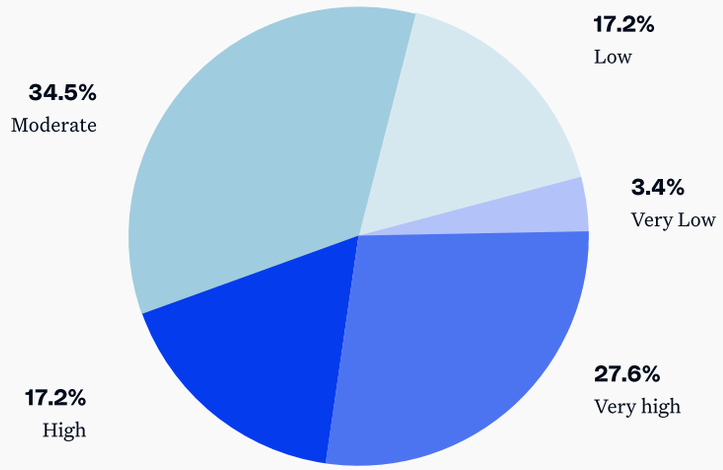
This suggests that many organizations are experimenting with AI tools in the absence of formalized guardrails. The infrastructure for oversight is lagging behind awareness of risk, creating vulnerability and uncertainty.

Governance Policies Are Underdeveloped

64%
Low or very low clarity around AI governance policies

45%
AI governance as a high or very high priority

Survey respondents rated how important is it for their organisation to establish AI governance in the next 12 months.



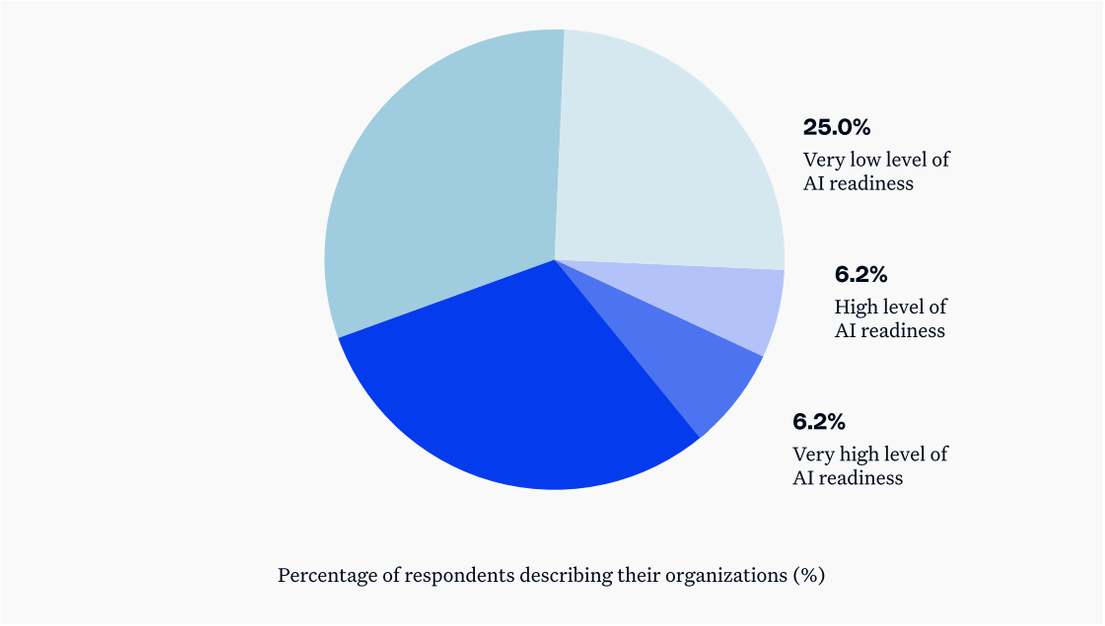
Percentage of respondents describing their organizations (%)

Encouragingly, nearly 45% of respondents rated AI governance as a high or very high priority for the next 12 months, with an additional 34% rating it as moderately important. This signals that leadership momentum is building.

Organizations may not yet have strong frameworks in place, but governance is no longer a peripheral topic. It is moving toward the center of strategic planning.

V. Data Infrastructure is Not Yet AI-Ready

Survey respondents rated if their data Infrastructure is ready to support responsible AI use.



More than half of respondents indicated that their data infrastructure is not sufficiently prepared to support responsible AI use. Only about 12% rated their infrastructure as highly ready.

This finding reinforces a critical insight:

responsible AI is not only about policy – it is also about systems. Without interoperable, clean, and well-managed data environments, even well-intentioned AI initiatives can struggle to scale or remain compliant.

Conclusion

The polling results reveal a consistent narrative across all dimensions:

Organizations are concerned, cautious, and increasingly motivated, but not yet fully prepared.

There is a clear imbalance between awareness and structure. Risk perception is high. Governance frameworks are weak. Literacy is limited. Infrastructure is underdeveloped. Yet at the same time, governance is rising in strategic importance, and the desire for structured support is overwhelming.

This represents a pivotal moment. Organizations are not asking whether they should adopt AI - they are asking how to do so responsibly.

The opportunity lies in helping organizations bridge that gap, transforming caution into capability and concern into structured implementation.

The findings suggest that the next phase of AI adoption will not be driven by experimentation alone.

AI adoption would be driven by

01 governance maturity

02 literacy development

03 infrastructure alignment

Methodology

This report is based on an online survey of 35 public health professionals across county and state health departments in the United States, conducted in early 2026.

Seven questions were designed to capture organizational sentiment across key dimensions of AI adoption including readiness, workforce literacy, governance maturity, risk awareness, and data infrastructure, each rated on a five-point scale (1 = Very Low to 5 = Very High). Respondents represented a range of roles and 22 U.S. states and territories. All responses were anonymous. Results reflect directional sentiment from a convenience sample and should be interpreted as indicative of sector-wide attitudes rather than statistically generalizable findings.



About Innovaccer

Innovaccer activates the flow of healthcare data, empowering providers, payers, and government organizations to deliver intelligent and connected experiences that advance health outcomes. The Healthcare Intelligence Cloud equips every stakeholder in the patient journey to turn fragmented data into proactive, coordinated actions that elevate the quality of care and drive operational performance. Leading healthcare organizations like CommonSpirit Health, Atlantic Health, and Banner Health trust Innovaccer to integrate a system of intelligence into their existing infrastructure– extending the human touch in healthcare.

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