What Canadians Think 2022 – Privacy Edition Survey:

Canadians' Perspectives on Digital Health Privacy





We know Canadians

AUGUST 2022

Table of Contents



EXECUTIVE SUMMARY	03
OBJECTIVES & METHODOLOGY	04
PRIVACY PERSPECTIVES AND EXPERIENCES	09
LEVEL OF TRUST IN PRIVACY OF HEALTH INFORMATION	22
HEALTH CARE PRIVACY BREACHES	28
USE OF DATA BEYOND PROVISION OF CARE	32
CONSENT PREFERENCES	35
SAMPLE COMPOSITION / DEMOGRAPHICS	47

Leger

Executive Summary

- More than 70% of Canadians feel confident they can generally protect their privacy online.
- 3 in 10 respondents say their perception of privacy of their personal health information (PHI) does not have any impact on their willingness to use digital health tools.
- More than half of respondents (56%) believe their health care privacy rights are adequately protected by law. This is even higher among those who have a family doctor. However, only 3 in 10 respondents say they are aware of Canadian privacy laws that protect their personal health information.
- Respondents have a high level of trust in health care providers to keep their personal health information safe and secure.
- A majority of the respondents say they would be willing to share their personal health information for secondary purposes.
- In order to consent to use of their personal health information, nearly all participants indicated that they first would like to know *how* their PHI will be used, *who* will be using it or have access to it.

STUDY OBJECTIVES AND METHODOLOGY

Leger

Context and Study Objectives

Infoway has been tracking attitudes, expectations and experiences in digital health privacy in Canada every 5 years since 2007.

This study aims to update this public opinion research by further exploring Canadians' attitudes, utilization, perceptions and expectations around digital health privacy.

Specific objectives of the study are to assess:

- **Perceptions** of personal privacy and privacy of personal health information (PHI) in digital health;
- Awareness of oversight bodies (federal and provincial) and mechanisms and their role in protecting Canadians' privacy rights in relation to personal health information;
- **Concerns** and acceptability of secondary use of electronic health information for purposes such as research, public health surveillance, and analysis and management of the health system using identifiable and non-identifiable data;
- **Trust** and mediators of comfort with respect to access, utilization and notification of uses of personal health information, including timely access to one's own health information.
- Any changes in Canadians' perceptions and expectations of privacy in digital health that may have been caused as a result of the pandemic.

Methodology



20 MINUTE online survey conducted March 8th – 20th 2022 with 2,010 citizens in Canada

Regional Sample Size									
CANADIANS 16+ YEARS OLD	ATL*	QC	ON	MB	SK	AB	BC	TERR**	TOTAL
Weighted	137	470	773	67	60	223	270	10	2,010
Unweighted	127	453	777	74	61	233	274	11	2,010
	*NS, PEI, NB, NL							**NWT, YK, NU	

About Canada Health Infoway

At Canada Health Infoway (Infoway) we believe a more connected and collaborative system is a healthier system, and we work with governments, health care organizations, clinicians and patients to make health care more digital. We're working to ensure that everyone is able to access their personal health information, book appointments, get prescriptions, view lab test results and access other health services, online. We're working with our partners to transform the health system because we know that digital in health can be as transformative as digital has been in other aspects of our lives. We're an independent, not-for-profit organization funded by the federal government. Visit us online at www.infoway-inforoute.ca.



Methodology And Notes For Interpretation of Data



Web survey of 2,010 citizens in Canada.

The survey was made available in both English and French.



Data collection took place from March 8th - 20th, 2022.

NOTES FOR READERS

ROUNDING

The data presented have been rounded. As a result, totals may differ slightly from 100%.

TRENDING

The data is compared with previous waves wherever applicable. While Leger did not conduct previous waves, trending was applied based on 2007, 2012, & 2017 results where possible.



Using Canadian Census data, weighting was applied according to region, age, and gender to render a representative sample of the Canadian population. Sample base sizes indicated are unweighted. A margin of error cannot be associated with a non-probability sample in a panel survey. For comparison purposes, a probability sample of this size would have a margin of error ±2.19%, 19 times out of 20.



Methodology - Leger's LEO Panel

Leger – the largest Canadian-owned polling and marketing research firm – conducted this web survey with 2,010 Canadians over the age of 16, selected from LEO's (Leger Opinion) representative panel via Computer-Assisted Web Interviewing technology (CAWI).

The LEO panel is the largest Canadian panel with nearly 500,000 representative panelists from all regions of Canada. LEO was created by Leger based on a representative sample of Canadian citizens with Internet access. LEO's panelists were randomly selected (RDD), panelists from more hard-to-reach target groups were also added to the panel through targeted recruitment campaigns. The double-opt-in selection process, a model to detect fraud and the renewal of 25% of the panel each year ensures complete respondent quality. To ensure a higher response rate and to reach people on their mobile devices, Leger has also developed a high-performance Apple and Android application. In fact, Leger is the only Canadian research firm offering both the number and quality of panelists. Most competing polling firms in Canada also use the LEO panel.

The results presented in this study comply with the public opinion research standards and disclosure requirements of the Canadian Research and Insights Council (CRIC) and the global ESOMAR network.





PRIVACY PERSPECTIVES AND EXPERIENCES





PRIVACY PERSPECTIVES

More than 70% of Canadians feel confident they can protect their privacy online.

- Among nearly a quarter who do not feel confident, main concerns are around possibilities of data being hacked, not trusting companies in following privacy policies, not knowing what companies are doing with their data, being concerned that their personal data is already available online, or that they must accept how their data is used if they want a particular service.
- Fewer people relate their lack of confidence in ability to protect their privacy online to issues with privacy protections on their device or being unfamiliar with technology, though this is found more so among respondents who are 55 years or older.



Overall, 1 in 5 say they are not comfortable with their personal health information (PHI) being used under any circumstances.

• Those willing to share their data say they will do so based on a variety of conditions, with more than a quarter saying they would want their DATA ANONYMIZED. Very few (2%) say they don't mind who uses data about them.

While 1 in 5 are unsure, a majority (56%) of respondents believe their health care privacy rights are adequately protected by law. This is even higher among those who have a family doctor. Although most of these respondents felt their privacy rights are only somewhat adequately protected.



Base: Total respondents (n=2,010)

8. Do you feel confident that you are able to protect your online privacy?

9. Why do you not feel confident that you are able to protect your online privacy?



Base: Total respondents (n=2,010) / Respondents who say they did not have virtual care in past 12 months (n=866)

24. Have you used virtual care with a health care provider in the past 12 months?

25. Which of the following reasons describes why you have not used virtual care in the past 12 months?

Consent Method Used During a Virtual Care Visit



13

Among those who have RECEIVED VIRTUAL CARE in the past 12 months, experience with PROVIDING CONSENT at the most recent visit



Base: Respondents who say they had virtual care in past 12 months (n=1,112) / Respondents who were asked to provide consent at most recent service (n=362) / who recall providing consent (n=348) 28.

Were you asked to provide consent to use virtual care for your most recent virtual care service? / 27.

Did you understand what you were consenting to at your most recent virtual care consult? 29.

Please describe how you gave your consent at your most recent virtual care consult. Why did you not review the consent information? 30.



Attitudes Toward the Use of Personal Health Information

More than 70% respondents say they are comfortable with their PHI being used by others if certain conditions are met:

MY PERSONAL HEALTH INFORMATION CAN BE USED BY OTHERS...



Impact of Perception of Privacy on Willingness to Use Digital Health

3 in 10 respondents say their perception of privacy of their PHI does not have any impact on their willingness to use digital health tools. The impact overall does not appear to be particularly strong, especially in terms of avoiding digital health tools.

Extent that attitude toward privacy of personal health information IMPACTS WILLINGESS to USE DIGITAL HEALTH tools:



Base: Excludes respondents who say they don't mind who uses data about them (n=1,966)

11. How does your attitude toward the privacy of your personal health information (PHI) impact your willingness to use digital health tools?

Perception of Level of Protection of Health Care Privacy Rights

Leger

% of respondents who agree that their health care privacy rights are adequately protected by law:



CANADIANS' AWARENESS OF THEIR PRIVACY RIGHTS & HEALTH CARE PRIVACY LAWS

3 in 10 respondents say they are aware of Canadian privacy laws that protect their PHI.

• A majority of those aware say they know it's a serious offence for anyone to access their PHI without authorization and half are aware that they can request access to their PHI at any time.

Nearly half (44%) of Canadians say they looked for information about their **health care privacy rights** in various sources, such as places where they receive health care, online searches, and via federal/provincial/territorial government health agencies, among others.

Nearly 3 in 10 say they have **exercised at least one or more patient privacy rights.** The most common privacy right exercised is **requesting access to their PHI** – reported by 17%.

Younger patients, those in urban areas, and those with chronic conditions or providing unpaid health care support are more likely to have exercised any patient privacy rights.



Awareness of Canadian Health Information Privacy Laws

Awareness of (any) Canadian privacy laws that protect personal health information (PHI):



Leger

Awareness of Canadian Health Information Privacy Laws



Among those who say they are aware of Canadian privacy laws, respondents state they know the following privacy rights:

59%	It is a serious offence for anyone to access my PHI without authorization
53%	I can request access to my PHI at any time
53%	There is a strict policy that my identifiable PHI will <u>not</u> be sold or released to any organization or business that is not part of the health care system
50%	I can file a complaint about my privacy to an HCP and/or Privacy Commissioner
44%	I'd be informed of any privacy & security breaches that may have occurred with my PHI
36%	I can request corrections to my PHI at any time
30%	There are regular privacy and security audits of electronic health systems
21%	I can view a history of who accessed my PHI and when they accessed it
20%	I can hide or mask sensitive information from users who don't need to know everything in my health record
17%	I will be notified when an HCP accesses my PHI
4%	None of the above
swer	3% preferred not to an



NEVER ASKED / LOOKED for any information 52%

2% preferred not to answer

Experience in Exercising Patient Privacy Rights

Leger





1% preferred not to answer

LEVEL OF TRUST

LEVEL OF TRUST IN THE PROTECTION OF PERSONAL HEALTH INFORMATION

LEVEL OF TRUST IN PHI PROTECTION IN THE PUBLIC SECTOR

In general, respondents report a **high level of trust in health care providers** to keep their **PHI safe and secure**, among such providers as doctors, pharmacists, nurses and nurse practitioners (with a majority rating high trust for each of these health care providers on average).

- While still fairly trusting, somewhat lower trust is reported when it comes to those working in health care who do not necessarily provide direct patient care: such as administrative workers in a doctor's office, government health departments, health researchers in universities.
- While some are unsure, there appears to be lower trust in home care supports.
- In general, those who have a family doctor appear to trust health care workers more.
- No major changes in level of trust of health workers since 2017 in this regard.

LEVEL OF TRUST IN PHI PROTECTION IN THE PRIVATE SECTOR

Trust is lower when it comes to the **private sector** (e.g., health care providers in private sector, virtual care service providers, digital health tools / services, companies not directly involved in health care).



Level of Trust in Health Care Workers to Keep PHI Safe/Secure



								Тор-3 (Ra	ated 5- <u>7)</u>	
	■ Top-2 (Rated 6-7)	Mid-3	Bottom-2	DK/ preference not to an		AVG	2022 (n=2010)	2017 (n=2023)	2012 (n=2509)	2007 (n=2469)
Family doctor		70%		24%	3%3%	5.9	81%	82%	83%	86%
Pharmacists	58	8%		37%	<mark>3%</mark> 2%	5.6	75%	69%	71%	73%
Health care providers in hospitals	56%			38%	3%3%	5.5	72%	77%	62%	64%
Nurses in my doctor's office or clinic	54%		39%		<mark>3%</mark> 4%	5.5	71%	70%	68%	72%
Nurse Practitioner	54%		37%		<mark>2</mark> %7%	5.5	69%	-	-	-
People who support me in my care	48%		42%		5% 6%	5.3	64%	-	-	-
Administrative support workers in family doctor's office	40%		50%		7% 3%	4.9	55%	59%	53%	66%
Government health departments	40%		46%		9% 4%	4.9	58%	60%	47%	52%
Health researchers in universities	39%		45%		6% 9%	5.0	56%	57%	48%	52%
Home care supports	27%		50%	7%	16%	4.7	44%	-	-	-

NOTE: Started asking about NPs, people who support in care, and home care supports this year - no trending

Base: Total respondents (n=2,010)

21. How much trust do you have in the following groups to keep your personal health information safe and secure?

*On a 7-pt scale, with 1 = no trust at all and 7 = great deal of trust

24

Level of Trust in Other Groups to Keep PHI Safe / Secure



Le

Jei

Level of Trust in Other Groups to Keep PHI Safe / Secure



5.9	Family doctor
5.6	Pharmacists
5.5	Health care providers in hospitals
5.5	Nurses in my doctor's office or clinic
5.5	Nurse Practitioner
5.3	People who support me in my care
5.0	Health researchers in universities
4.9	Administrative support workers in family doctor's office
4.9	Government health departments
4.9	HCPs who provide out-of-pocket paid services or covered by extended health insurance
4.7	Home care supports
4.3	HCPs in the private sector
3.7	Private sector virtual care service providers
3.5	Private sector companies providing digital health tools / services
3.0	Private sector companies not directly involved with health care

Base: Total respondents (n=2,010)23. How much trust do you have in the following groups to keep your personal health information safe and secure?

Perceptions of How PHI is Treated

Level of AGREEMENT with the following statements:

	Top-2 (Rated 6-7)	Mid-3	■ Bottom	, 1⊧	refer answer	AVG	Top-3 (Ro 2022 (n=2010)	ated 5-7) 2017 (n=2023)
Doctors and other HCPs require timely and easy access to patient's PHI so they can provide high quality care		71%		24	4% 2'3%	6.0	84%	85%
I am comfortable with doctors and other HCPs sharing my PHI through electronic health record systems with other HCPs who care for me	6		33% 4%		5.6	76%	77%	
My PHI is treated with the level of privacy/confidentiality that I expect	48%		48%		4% 9%	5.3	65%	-
I am confident that safeguards (including those for the use of tech) are in place to protect PHI from people not permitted to see it	44%			44%	6% 6%	5.1	65%	66%

NOTE: Some statements not asked in previous years – trending where possible

Base: Total respondents (n=2,010)

22. Please rate the degree to which you agree or disagree with the following statements.

Leger

a 2 (Destand E 7)

HEALTH CARE PRIVACY BREACHES ATTITUDES AND EXPERIENCES

Experience with PHI Privacy Breach(es)

- Most of the respondents surveyed report no awareness that they have personally experienced or know someone who experienced a privacy breach.
- Only 1 in 8 (12%) respondents say they have personally experienced or know someone who experienced a PHI breach, with 5% personally experiencing one. Known breaches were reported by a greater proportion of respondents in Ontario, among people under 25 years old, those without a family doctor, with a chronic condition, and those providing unpaid health care support.
- Hearing about privacy breaches in Canada has a mixed effect on how respondents perceive privacy of their own personal health information.
- Nearly 2 in 5 say it has a strong or moderate negative impact, while 1 in 5 say it has NO impact on them. Those without any negative impact mainly say it is not something that worries them, or they haven't heard of any breaches.
- Older respondents and unpaid caregivers report somewhat greater impact, while Quebeckers report lowest impact. Interestingly, fewer Quebeckers recalled hearing of any health care privacy breaches in the past 12 months.



Recall of Hearing about Health Care Privacy Breaches in Canada in Past Year





Experience with Privacy Breaches of PHI

% of respondents who have personally experienced or know someone who had a privacy breach of their PHI:



(#%) = 2017 data. Prior to 2017, question was asked overall if personally / family member experience breach

17. Have you, a member of your family, or someone you know ever experienced a breach where your/their

personal health information was used inappropriately or released without your/their consent?

USE OF DATA BEYOND PROVISION OF CARE



Belief about how PHI is Shared for Health Purposes





1% preferred not to answer

Base: Total respondents (n=2,010)

31. Which of the following best describes your belief about how personal health information is shared between health care organizations, government health agencies and university researchers for health research purposes?



Willingness to Share PHI Depending on the Purpose of Use





CONSENT PREFERENCES

CONSENT SCENARIOS (Preferences)

Participants were provided different scenarios and asked to select response options based on the context of the situation(s) presented.

There were **no notable differences** when it comes to sharing PHI to be used by a **government public health** analyst vs. a **pharmaceutical company** researcher.

Nearly all participants indicated that certain conditions would have to be met for them to allow their PHI to be used:

- In particular, respondents said that for them to decide on whether to consent for their PHI to be used, they would like to know how their PHI will be used and who will be using it or have access to it, that their PHI is stored in safe/secure place, and that strict rules prevent PHI disclosure to others.
- Depending on the scenario, 9-16% would not want their PHI used at all.

A majority (52-59%) of the respondents would want to be **asked for consent** to use their PHI EVERY TIME their data is used:

- More than a quarter (26-31%) would want to be asked the first time and contacted periodically to provide consent.
- Fewer (14-16%) would only want to be asked the first time PHI is used.


Consent Scenario #1: Government Public Health Scenario

Respondents were shown:

The health sector, which consists of a variety of organizations and individuals, often uses health data for public benefit. This data is a large pool of data, where it is not easy to identify a specific individual. The following scenarios are about a fictitious person named Alex. Please consider how Alex's situation relates to your experience.

Respondents were then split randomly to be shown one of the following scenarios and answer a series of questions based on the situation/option shown.

COVID-19 Scenario (n=1,005 respondents shown)

Alex has COVID-19. A government public health system analyst would like to use Alex's personal health information as part of a large pool of data to help with COVID-19 prevention and support efforts, including identifying at-risk populations and targeting vaccination clinics (e.g., identifying where to allocate more resources, etc.).

RARE DISEASE Scenario (n=1,005 respondents shown)

Alex has a rare disease (i.e., an illness that affects a small percentage of the population). A government public health system analyst would like to use Alex's personal health information to identify (and notify) people who have the same condition as Alex to get their regular eye exam, as people with the same condition are at higher risk for eye disease as well.



Government Public Health Scenario: Preference for Use of PHI





Government Public Health Scenario:

Prerequisites for Consent Important to Canadians



ANY CONDITIONS (NET)

My health information is stored in a safe and secure place I am told how my PHI will be used and who will be using it There are strict rules to prevent my PHI from being passed on to anyone else I am told who will have access to my PHI Organizational processes and procedures are in place to manage and protect PHI There are criminal penalties or heavy fines if individuals break the rules I am told about the benefits and risks of sharing my PHI I am told how use of my PHI could lead to benefits for society Information sharing is approved by an independent ethics committee Privacy impact assessments are made available to the public The impact of using PHI is reported back to the community No conditions would convince me to allow my PHI to be shared I don't need any conditions for my PHI to be used I prefer not to answer

Base: Respondents answering for COVID-19 scenario (n=776) / rare disease scenario (n=827)

Which of the following conditions are required for you to consent? / Which of the following conditions would convince you to allow your personal health information to be shared? Please select up to 5. 34.

28%

27%

27%

26%

15%

10%

9%

3%

6%

3%

Government Public Health Scenario:

Prerequisites for Consent Important to Canadians



Base: Respondents answering for COVID-19 scenario (n=229) / rare disease scenario (n=178)

34.

Government Public Health Scenario:

Preference for Frequency of Being Asked for Consent



Base: Respondents who would need conditions met answering for COVID-19 scenario (n=807) / rare disease scenario (n=826)

35. If the conditions were met, how often would you like to be asked for consent?

Legel

Consent Scenario #2: Pharmaceutical Research Scenario



Respondents were presented with a second case/scenario within the same theme, and answered a series of questions based on that scenario.

COVID-19 Scenario (n=1,005 respondents shown)

A researcher affiliated with a pharmaceutical company would also like to use Alex's personal health information as a part of a pool of data for developing a treatment for COVID-19.

RARE DISEASE Scenario (n=1,005 respondents shown)

A researcher affiliated with a pharmaceutical company would also like to use Alex's personal health information as a part of a pool of data for developing a treatment for the rare disease.





Leger

Pharmaceutical Research Scenario:

Prerequisites for Consent Important to Canadians



Base: Respondents answering for COVID-19 scenario (n=749) / rare disease scenario (n=818)

34. Which of the following conditions are required for you to consent? / Which of the following conditions would convince you to allow your personal health information to be shared? Please select up to 5.

Pharmaceutical Research Scenario:

Prerequisites for Consent Important to Canadians



Base: Respondents answering for COVID-19 scenario (n=256) / rare disease scenario (n=187)

Pharmaceutical Research Scenario:

Preference of Frequency Asked for Consent





Base: Respondents who would need conditions met answering for COVID-19 scenario (n=786) / rare disease scenario (n=803)

35. If the conditions were met, how often would you like to be asked for consent?

SAMPLE COMPOSITION / DEMOGRAPHICS



Respondent Profile (Weighted)



- 3. What is your age?
- 2. How would you describe your gender?
- 1. In which province/territory do you currently live?
- 49. How would you describe the community you live in?



Respondent Profile (Weighted)



Base: Total respondents (n=2,010)

46. What is the highest level of education you have obtained?

48. Which race category best describes you?

47. Please indicate your annual household income (e.g., total income including yourself and all individuals you live with) before taxes in the past year.

45. Are you employed in the health care or health services sector?

Health Care Profile



HAVE FAMILY DOCTOR / REGULAR PLACE OF CARE



CHRONIC ILLNESS / CONDITION



PROVIDE UNPAID HEALTH SUPPORT



has been diagnosed by a medical professional and persists or is expected to persist for six months or more.

Base: Total respondents (n=2,010)

- 40. Do you have a family doctor or regular place of care, such as a health centre?
- 41. Do you have a chronic illness or condition at this time?
- 42. Do you provide unpaid support to someone with a diminishing physical ability, a debilitating cognitive or mental condition, or a chronic lifelimiting health condition (e.g., taking to them to health care appointments, attending appointments, participating in treatment decisions, etc.)?