AI IMPACT REPORT NO. 225 · REVISED 5 OCTOBER 2026 · 250 ROLES COVERED

Occupational Therapists

AI augmenting assessment, personalized intervention, and remote patient monitoring in occupational therapy.

EXPOSURE	WINDOW	ADOPTION TODAY	READING
29 Low exposure	5–10 yrs until change lands	Medium	AI assists; the work stays human-led. Exposure is the share of today's work AI can plausibly take on within the window.

§ 01 WHAT IS HAPPENING

What is happening to occupational therapists

Impact

AI tools are autonomously analyzing patient movement, generating personalized activity plans, enhancing rehabilitation robotics, and providing continuous remote monitoring. This compels Occupational Therapists to radically pivot towards complex diagnostic formulation, nuanced therapeutic relationships, ethical oversight of AI-driven interventions, and specialized care for intricate, ambiguous cases.

Risk

Radical role overhaul; pervasive automation leading to significant workflow redefinition and specialized human focus.

The role of Occupational Therapists is undergoing a profound and accelerating redefinition by AI. AI will assume command of vast routine data collection, initial functional assessments, and the generation of basic activity plans. Occupational Therapists must immediately pivot to becoming experts in leveraging AI for enhanced insights, intensely validating AI outputs, and dedicating their expertise to the irreplaceable human elements of occupational therapy: deep empathy, therapeutic alliance, complex functional assessment in ambiguous cases, and critical ethical decision-making regarding patient autonomy and safety in AI-driven care.

Sector readiness

Rapid & Transformative Integration

The occupational therapy and rehabilitation sectors are aggressively integrating AI, driven by overwhelming demand, workforce shortages, and the push for hyper-efficient, personalized care. AI is rapidly moving beyond pilot stages to widespread adoption for assessment, personalized therapy, and remote monitoring, though regulatory and ethical frameworks are still striving to keep pace.

§ 02 POSITION

Where you stand

i The Occupational Therapist role is undergoing a radical redefinition, with AI fundamentally restructuring functional assessment, personalized intervention, and remote patient management.

ii AI will autonomously manage significant patient data, generate precise activity plans, and streamline documentation, compelling therapists to pivot to complex functional assessment and profound human connection.

iii Survival and impact will hinge on Occupational Therapists mastering AI tools, critically evaluating AI outputs, championing ethical AI, and providing irreplaceable empathetic care and nuanced judgment in cases beyond AI's autonomous capabilities.

§ 03 ACTIONS 15 POINTS

What this means for you

Concrete changes to how the work gets done, in the order you are likely to meet them.

01 **AI-Driven Autonomous Functional Assessment.** Occupational Therapists will command AI systems that autonomously capture and analyze patient movement during Activities of Daily Living (ADLs) using computer vision or wearable sensors. This eliminates manual measurement, providing hyper-precise data on functional limitations for immediate, data-driven assessment and progress tracking.

02 **Hyper-Personalized Activity & Exercise Prescription.** Occupational Therapists will orchestrate AI platforms that autonomously generate highly personalized activity and exercise plans based on individual patient progress, functional goals, real-time performance data, and even motivational feedback. The therapist will validate these AI-orchestrated plans and manage the nuanced human elements of patient adherence and motivation.

03 **Enhanced Assistive Technology & Adaptive Equipment.** Occupational Therapists will design and oversee the integration of AI into advanced assistive technologies and adaptive equipment (e.g., smart wheelchairs, adaptive home environments). AI will optimize the performance and responsiveness of these devices, customizing them to individual patient needs and maximizing independence.

04 **Real-time Remote Patient Monitoring & Tele-rehabilitation.** Occupational Therapists will actively manage AI-powered remote monitoring systems that continuously track patient adherence to home programs, performance of ADLs, and physiological responses. AI will flag deviations or progress, enabling hyper-efficient tele-rehabilitation consultations and proactive interventions.

05 **AI-Powered Predictive Recovery Analytics.** Occupational Therapists will leverage AI models that autonomously analyze patient data (e.g., initial injury, adherence, biometric data, functional performance) to predict recovery timelines, identify individuals at risk of plateauing, or forecast potential re-injury. This enables proactive adjustment of therapy plans for optimized outcomes.

06 **Automated Documentation & Administrative Streamlining.** AI will autonomously handle a significant portion of documentation, including transcribing session notes, populating progress reports with objective data from AI sensors, and managing billing codes. This radically frees up therapist time for direct patient interaction and complex clinical decision-making.

07 **Focus on Therapeutic Alliance & Intrinsic Motivation.** As AI assumes command of routine tasks, the paramount value of Occupational Therapists will be the irreplaceable human ability to build profound therapeutic alliances, provide empathetic support, foster intrinsic motivation, and navigate the psychological barriers to functional recovery.

08 **Generative AI for Patient Education Materials.** Occupational Therapists will command generative AI to autonomously create highly personalized patient education materials (e.g., diagrams, videos, text explanations for ADLs, adaptive strategies) adapted to individual patient learning styles, health literacy, and specific conditions.

09 **Ethical AI in Occupational Therapy & Patient Autonomy.** Occupational Therapists will bear profound responsibility for auditing AI systems for algorithmic bias (e.g., in functional analysis or prescription), ensuring data privacy, and upholding patient autonomy and dignity in AI-driven care, particularly regarding independent living.

10 **AI-Assisted Environmental Modifications.** Occupational Therapists will collaborate with AI tools that autonomously analyze home environments and patient functional limitations. The AI will suggest optimal environmental modifications, adaptive equipment, or smart home solutions to enhance accessibility and independence.

11 **Gamification & Immersive VR/AR Therapy.** Occupational Therapists will design and oversee AI-powered gamified rehabilitation experiences delivered via VR/AR. AI will adapt game difficulty and activities in real-time based on patient functional performance, making therapy more engaging and motivating for sustained adherence.

12 **Human-AI Teaming for Advanced Assessment & Treatment.** Occupational Therapists will operate in seamless human-AI teams, where AI processes vast data and offers predictions or automated interventions. The human therapist will lead complex functional assessment, fine-tune AI settings, and manage nuanced human interaction, maintaining ultimate authority and judgment.

13 **Specialization in AI-Integrated Rehabilitation.** The field will see a rise in Occupational Therapists specializing in AI-driven rehabilitation, focusing on the implementation, oversight, and refinement of AI systems within clinical and home settings, and acting as a bridge between technology and patient care.

14 **Continuous Learning & AI Literacy as a Core Competency.** The rapid advancements in AI will necessitate continuous, aggressive learning of new AI-powered tools, their clinical applications, and ethical implications. Occupational Therapists must proactively re-skill to remain clinically relevant and effective.

15 **Leadership in Digital Health & Independent Living Solutions.** Occupational Therapists will play a leading role in guiding their clinics and healthcare systems through the adoption of AI, advocating for patient-centric AI solutions that maximize independence and quality of life through technology.

§ 04 CAUSES 10 DRIVERS

What is pushing this change

01 **Aging Population & Rising Chronic Conditions.** The rapidly aging global population and rising prevalence of chronic conditions create an immense demand for rehabilitation services that enhance daily function.

02 **Revolutionary Advancements in AI (Computer Vision, Reinforcement Learning, Generative AI).** Breakthroughs in AI fields enable highly precise motion analysis, adaptive robotics, and personalized content generation for therapy.

03 **Overwhelming Demand for Scalable & Accessible Rehabilitation.** Healthcare systems are overwhelmed, demanding AI solutions to scale rehabilitation services beyond traditional clinical settings.

04 **Critical Workforce Shortages & Therapist Burnout.** The global shortage of occupational therapists compels the immediate adoption of AI to augment human capacity and manage caseloads.

05 **Pervasive Growth of Wearable Tech & Smart Home Sensors.** Ubiquitous sensors and wearables generate continuous, real-time biometric and movement data, ideal for AI analysis in rehabilitation.

06 **Urgent Need for Personalized & Data-Driven Therapy.** Patients now expect highly individualized therapy plans, preventative insights, and continuous progress monitoring, which AI enables.

07 **Exploding Complexity of Patient Data (Biometric, Behavioral, Clinical).** The sheer volume of new patient data, from functional assessments to real-time ADL monitoring, necessitates AI for synthesis and decision support.

08 **Mandatory Regulatory Push for Improved Patient Outcomes.** Governments and regulatory bodies are enforcing stricter data-driven mandates for patient safety and quality improvement in rehabilitation.

09 **Global Health Crises & Need for Remote Care Solutions.** AI's ability to facilitate remote monitoring and tele-rehabilitation is critical for delivering care during crises and in remote areas.

10 **Intense Pressure for Cost Optimization in Healthcare.** AI automation of diagnostics, personalized therapy, and documentation is seen as crucial for systemic cost reduction in rehabilitation.

§ 05 VARIATION 5 SECTORS

Impact by sector

The headline figure is an average. Where you work changes the picture.

Adult Rehabilitation OTs	AI for autonomous functional assessment (ADLs), personalized activity plans, and predictive recovery analytics for adult orthopedic/neurological conditions.
Pediatric OTs	AI for adapting therapy games in VR/AR based on child's progress, analyzing developmental milestones from movement data, and generating engaging activity visuals for children.
Mental Health OTs	AI for analyzing behavioral patterns from digital data, suggesting coping strategies (digital therapeutics), and personalizing interventions for mental health clients.
Home Health OTs	AI for autonomous remote monitoring of ADL performance, fall detection, and real-time biometric data analysis for patients in their homes. Focus on safety and independence.
Assistive Technology Specialists (OTs)	AI for analyzing patient needs and suggesting optimal assistive technologies or smart home modifications. Focus on device integration and customization.

§ 06 PREPARATION 8 SKILLS

Skills to build

The skills that keep the human part of this work valuable as the routine part is automated.

01 **Clinical Reasoning & Functional Assessment Acuity.** The core ability to synthesize complex patient data (including AI-generated functional insights), make sound clinical decisions, and formulate comprehensive, dynamic treatment plans for unique patient functional needs.

02 **AI/Digital Health Literacy.** Proficiency in using AI-powered functional assessment tools, rehab robotics, digital therapeutics, and interpreting AI-generated patient health insights from wearables/sensors.

03 **Therapeutic Alliance & Empathy.** The irreplaceable ability to build profound trust and rapport with patients, actively listen to their concerns, and provide compassionate, motivating care essential for adherence and progress in functional recovery.

04 **Complex Problem-Solving & Ambiguity Tolerance.** Handling highly ambiguous patient presentations, complex multi-morbidities affecting function, or unique environmental barriers where AI's capabilities may be limited or require superior human nuance.

05 **Ethical AI & Patient Autonomy.** Navigating complex ethical dilemmas posed by AI (e.g., privacy of functional data, accountability for AI errors), ensuring patient autonomy, and fiercely advocating for patient well-being in AI-driven care.

06 **Data Analysis & Biomechanical Interpretation.** Working effectively with physicians, physical therapists, software engineers, and AI developers to ensure coordinated, holistic, and technology-augmented patient care.

07 **Interprofessional Collaboration.** Ability to interpret vast biomechanical/functional data, recognize subtle patterns in ADL performance, and translate AI-generated insights into actionable adjustments to therapy plans or environmental modifications.

08 **Adaptability & Continuous Learning.** A relentless commitment to continuous, aggressive learning of new AI tools, understanding their exponential capabilities, and radically adapting entire clinical workflows for competitive survival and enhanced patient outcomes.

§ 07 INSTRUMENTS 12 ENTRIES

Tools in use

KINDS OF TOOL WORTH KNOWING

01 **AI-Powered Functional Assessment Systems.** Software systems that use computer vision or sensor data to capture and analyze patient movement during Activities of Daily Living (ADLs) and other functional tasks, powered by AI for precision.

02 **Rehabilitation Robotics & Exoskeletons (AI-controlled).** Advanced robotic devices and wearable exoskeletons that use AI for adaptive assistance, adaptive support during functional tasks, and motor relearning in rehabilitation.

03 **Digital Therapeutics Platforms (AI-powered for OT).** Software applications and platforms that use AI to deliver evidence-based therapeutic exercises, cognitive behavioral therapy (CBT) components, or coaching directly to clients, adapted for occupational therapy goals.

04 **AI-Enhanced Wearable Sensors & Smart Home Devices.** Devices with embedded AI that collect and analyze real-time physiological and movement data for continuous health monitoring, activity tracking, and fall detection in home environments.

05 **Predictive Analytics Software (Rehabilitation-focused).** Software that uses AI/ML to analyze patient rehabilitation data (including functional performance) to predict recovery timelines, identify risk factors for re-injury, or forecast treatment responses related to ADLs.

06 **AI for Automated Documentation & Transcription.** AI tools that transcribe therapist-patient conversations and autonomously generate clinical notes, functional progress reports, or populate EHR fields with objective data from assessments.

NAMED TOOLS ALREADY IN USE

Kinetisense (Motion Analysis) / OpenPose (research tool, represents capability) VISIT

A prominent motion analysis system that uses computer vision for precise functional assessment; OpenPose is an open-source alternative demonstrating AI's capability.

Ekso Bionics / ReWalk Robotics / Bionik Laboratories (e.g., InMotion Arm) VISIT

Leading manufacturers of robotic exoskeletons and upper limb rehabilitation devices that use AI for adaptive patient support and therapy.

Kaia Health / Sword Health (Digital PT/OT Programs with AI guidance) VISIT

Digital therapeutic platforms that provide AI-guided exercise and activity programs, often for conditions that cross over between PT and OT.

TytoCare / Biofourmis / CarePredict VISIT

Integrated telehealth and remote monitoring platforms that leverage AI to analyze patient data from home sensors and wearables for proactive care, specifically focused on functional independence.

Proprietary AI models (developed by large rehab networks or insurers) VISIT

AI/ML models developed by large healthcare providers or research institutions to predict patient outcomes and optimize care pathways in rehabilitation.

Nuance Dragon Medical One / Suki VISIT

AI-powered voice recognition and medical dictation solutions that radically automate clinical note-taking and integrate seamlessly with EHRs.

§ 08 EXAMPLES 5 EXAMPLES

In practice

Ways people in this role are already using AI, and what they get from it.

Autonomous Functional Movement Assessment

EXAMPLE 1

HOW Occupational Therapists will command an AI-powered motion capture system (e.g., using a smartphone camera or wearable sensors) that autonomously analyzes a patient's performance during Activities of Daily Living (ADLs) with hyper-precision, providing immediate, objective data on functional limitations and compensations.

GAIN Radically eliminates manual assessment time, provides unprecedented precision in functional analysis, and enables objective, continuous progress tracking for Occupational Therapists.

Hyper-Personalized Activity Prescription

EXAMPLE 2

HOW

Occupational Therapists will orchestrate an AI platform that autonomously generates a daily activity and exercise plan for a patient recovering from a stroke. The AI customizes tasks, sets parameters, and provides real-time feedback based on the patient's home performance data, adapting to their functional progress.

GAIN

Dramatically increases patient adherence and engagement, optimizes therapeutic effectiveness, and significantly reduces the time therapists spend on manual activity planning.

Robotic-Assisted ADL Training

EXAMPLE 3

HOW

Occupational Therapists will program and oversee an AI-controlled robotic arm or assistive device that autonomously helps a patient with limited upper limb mobility perform specific ADLs, like reaching for objects or self-feeding. The AI adapts its support level based on patient effort.

GAIN

Enables higher intensity and precision in rehabilitation, potentially accelerating functional recovery, and reducing the physical strain on therapists during complex training tasks.

Predict Functional Recovery Trajectories

EXAMPLE 4

HOW

Occupational Therapists will leverage an AI model that autonomously analyzes a patient's initial functional status, adherence to therapy, and biometric data (e.g., grip strength, range of motion). The AI predicts their likely functional recovery timeline and identifies factors that could accelerate or hinder their progress in ADLs.

GAIN

Provides crucial, data-driven insights for therapy planning, allows for proactive interventions to prevent plateaus, and helps manage patient expectations regarding functional recovery time.

Automate Progress Report Generation

EXAMPLE 5

HOW

Occupational Therapists will use an AI-powered documentation tool that autonomously synthesizes objective data from functional assessment sensors, wearable devices, and patient self-reports. The AI will then generate a draft of the patient's progress report, including charts and key functional findings, for the therapist's final review.

GAIN

Radically eliminates administrative burden, ensures documentation accuracy and consistency, and frees up significant time for Occupational Therapists to focus on direct, high-value patient care and complex problem-solving.

§ 09 CONTEXT

How this role compares

Three neighbouring roles chosen to show the direction of travel.

Rehabilitation Aides (Routine exercise guidance) / Occupational Therapy Assistants (Routine ADL assistance) MORE EXPOSED	AI IMPACT	Catastrophic (AI can autonomously guide routine exercises via digital apps; AI can automate basic administrative tasks and data collection.)
	WORK MOVES TO	Immediate need for radical re-skilling into AI oversight, validating AI-guided activities, or specialized data quality roles for AI systems.
Rehabilitation Robotics Engineers / AI Functional Assessment Developers DIFFERENT SKILLS, GROWING	AI IMPACT	Foundational (They design and build the AI algorithms and robotic systems that power occupational therapy and functional assessment.)
	WORK MOVES TO	Deep expertise in advanced AI/ML algorithms, robotics, biomechanics, and software engineering, often with a focus on human functional interaction.
Vocational Rehabilitation Counselors / Social Workers (Community Support) COMPLEMENTARY, LESS EXPOSED	AI IMPACT	Low-Moderate Augmentation (AI assists in data for vocational assessments; AI may provide data for social workers), but core career counseling, community resource navigation, and nuanced client advocacy remain paramount.
	WORK MOVES TO	Deep empathy, career counseling expertise, community resource navigation, and holistic client advocacy.

§ 10 VERDICT

Closing judgement

> For Occupational Therapists, AI is not merely a tool but a radical force of transformation that will fundamentally redefine functional rehabilitation. It will autonomously manage routine assessments, amplify intervention precision, and streamline documentation, compelling therapists to pivot to complex functional artistry, profound human connection, and ethical oversight of AI-driven care. The future Occupational Therapist will be a visionary orchestrator of human-AI collaboration, providing irreplaceable empathy and nuanced judgment at the heart of patient recovery and independence.

§ 11 BASIS REVISED 5 OCTOBER 2026

Evidence and revisions

What the exposure figure rests on, what changed when it was last revised, and the published work cited for this role.

SCORE

35 to 29

WINDOW

5-10 years (unchanged)

The 5 October 2026 review moved the score down by 6 points.

Exposure Index v2. Inputs: task applicability 21/100 (Microsoft AI applicability score 0.11 for Occupational therapists); observed usage 1/100 (Anthropic observed exposure 0.01); official exposure tier 70/100 (BLS: high); labour-market trajectory 13/100 (BLS projects employment to grow 14.8% over 2025–35); published adoption rating 40/100 (medium adoption). Weighted base 29.0. Final score 29. The previous figure of 35 was lowered by 6 points: the earlier method kept 60% of the weight on an undocumented editorial prior and capped movement at fifteen points, so the measured evidence was only partly reflected. The change window is unchanged.

HOW THE FIGURE IS BUILT (EXPOSURE INDEX V2)

Task applicability — Microsoft Research, AI applicability score	21 × 35%	7.5
Observed usage — Anthropic Economic Index, observed exposure	1 × 20%	0.2
Official exposure tier — US BLS AI-exposure category	70 × 20%	14.0
Labour-market trajectory — US BLS projected employment change 2025–35	13 × 10%	1.3
Published adoption rating — This report's adoption level	40 × 15%	6.0
Weighted base		29.0
Exposure score		29

MEASURES BEHIND THE SCORE

US Bureau of Labor Statistics · *Employment Projections 2025–35 and AI Exposure Categories* (27 August 2026)

AI-exposure tier: High. Projected employment change 2025–35: +14.8%. Matched to Occupational therapists.

PUBLISHER PDF ARCHIVED COPY

Microsoft Research · *Working with AI: Measuring the Applicability of Generative AI to Occupations* (10 July 2025)

AI applicability score 0.11 (percentile 35 of 785 occupations) for SOC 29-1122.

PUBLISHER PDF ARCHIVED COPY

Anthropic · *Anthropic Economic Index report: Cadences* (26 June 2026)

Observed exposure 0.01 for SOC 29-1122 (percentile 55 of 756 occupations).

PUBLISHER PDF

UK Department for Science, Innovation and Technology · *Assessment of AI capabilities and the impact on the UK labour market* (28 January 2026)

UK context: around 70% of UK workers are in occupations with tasks AI could perform or enhance, above the US average; a one-standard-deviation rise in exposure was associated with a 3.9% fall in UK job postings.

PUBLISHER ARCHIVED COPY

ALSO CITED FOR THIS ROLE

McKinsey Global Institute · *Agents, robots, and us: Skill partnerships in the age of AI* (25 November 2025)

Skills tied to assisting and caring are expected to change least; this is where AI most clearly complements rather than substitutes.

PUBLISHER

International Monetary Fund · *Bridging Skill Gaps for the Future: New Jobs Creation in the AI Age* (14 January 2026)

The IMF places clinical and care roles in the high-complementarity group, where AI raises productivity without reducing headcount.

PUBLISHER PDF

Indeed Hiring Lab · *AI at Work Report 2025: How GenAI is Rewiring the DNA of Jobs* (23 September 2025)

Indeed rates nursing the least exposed major occupation (68% of typical skills minimally affected).

PUBLISHER

Archived copies are served only where the licence permits; otherwise the link goes to the publisher. Full research library: https://www.careerguard.ai/sources

§ 12 APPENDIX

Method and sources

Each report was written from a large body of published research. The exposure score itself is computed, not written: it is the CareerGuard Exposure Index, a weighted average of occupation-level measures from the US Bureau of Labor Statistics (AI-exposure classification and 2025–35 projections), Microsoft Research (AI applicability scores) and Anthropic (observed exposure), together with the adoption rating published on the report. The organisations and publications below are the standing literature behind the narrative sections. Every source, with dates, licences and archived copies where we are permitted to hold them, is catalogued in the research library.

Exposure Index v2 (October 2026). Each input is scaled to 0–100 and weighted: task applicability 35% (Microsoft AI applicability score ÷ 0.5), observed usage 20% (Anthropic observed exposure ÷ 0.75), official exposure tier 20% (BLS very high = 100, high = 70, moderate = 40, low = 10), labour-market trajectory 10% (50 2.5 × projected % employment change), published adoption rating 15% (very high = 85, high = 70, medium-high = 55, medium = 40, low-medium = 25, low = 10). Inputs not measured for an occupation are dropped and the remaining weights renormalised. An editorial adjustment of at most ±12 points is allowed only for automation channels the measures cannot see (robotics, self-service, machine vision, medical imaging, RPA/OCR, generative video) and is always logged with its reason. Scores are whole numbers, not rounded to five. The change window shifts one notch (a year at each end) per ten points of movement.

I GLOBAL AND MACROECONOMIC IMPACT OF AI ON WORK

World Economic Forum

The Future of Jobs Report series — Employer survey of expected job growth and decline, skill shifts and technology adoption (2020, 2023 and 2025 editions); Artificial Intelligence and the Future of Entry-Level Work (2026).
AI governance and transformation reports — Frameworks on ethical AI, talent strategy and industry transformation.

McKinsey Global Institute

AI, Automation and the Future of Work series — Research quantifying automation potential by task, sector and demographic, from "Jobs Lost, Jobs Gained" to "Agents, robots, and us" (2025).
Industry-specific reports — Financial services, healthcare, manufacturing and others.

PwC

Global AI Jobs Barometer — Annual analysis of job postings and productivity by AI exposure (2024–2026 editions).
Upskilling Hopes and Fears survey — Employee perceptions and readiness.

Microsoft Research and Anthropic

Working with AI (2025); Anthropic Economic Index (2025–2026) — Occupation-level usage data from Copilot and Claude conversations, the two observed-usage measures behind the 2026 revision.

Stanford Digital Economy Lab and Stanford HAI

Canaries in the Coal Mine? (2025–2026); AI Index Report (annual) — Payroll evidence on early-career employment in exposed occupations; annual measurement of AI capability, investment and adoption.

Deloitte

Human Capital Trends series — Workforce, talent and HR technology trends.
Tech Trends series — Emerging technologies and their business implications.

Accenture

Technology Vision series — Forward-looking analysis of emerging technology, with emphasis on AI.
Fjord Trends — Design, innovation and human experience in a digital world.

Boston Consulting Group

AI/ML insights and industry solutions — "The AI Revolution in the Workplace" and related research.

EY

AI and workforce reports — Adoption, talent strategy and ethics.

IBM Institute for Business Value

AI and automation studies — Business models, workforce evolution and leadership.

OECD

AI Policy Observatory — International data and policy on AI, labour markets and skills.
Employment Outlook — Labour-market trends including technological impact (2023–2026 editions).

International Labour Organization

Generative AI and Jobs: A Refined Global Index of Occupational Exposure (2025) — Task-level exposure gradients for every ISCO occupation; successor to the 2023 global index.

International Monetary Fund

Staff Discussion Notes on AI and work (2024, 2026) — Complementarity framing: where AI augments and where it substitutes.

UK Department for Science, Innovation and Technology

Assessment of AI capabilities and the impact on the UK labour market (2026) — UK occupational exposure and job-posting evidence.

Brookings Institution

AI and automation research — Economic and social implications, displacement and skills.

Yale Budget Lab and Goldman Sachs Research

Tracking the Impact of AI on the Labor Market; AI and the US labour market (2026) — Aggregate labour-market monitoring; macro displacement estimates.

Oxford University (Oxford Martin School)
The Future of Employment — Frey & Osborne and subsequent research on susceptibility to automation.

MIT Technology Review
AI & Work — Reporting on AI research and its implications for industries and jobs.

Gartner
Hype Cycle for Artificial Intelligence — Maturity and adoption of AI technologies.
Future of Work reports — Workplace models and talent strategy.

U.S. Bureau of Labor Statistics
Employment Projections 2025–35; AI Exposure Categories; Occupational Outlook Handbook — Ten-year employment projections and, from the 2025 cycle, an AI-exposure tier for every detailed occupation.

Indeed Hiring Lab
AI at Work Report (2025) and posting-market updates — Skill-level transformation estimates and job-posting trends by occupation.

II CORE AI AND MACHINE-LEARNING RESEARCH

OpenAI
Research papers, blog and API documentation — Large language models, generative AI, safety and societal impact.

Google DeepMind
Research papers and blog — Reinforcement learning, AI for science, AGI and ethics.

Meta AI
Research papers and blog — Large language models, computer vision, AI for social good.

Hugging Face
Transformers library and model hub — Open-source state-of-the-art NLP models.

TensorFlow and PyTorch
Documentation and community forums — Core frameworks illustrating practical capability.

arXiv
cs.AI, cs.LG, cs.CV, cs.CL — Pre-print research.

NeurIPS and ICML
Conference proceedings — Top-tier academic research.

ACM and IEEE
Journals and proceedings — ACM Computing Surveys; IEEE Transactions on AI.

Kaggle
Datasets and competition solutions — Applied machine learning on real-world problems.

The Alan Turing Institute
Research and reports — Responsible and applied AI.

III ETHICAL AND RESPONSIBLE AI DEPLOYMENT

NIST
AI Risk Management Framework — Voluntary framework for managing AI risk.

European Commission
AI Act — Risk-tiered legal framework for AI.
Ethics Guidelines for Trustworthy AI — Principles for responsible development.

Partnership on AI
Research and best practice — Responsible AI development.

AI Now Institute
Annual reports — Social implications: power, inequality, rights.

ACM FAccT
Proceedings — Fairness, accountability and transparency.

Data & Society
Publications — Social implications of data-centric technology.

WIPO
Conversation on IP and AI — Intellectual-property implications of AI.

IEEE Global Initiative on Ethics of A/IS
Ethically Aligned Design — Recommendations for ethical AI design.

Center for AI and Digital Policy
Policy briefs — Accountable AI policy.