



AAG

Australian
Association of
Gerontology

Artificial Intelligence (AI) and ageing research: Ethical considerations and implications



2025



To improve the experience
of ageing through
CONNECTING
RESEARCH, POLICY
and **PRACTICE**

Acknowledgement of Country

AAG acknowledges Traditional Owners of Country throughout Australia and recognises the continuing connection to lands, waters and communities. We pay our respect to Aboriginal and Torres Strait Islander cultures, to Elders past and present, and to all Aboriginal and Torres Strait Islander peoples, including members of the Stolen Generations.

For further information, see the AAG [Aboriginal and Torres Strait Islander Ageing Advisory Group](#).

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Acronyms

AAG	Australian Association of Gerontology
AI	Artificial Intelligence
ECRs	Early career researchers

Artificial Intelligence (AI) and ageing research: Ethical considerations and implications

Background

The Australian Association of Gerontology (AAG) is Australia's only independent, impartial membership organisation whose overarching aim is to improve the experience of ageing by connecting gerontological research, policy, and practice. AAG has 1,400 members across Australia, including ageing and aged care researchers, educators, policymakers, health professionals, service providers, advocates for older people, and community members.

This report is in response to a request from the Australian Government Department of Health, Disability and Ageing for evidence and implications on the use of Artificial Intelligence in ageing research, as an emerging technology in the workplace.

Introduction

Evolving technologies in ageing research, such as Artificial Intelligence (AI), can boost efficiency, elevate care, and improve outcomes for older adults.¹ The steady advancement of new AI-powered technologies already supports enhancements in aged care provider operations to improve outcomes for older people, streamline administrative tasks, and integrate how data is accessed and managed.² The introduction of AI-generated apps and specialised robotics is likewise changing the way older people are engaged and supported both socially and physically within aged care as a response to workforce shortages and service demand.³ As technologies continue to develop, new opportunities for aged care research and practice innovations take hold.

Although providing significant aid in the care and support of older people, AI's capability to accelerate knowledge in research is viewed with caution by AAG's membership, especially regarding the risk of removing human involvement in how research is conducted, analysed, reviewed, and evaluated. In addition, consideration is warranted regarding the impacts of AI on the development of early career researchers (ECRs) and core academic activities which may lead to deskilling⁴, as well as rising concerns about ethical boundaries and harm associated

¹ Department of Health, Disability and Ageing (2024). Action Plan: Aged Care Data and Digital Strategy. (Word version) <https://www.health.gov.au/resources/publications/action-plan-aged-care-data-and-digital-strategy-2024-2029?language=en>

² <https://www.agedcareai.com.au/>

³ Aged Care Made Easy (2024). <https://www.agedcaremadeeasy.com.au/robotics-and-artificial-intelligence-ai-into-aged-care/>

⁴ Herman, E., et al. (2024). The impact of AI on the post-pandemic generation of early career researchers: What we know or can predict from the published literature. Learned Publishing. <https://doi.org/10.1002/leap.1623>

with its use.^{5 6 7} This includes a need for wider consensus and monitoring of acceptable applications of AI technologies within the field of ageing research.

For example, the *National Framework for the Assurance of Artificial Intelligence in Government* is a joint approach to safe and responsible use of AI by the Australian, state and territory governments. The framework sets out five “cornerstones of assurance” that aim “to ensure safer, more reliable and fairer outcomes for all; reduced risk of negative impact on those affected by AI; and the highest ethical standards when designing, developing and implementing AI.”⁸ While the framework is primarily designed for the government, it may also serve as a foundation for acceptable use of AI technologies and policy application in the academic sector.

The following is an overview of risks, concerns and enablers from our research and engagement with AAG members and academic partners. These identified issues support a cautionary approach to AI and ageing research to safeguard ethical research policy and practice that ultimately serves the health and wellbeing of vulnerable older Australians.

Risks and concerns

Impacts of AI on early career researchers

While there is limited empirical evidence regarding AI and its impact on academic research, in particular in the skills development of ECRs, there is a clear benefit of enhanced productivity that cannot be ignored, transforming both research efficiency and student motivation.^{9 10} This may include anything from initial topic research, article reviews, project planning and evaluation, to precise technical data collection and analysis.¹¹

Nevertheless, these productivity advantages might soon be overshadowed by rising concerns in academic circles. Recent research indicates an increasing reliance on AI tools, especially ChatGPT, which could foster superficial learning and diminish students’ critical thinking abilities.¹² What once took time and effort to develop essential skills like planning, time management, and analysis now only requires access to an AI chatbot for immediate answers, any time and place.¹³ If left unchecked, such concerns may result in a decline in the quality of aging research, diminished trust in research outputs by end users, and reduced productivity.

⁵ World Health Organization (2022). Ageism in artificial intelligence for health. WHO policy brief: Geneva. <https://www.who.int/publications/i/item/9789240040793>

⁶ McMullan, J., & Stasiuk, G. (2025). How AI images are ‘flattening’ Indigenous cultures – creating a new form of tech colonialism. *The Conversation*. <https://theconversation.com/how-ai-images-are-flattening-indigenous-cultures-creating-a-new-form-of-tech-colonialism-246972>

⁷ Byrne, A.L., et al. (2024). Discriminative and exploitive stereotypes: Artificial intelligence generated images of aged care nurses and the impacts on recruitment and retention. *Nurs Inq*. 31(3):e12651. doi: 10.1111/nin.12651. PMID: 38940314.

⁸ Department of Health, Disability and Ageing (2024). National framework for the assurance of artificial intelligence in government. Cornerstones of assurance. <https://www.finance.gov.au/government/public-data/data-and-digital-ministers-meeting/national-framework-assurance-artificial-intelligence-government/cornerstones-assurance>

⁹ Herman, E., et al. (2024). The impact of AI on the post-pandemic generation of early career researchers: What we know or can predict from the published literature. *Learned Publishing*. <https://doi.org/10.1002/leap.1623>

¹⁰ Mogavi, R.H., et al. (2024). ChatGPT in education: A blessing or a curse? A qualitative study exploring early adopters’ utilization and perceptions. *Computers in Human Behavior: Artificial Humans*. 2:1. <https://www.sciencedirect.com/science/article/pii/S2949882123000270>

¹¹ Winchester, L. M., et al. (2023). Artificial intelligence for biomarker discovery in Alzheimer’s disease and dementia. *Alzheimer’s & Dementia: the Journal of the Alzheimer’s Association*, 19(12), 5860–5871. <https://doi.org/10.1002/alz.13390>

¹² Mogavi, et al.

¹³ Ibid.

Additionally, increased productivity pressures could lead to fewer opportunities for ECRs, thereby decreasing the number of individuals advancing to senior research roles with the requisite expertise.

Further, AI's potential to negatively impact ECRs is supported by a recent MIT study that tested and assessed cognitive debt when using AI technology in essay writing. Using an electroencephalogram (EEG) to record the brain activity of each participant, the team measured differences when essays were completed using OpenAI's ChatGPT, a search engine only, and human-only brain power. Notably, the brain connectivity of participants "systematically scaled down" in line with the volume of technological support, with the human-only brain group demonstrating measurably stronger, broader ranging neural networks. Most alarming, participants who relied solely on ChatGPT failed to be able to quote from the essay they had completed only moments before.¹⁴

Consultations with AAG members working within the tertiary education sector echoed apprehension and concern regarding the impacts on the critical thinking and research skills of PhD students. Though AAG members agreed that AI has a place in academia, particularly as an exceptional tool for teaching staff preparing lectures, developing rubrics, and summarising classroom discussions, the expectation and necessity for students to enhance their research and writing skills outside of mastering AI technologies is becoming less relevant. According to one AAG member working within the tertiary system, AI is becoming so integrated into student assignments that tutors and lecturers find it increasingly challenging to discern when it has been used. In response, the university has adopted a two-track assessment approach, with one lane being unsecured and open to AI use, while the other is paper-based or face-to-face to ensure core skills are tested.

In addition, AAG members agree there is a need for an overarching policy or best practice guidance for AI use in aged care research and within the aged care sector, as ultimately societal impacts, especially concerning evidence-based support and services delivered to vulnerable older people, may be at risk. As exemplified in the *National Framework for the Assurance of Artificial Intelligence in Government*, best practice may include assurance practices covering AI governance (including data governance), a risk-based approach to AI use, the development of universal academic standards for AI technologies, AI system or product procurement guidance¹⁵, as well as transparency and other ethical safeguards. There was also agreement among those consulted regarding the importance of using AI tools responsibly and maintaining critical evaluation skills to reduce the potential for AI to "dumb down" academic standards that may hinder the development or maintenance of critical thinking and deep research skills.

Further, AAG members expressed that the policing of the integrity of data must remain a human component. As AI-generated data relies on existing and often historical data sets, information derived may be misleading or flawed in a modern context, further requiring traffic-cop-style human interpretation to prevent the distribution of false information. Thus, developing and maintaining essential critical thinking and evaluation skills for ECRs remains critical within an ever-evolving AI-generated research environment.

¹⁴ Kosmyna, N., et al. (2025). Your Brain on ChatGPT: Accumulation of Cognitive Debt when Using an AI Assistant for Essay Writing Task. MIT: Cornell University Press. <https://doi.org/10.48550/arXiv.2506.08872>

¹⁵ Department of Health, Disability and Ageing (2024). National framework for the assurance of artificial intelligence in government.

Impacts of AI on core academic activities

The peer review of academic journals may soon be fully automated with minimal or even no input from humans. From textual analysis and statistical validation to spotting plagiarism, full automation runs the risk of eroding and deskilling how research is evaluated, ultimately reducing academic publishing as a “meaningful human activity” and essentially turning publishers into “data-driven tech companies.”¹⁶ The fallout of this may lead to a loss of trust in academia, discouragement in individual research and innovation efforts, or deterrence from tertiary education as a valuable educational path or career option.

When asked for feedback on the particular impacts of AI on academic activities and what the future may hold for academic publishing, one AAG member shared a recent experience as a journal reviewer:

“I was invited to review a publication...a “systematic review” [that was] a collection of loosely synthesised AI-generated paper summaries...Double the length of the journal word count limit for review articles, over 100 papers cited, and it wasn’t clear which ones had actually come from the search that was supposed to have been done, and not compliant with PRISMA reporting guidelines [for systematic reviews and meta-analyses].

The review from the other reviewer was an effusive summary of the manuscript’s contents and did not actually include any comments on how to improve it...contain(ing) a number of ‘tells’ for being AI-generated, such as replication of acronyms...many of today’s AI platforms can be overly sycophantic.

So, it was a partially AI-generated paper subjected to an AI-written peer review implying there was nothing wrong with it. I’m just surprised it wasn’t a desk reject from the editor and that it went out to peer review at all.”

The situation described above is compounded by industry gaps in scientific peer reviewers, with turnover and recruitment a constant concern for academic publishers. When speaking to editors at the Australasian Journal on Ageing, a publication co-owned by AAG, it becomes clear that even the recruitment of reviewers is now left to AI, with ‘find me an expert’ ChatGPT searches more frequently the norm for sourcing potential reviewers.

Finding someone with specific knowledge and expertise in ageing can be challenging. Reliance on AI to source an expert may impact diversity of thought as it relies on existing and available data, not necessarily the skills, experience, and aptitude necessary for a competent reviewer. Removing or reducing human involvement for efficiency’s sake pushes a worldview that AI is a “neutral actor” that can be employed or avoided at any time, while at the same time, minimising human agency and intellectual capacity.¹⁷

AI, ageism, cultural harm, and exploitative stereotypes

In February 2022, the World Health Organization (WHO) released its policy brief *Ageism in artificial intelligence for health*, scrutinising the adoption of AI in the health and medical care of

¹⁶ Gendron, Y., Andrew, J., & Coope, C. (2022). The perils of artificial intelligence in academic publishing. *Critical Perspectives on Accounting*, 87. <https://www.sciencedirect.com/science/article/pii/S1045235421001301>

¹⁷ Ibid.

older adults, and the potential for AI to increase or amplify ageism.¹⁸ Specifically, ageism may be encoded in historical data used to train AI models, with some datasets that are meant to represent whole populations, excluding pertinent information concerning older people, thus allowing biased and ageist conclusions to creep in.

According to the WHO, this “could undermine, for example, the quality of health care for older people” and support “preconceived (and) often flawed assumptions” regarding older people.”¹⁹ The WHO also warns that there may be a tendency to design studies on behalf of older adults, when a co-design approach with direct input from older people may ensure that AI-generated data or conclusions are tested to both mitigate and avoid unintentional bias and assumptions leading to ageism.²⁰

When asked about AI’s potential to increase discrimination and bias, AAG members were adamant regarding the potential risks and limitations of AI, particularly regarding its ability to capture diverse voices and perspectives, as well as the ongoing and escalating cultural harm and exploitative stereotypes arising from the use of AI-generated images.

One particularly concerned AAG member highlighted a recent controversy involving Adobe and its hosting of AI-generated stock images claiming to represent Indigenous Australians. Unfortunately, the images did not resemble Aboriginal and Torres Strait Islander peoples, presented false and unidentifiable body markings and artworks without cultural significance or authenticity. This type of cultural harm is being described as the “cultural flattening” of Australia’s Indigenous populations, raising alarms among Indigenous communities concerned with negative impacts and harm as a result of AI.²¹

Further, research has identified the potential negative impacts of AI-created imaging that particularly discriminate and exacerbate stereotypes of the aged care workforce. AI’s reliance on existing data sets exploits a negative perception of people employed in aged care, particularly aged care nurses.²² These negative perceptions have the potential to undermine efforts to positively promote careers in the aged care sector and aggravate current workforce shortages. The risks of ageist messaging and the promulgation of harmful and false representations of older people, Indigenous cultures, and workers within the aged care workforce support a continuous need for human intervention and experts in data validation. Essentially, these experts can serve as cultural advisors or employ various perspectives, including those of older individuals, to protect the integrity of AI-generated data.

¹⁸ World Health Organization (2022). Ageism in artificial intelligence for health. WHO policy brief: Geneva. <https://www.who.int/publications/i/item/9789240040793>.

¹⁹ Ibid.

²⁰ Ibid.

²¹ McMullan, J., & Stasiuk, G. (2025). How AI images are ‘flattening’ Indigenous cultures – creating a new form of tech colonialism. *The Conversation*. <https://theconversation.com/how-ai-images-are-flattening-indigenous-cultures-creating-a-new-form-of-tech-colonialism-246972>

²² Byrne, A.L., et al. (2024). Discriminative and exploitive stereotypes: Artificial intelligence generated images of aged care nurses and the impacts on recruitment and retention. *Nurs Inq*. 31(3):e12651. doi: 10.1111/nin.12651. PMID: 38940314.

Enablers for adopting AI in ageing research

Minimising harm through education and ethical practice

Since AI technologies have become widely adopted, researchers continue to discuss ethical issues such as consent, privacy, transparency, responsibility, and accountability, which remain important topics of ongoing debate.²³ AAG members are especially concerned about the absence of clear, ethical best practices within the sector, the broader societal impacts of AI technologies in ageing research, including cultural harm and ageism, and how to ensure informed consent and privacy for older people. Equally, there is concern among researchers regarding the lack of empirical evidence demonstrating that adherence to ethical best practices will translate into responsible AI and researcher behaviour.²⁴

According to the WHO, a way to mitigate or avoid ageism, in particular, when using AI is to develop governance and policy that support the inclusion of older people in the development of new technologies that may directly or indirectly impact their health or wellbeing.²⁵ This would safeguard the role that AI-technologies play concerning the care of older people, endorsing age-promoting design that maintains autonomy and dignity. In addition, the WHO calls for “a robust ethics process, especially in universities...to guide the development and application of AI systems for older people...(and which identifies) ethical challenges, including those related to ageism.”²⁶ AAG members support the establishment of best practice in AI and ageing research; however, many agree that the horse has already bolted, and harm through AI-generated ageism and damaging stereotypes is already occurring.

In response, AAG members are calling for a simple guide or tool to educate researchers and the sector on what AI is, how it may be used or applied, and the potential impacts, both positive and negative, within the ageing sector and especially for older people. While acknowledging that AI has the potential to benefit older people through accelerated research, better care delivery, and information dissemination, AAG members emphasise the need for inclusive and user-friendly solutions that cater to the diverse skill levels and educational backgrounds of older people and staff working in aged care. They also recognise the importance of not leaving any group behind, including those in disadvantaged communities, and the need for ongoing investment in community education in technology and supporting the needs of older people, particularly in terms of access and accessibility.

Safeguarding through ethical standards and policies in research

Research confirms an undeniable boost to “human creativity and academic output” gained through utilising AI search and evaluation tools that “accelerat[e] advancements across all fields in unprecedented ways.”²⁷ The Australian Government Department of Health, Disability and Ageing agrees that new technologies, such as AI, “have the potential to increase efficiency,

²³ Samuel, G., Chubb, J., & Derrick, G. (2021). Boundaries Between Research Ethics and Ethical Research Use in Artificial Intelligence Health Research. *Journal of empirical research on human research ethics* : JERHRE, 16(3), 325–337.
<https://doi.org/10.1177/15562646211002744>

²⁴ Ibid.

²⁵ World Health Organization (2022). Ageism in artificial intelligence for health. WHO policy brief: Geneva.
<https://www.who.int/publications/i/item/9789240040793>.

²⁶ Ibid.

²⁷ Lombardi, P. (2025). *Harnessing the potential of AI for academic research*. Taylor & Francis.
<https://insights.taylorandfrancis.com/ai/harnessing-the-potential-of-ai-for-academic-research/>

improve care, and lead to better outcomes for older people.”²⁸ Under *Priority 8* of the Aged Care Data and Digital Strategy 2024–2029 Action Plan, the government is committed to taking the lead in establishing guidelines and standards that support consistency regarding digital technologies in the aged care sector.

Specifically, *Priority 8* calls for the introduction of standards and frameworks that enable successful and universal integration of emerging technologies while promoting transparency, accountability, and best practice. This includes reviewing evidence and research in the appropriate use of AI, assessing current recommendations for employing and capitalising on these new technologies, while examining potential risks, implementing controls where needed, and supporting ongoing trials of evolving solutions.²⁹ AAG members suggest that such a framework should also include guidance regarding the involvement of older people and aged care workers in ageing research, to test and evaluate outputs from AI-generated data, providing a necessary human lens to safeguard against unwanted bias and inaccurate or negative representations of older people.

In addition, academia would benefit from universally acceptable policies and practices with regard to the use of AI in research and core academic activities. However, the rapid evolution of AI would create challenges in keeping guidance up to date and raise questions regarding responsibility and oversight within an ever-changing landscape. Most academic publishers, such as the Australasian Journal on Ageing (AJA) and Cambridge, have official statements on the use of AI-generated content. Both state that any use of AI must be declared in all manuscripts, research papers, and other publications, with clear justification for its use. AJA holds the author accountable for any inaccuracies as a result of using an AI tool, while Cambridge also confirms that AI does not meet its requirements for authorship and must not breach its plagiarism policy.

AAG members are concerned that different levels of acceptable use of AI may exist, with a risk that heavily AI-generated publications may make it to print. Such research may then cause a loop of inaccurate and harmful information to continually circulate and be reused as resources for future research. Further, AAG members highlight the importance of multiple perspectives and sources of evidence in ageing research. A sole reliance on AI for acquiring evidence-based knowledge and data may limit diverse perspectives and real-world translation of findings among culturally and linguistically diverse ageing communities. Establishing best practice standards and ethical guidelines within the research sector would support educators and students to appropriately employ and navigate new technologies.

Maintaining researcher agency and capacity

In April 2025, the Behavioural Insights Team at the Department for Science, Innovation and Technology in the UK conducted a test to investigate the strength and accuracy of AI to produce a rapid evidence review compared to the skills of a member of the research team. As expected, the researcher employing AI technologies was able to complete the rapid review faster than his colleague, who did not use AI. The AI-generated evaluation significantly sped up the often laborious analysis and synthesis required in an evidence review. However, the first draft produced by the mix of AI tools was “less fluent,” needing more revising than the “human

²⁸ Department of Health, Disability and Ageing (2024). Action Plan: Aged Care Data and Digital Strategy 2024–2029.

²⁹ Ibid.

version.” Though only a single case study, the test supports AI’s potential to increase efficiencies within the rapid evidence review process.³⁰

The above study is a good example of how AI can be “an enabler for human progress.”³¹ However, new and emerging technologies should be viewed as a supplementary tool rather than the sole resource in a researcher’s toolkit. Human oversight remains crucial for addressing issues such as biased, misleading, or inaccurate data, even as automation improves efficiency. At a recent global roundtable on responsible AI use in social care, hosted by Scottish Care in partnership with the Global Ageing Network and others, the need for proper and continuous training was emphasised. This training helps adopters of technology to use AI effectively, safely, and with awareness of its limitations. Specifically, it was noted that “AI is a tool, not a decision-maker, and therefore, it is important to manage expectations about what it can do well and what it cannot.”³²

During a recent webinar discussion, AAG members shared their feedback and experiences using AI in gerontological research, policy, and daily work practices. The discussion focused primarily on the use of ChatGPT, with mixed responses from attendees regarding its capacity and limitations. However, all agreed that the use of AI requires personal judgment and a human lens to evaluate information supplied. Concern was raised regarding AI’s rapid expansion and increasing capabilities, and its potential to remove the need for human input in the future. When asked by one of the webinar presenters if AI would one day replace researchers and academics, ChatGPT replied:

“It is unlikely that AI will completely replace academics or subject matter experts anytime in the near future. While AI can be a valuable resource for supplementing human expertise, it is still important for humans to be involved in the interpretation and application of AI-generated insights. Additionally, there are many tasks that require human judgment and creativity that are currently beyond the capabilities of AI systems.”

Several attendees of the webinar who work within the tertiary space were quick to add that AI, though taken advantage of by many, was still not universally used. Others confirmed that their university had introduced courses in AI literacy to support students to learn how to use and build the skills necessary to guard against known risks, such as fake references, old or outdated data, and antiquated biases. Some researchers point out that the role of human oversight is continually evolving and must focus on maintaining control through practical, technical, and ethical means.³³ The identified negative impacts on human agency and capacity require targeted safeguarding, such as “strategic innovation leveraging human-AI collaboration and trustworthy AI design principles.”³⁴

³⁰ Egan, M., et al. (2025). AI-Assisted vs human-only evidence review: Results from a comparative study. Behavioural Insights Team (UK). Department for Science, Innovation and Technology (United Kingdom).

https://apo.org.au/node/330997?utm_campaign=Policy-Weekly-25-June-2025&utm_content=apo.org.au%2Fnode%2F330997&utm_medium=email&utm_source=comms.apo.org.au

³¹ Tchivikova, O. (2025). Harnessing the potential of AI for academic research. Taylor & Francis.

<https://insights.taylorandfrancis.com/ai/harnessing-the-potential-of-ai-for-academic-research/>

³² Smith Sloan, K. (2025). Responsible AI in Social Care: Insights from a Global Roundtable. The Global Ageing Network.

<https://globalageing.org/articlesblogs/one-in-six-ignored-a-global-call-to-support-the-worlds-ageing-population-2/>

³³ Holzinger, A., Zatloukal, & K., Müller, H. (2025). Is human oversight to AI systems still possible? New Biotechnology, 85, 59-62, <https://doi.org/10.1016/j.nbt.2024.12.003>.

³⁴ Ibid.

Additionally, an AAG member highlights the urgent need to encourage critical thinking across all levels of education, especially regarding the origins of information, its purpose, and its users. Just as television once transformed society, innovation and technology are poised to bring about significant change and support transformative learning. Another AAG member notes, “We are likely to see (AI) integrated (more) into research projects and interventions... the challenge now is that the genie is out of the bottle,” emphasising that the primary concern should be how AI will ultimately affect and influence older adults.

Conclusion

Overall, AI technologies have a role in ageing research by enhancing researcher efficiency through improved data searches, analysis, and evaluation. However, emerging evidence indicates that widespread AI adoption may lead to the deskilling and reduced critical-thinking abilities of early career researchers, while also increasing risks of ageism, cultural harm to Indigenous communities, and the reinforcement of biases and stereotypes against older individuals and the aged care workforce.

Additionally, core academic activities face new challenges in managing an influx of AI-generated content and increasingly relying on AI to support an already stretched peer review system. With rapid advances in AI technology, it is urgent to consider how the ageing research sector responds, especially in developing guidance, frameworks, and best practices that protect the interests and wellbeing of older people. At the same time, it is essential to maintain a human perspective, along with the skills and oversight that strengthen rather than diminish researchers’ intellectual capacity.

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