

1. Executive Summary

On behalf of HealthLink BC, BC Stats conducted a telephone survey of 1,200 British Columbians in August and September of 2012. This survey evaluated awareness of, usage and satisfaction with the organization's services including:

- Provincial 8-1-1 Service
 - Nicotine Replacement Therapy Program (NRT)
 - Nursing Services
 - Dietitian Services
- BCHealthGuide Handbook (the Handbook)
- HealthLink BC Website (the Website)
- HealthLink BC Files (the Files)

KEY FINDINGS

Between 2009 and 2011, overall awareness of the HealthLink BC organization remained relatively steady between 44% and 46%. From 2011 to 2012, brand awareness declined significantly; 7 percentage points from 44% to 37%.

Awareness of Services

- Dietitian Services saw the greatest decrease (8 percentage points). The Files also saw a statistically significant decline (4 percentage points).
- Respondents in Vancouver Island Health Authority were generally the most aware of HealthLink BC services, while those in Vancouver Coastal Health Authority generally reported the lowest levels of awareness.
- There were statistically significant differences between the health authorities in awareness of the Provincial 8-1-1 Service and the Files.
- Awareness of the Provincial 8-1-1 Service was highest in the Vancouver Island and lowest in the Vancouver Coastal Health Authorities (36% vs. 23%, respectively).
- Awareness of the Files was highest in Northern Health Authority and lowest in the Vancouver Coastal and Fraser Health Authorities (17% vs. 7% and 8%, respectively).

Use of Services

- Use of HealthLink BC services did not change significantly from 2011 to 2012.
- The Handbook remained the most commonly used service (37% of respondents who were aware of the service used this service in 2012) and of those that used one or more services, over half (51%) reported only using the Handbook.
- The most notable change in usage patterns from 2011 and 2012 was the increased usage of services in the Vancouver Coastal Health Authority and the decreased usage in the Northern Health Authority¹. Only use of Dietitian Services decreased in Vancouver Coastal Health Authority, while only use of the Provincial 8-1-1 Service increased in the Northern Health Authority.

Satisfaction with Services

- The majority of users were satisfied with HealthLink BC services, and there were no notable differences in satisfaction from 2011 to 2012. Satisfaction was highest with the Files and lowest with the Website (84 vs. 75 points out of 100, respectively). Nursing Services and the Handbook each received satisfaction scores of 78 out of 100 points.
- Respondents who were both aware and had used the Handbook were overwhelmingly positive about Handbook's utility; agreeing that the Handbook had the information they needed, they understood the information, and the information was helpful.
- Respondents in the Interior Health Authority reported higher levels of satisfaction with Nursing Services than those in the Fraser or Vancouver Coastal Health Authorities (90 vs. 71 and 72 points out of 100, respectively).

¹ Statistical significance tests were not performed on year-over-year comparisons by demographic characteristics such as health authority. Year-over-year differences by demographics are discussed in general terms only and should be interpreted with caution.



BC Government Online Health Citizen Perceptions Report

**Prepared for: The Government of British
Columbia**
December 2012



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Background and Methodology

- The BC Ministry of Health came to Ipsos wanting to get a better understanding of the concept of online health from a citizens perspective in addition to understanding a more holistic view from experts from the online health field.
- This report focuses on BC residents perceptions and understandings of online health.
- BC residents aged 18-70 were interviewed during November 23rd to December 3rd.
- The sample size consisted of n=364
- Significant differences are represented be letters (Aa/Bb) to denote strengths at the 95%/90% confidence level.

Key Findings

Key Findings

1

Generally, most of BC residents are supportive of having health online. Specifically, just over two thirds of the population approve of online health and agree that it's important to be able to access it via a secure computer. Also, the majority of initial thoughts and feelings were also categorized as positive. On an unaided basis, there were limited concerns all of which could generally be addressed on an implementation/communications level. Lastly, priorities, impressions, and feelings towards online health all had very positive and strong support (although slightly weaker among those aged 55 and up).

2

There is an opportunity to further educate BC residents about what the potential benefits are to having health online. There was limited knowledge with the specific benefits online health could have for individuals, their families, or the system. The majority of the perceived benefits behind online health, personal health records, and health closer to home were mentions of conveniences and increased patient accountability.

3

There are some challenges that lie ahead in order to overcome security, privacy, technology, and health literacy issues with BC residents towards health online. Specifically, among those who have a negative impression of online health components, security of information and privacy were definitely universal concerns especially when it regarded personal health information. When probed about concerns of health online, mentions included some residents not having the proper computer/internet technology, accessibility, and literacy (health and computer) to ensure proper usage and understanding.

Key Findings

4

There are indicators to suggest that key groups will help drive various aspects of health online or need extra attention and time in order for them to adopt online health. Specifically, the younger groups have greater overall support of online health placing greater priority and a better overall impression than those aged 55 and up. It will take time and effort to get the 55+ age group actively using online health. Privacy and maintaining personal connections with doctors will need to be addressed with the older age groups. Those aged 18-54 will want to access health online via a computer but also by a mobile device. The 18-54 group will be the early adopters of connecting with others in health conversations.

5

There were very limited differences in perceptions, attitudes, and concerns with health online among gender, regions, between those who have who were considered urban living versus those who were not. However, higher priority was given to online health initiatives among the younger age groups and those who had either been a patient/had a dependant who had been a patient in the past year versus those who have not.

6

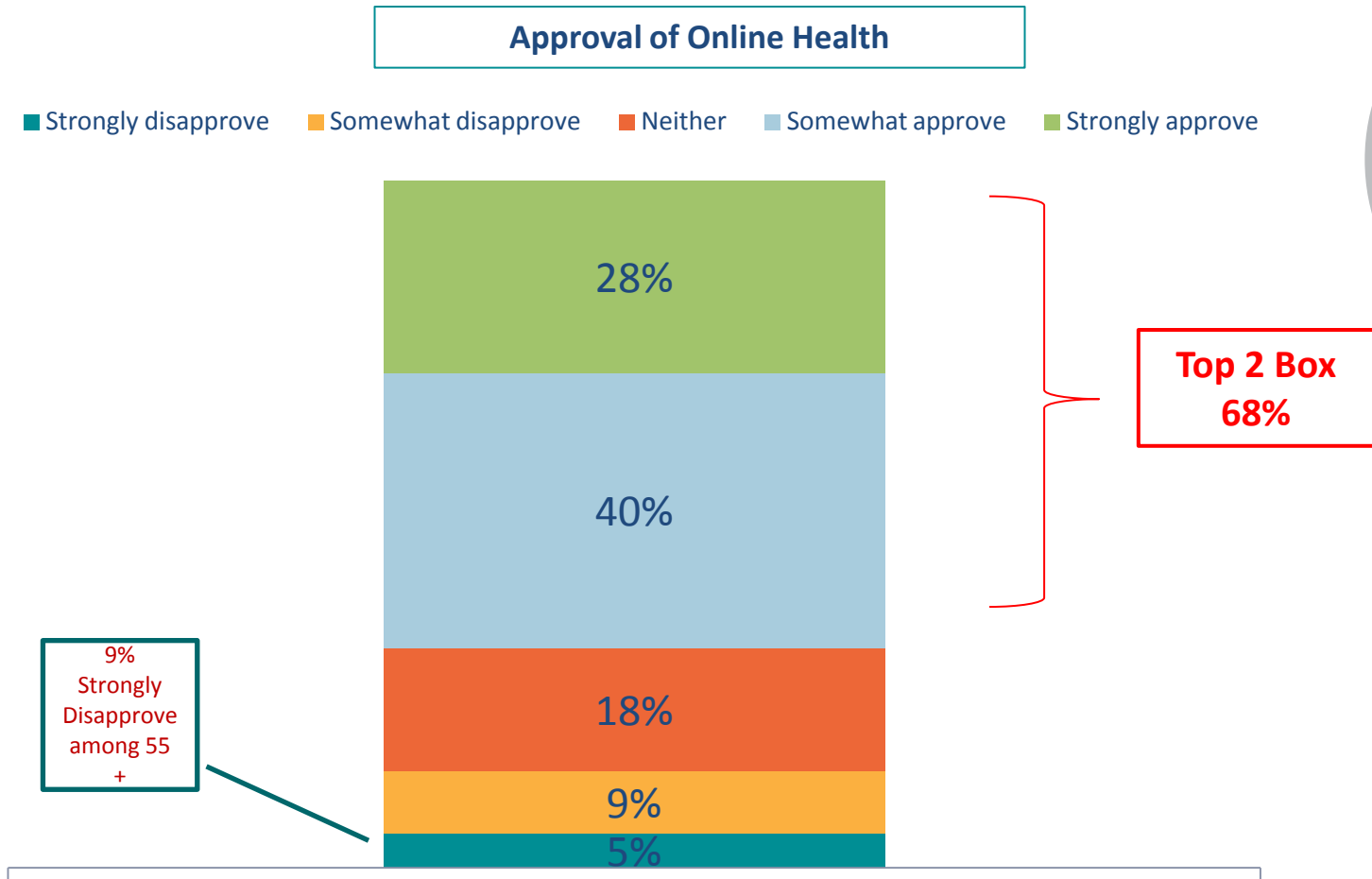
A multi-media campaign is likely necessary. From what we can see there is a need to deliver the information of online health using various touchpoints among various groups. 55+ prefer direct mail while younger groups prefer TV. Both of these need to be supported by health care provider offices and clinics. Tailoring the communications within each of the touchpoints to various age groups would likely improve adoption, usage and attitudes.

Detailed Learnings

1

**Most of BC residents
are supportive of
online health.**

The majority of BC residents approve of online health. However, among those ages 55 and up are more likely to strongly disapprove than other age groups.



The majority of the feelings towards online health are positive regarding receiving health support, being able to self diagnose, it's convenient, it's a good idea, and it's a good source. Convenience is more important among the younger age groups while being better informed/improvements to the health care system is more associated among the older age groups.

Online Health Initial Thoughts	Total	Age 18-34 A	Age 35-54 B	Age 55+ C
<u>POSITIVE</u>	<u>64</u>	<u>65</u>	<u>66</u>	<u>62</u>
<u>(Net) Online Health</u>	<u>28</u>	<u>24</u>	<u>27</u>	<u>32</u>
<u>(Subnet) Online Health Support / Self-Diagnosis</u>	<u>17</u>	<u>16</u>	<u>17</u>	<u>17</u>
Check your own health online / self-diagnosis online	7	8	7	7
Health support online / health tools online	5	4	8	4
I use online health websites / health applications	4	3	5	4
Other online health support / self-diagnosis (e.g. more online info for seniors)	4	2	4	6
<u>(Subnet) Online Health Services</u>	<u>13</u>	<u>10</u>	<u>11</u>	<u>16</u>
Other online health services (e.g. lists of doctors with contact, register births/deaths)	6	4	6	7
Doctors can share information	3	1	4	3
Book appointments online	3	5	2	2
<u>(Subnet) Online Health Records / Test Results</u>	<u>6</u>	<u>4</u>	<u>8</u>	<u>6</u>
You can access records online	5	4	8	4
<u>(Net) Convenient</u>	<u>19</u>	<u>20</u>	<u>23</u>	<u>15</u>
Convenient / easy to access	8	13 C	11 C	3
Fast access	5	4	8	3
Other convenient (e.g. getting test results quicker will remove the anxiety of waiting)	4	2	5	5
It means less trips to the doctor / can see results without going to the doctor	4	2	2	6
Accessible / makes the information more accessible	3	3	5	1
Good idea	18	16	19	19
<u>(Net) Source For Health Information</u>	<u>12</u>	<u>13</u>	<u>12</u>	<u>12</u>
Good source for health information	4	3	5	3
Will keep me better informed / help me understand myself better	4	4	1	6 B
Good for general health information / basic health information	3	3	4	3
<u>(Net) Will Improve The Healthcare System</u>	<u>9</u>	<u>4</u>	<u>8</u>	<u>12 A</u>
Will improve the health care system	5	3	5	6
Will free up more space for people with real health problems	3	1	3	4
Other positive (e.g. a step forward, converse with others in similar situations, reliable)	6	5	6	7
Helpful / useful	3	2	3	3

HTH-2013-00020

Base: Total Sample (n=364); Age 18-34 (n=96); Age 35-54 (n=129); Age 55+ (n=139)

Q1. When you think about this concept of online health please tell us your initial thoughts, ideas, feelings and reactions regarding this.

Despite the majority of positive mentions, the negative cannot be ignored. BC residents are concerned that this is a move to cut health care costs or that people may interpret their health information incorrectly. People also believe that this is somewhat impersonal as they prefer to talk to their doctor in person. Mentions of privacy concerns were somewhat limited but greater among those aged 35-54.

Online Health Initial Thoughts	Total Sample	Age 18-34 A	Age 35-54 B	Age 55+ C
<u>NEGATIVE</u>	<u>48</u>	<u>44</u>	<u>46</u>	<u>53</u>
<u>(Net) Health Care Concerns</u>	<u>13</u>	<u>15</u>	<u>11</u>	<u>15</u>
People shouldn't be their own doctor / I am against self-diagnosis	8	8	5	10
Other health care concerns (e.g. afraid they will use this as an excuse to cut funding)	4	2	3	5
Reduction in proper health care	2	2	3	2
Concerns about accuracy of information (incl. there is a lot of bad health info online)	2	3	2	2
<u>(Net) Impersonal</u>	<u>11</u>	<u>8</u>	<u>9</u>	<u>14</u>
I prefer to talk to a doctor about health	7	2	5	12 A
Impersonal / I prefer dealing with people	3	4	2	2
Other impersonal (e.g. make it harder to decide if a clinic or doctor is right for you)	2	3	2	1
<u>(Net) Internet Concerns</u>	<u>9</u>	<u>8</u>	<u>7</u>	<u>12</u>
Some people are not good with the internet / don't have the internet	5	3	5	6
Other internet concerns (e.g. sometimes the internet has too much health info which is hard to process, don't use the internet for health related issues)	4	5	2	6
<u>(Net) Privacy / Security Concerns</u>	<u>7</u>	<u>5</u>	<u>11</u>	<u>5</u>
Security concerns (incl. as long as there are sufficient security measures in place to avoid personal information access to unauthorized people)	5	5	7	3
Privacy concerns (incl. I would want my private information to be not accessible to anyone but me and my spouse)	4	1	7 A	2
Other privacy / security concerns (e.g. privacy concerns since I heard a US company is administering it)	1	1	1	1
Other negative (e.g. makes me think of bullying, low income people will get kicked to the curb)	5	6	5	3
Bad idea / I don't like it	4	3	2	7
Need more information / don't know much about it	4	5	2	6
Confusing	3	3	2	4
Concerns about ease of use	3	3	3	2
I have some concerns / don't completely trust it	2	2	2	3
This idea is not new / you can already get health information online	2	2	2	3

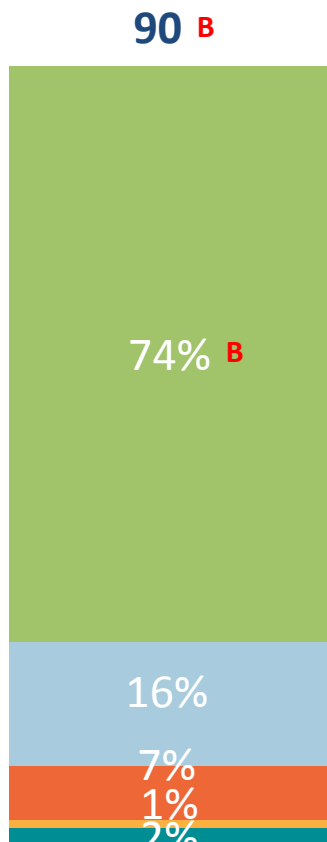
Base: Total Sample (n=364); Age 18-34 (n=96); Age 35-54 (n=129); Age 55+ (n=139)

Q1. When you think about this concept of online health please tell us your initial thoughts, ideas, feelings and reactions regarding this.

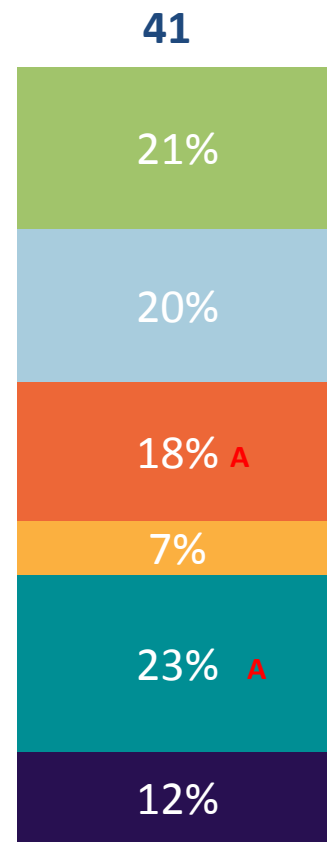
The importance of having access to health online is significantly higher than the importance of having access through a secure cell phone or mobile device.

Importance of Online Health Available Through Secure Computer

Top 2 Box



Importance of Online Health Available Through Secure Cell Phone/Mobile Device



55%
among 18-34, 47%
among 35-54

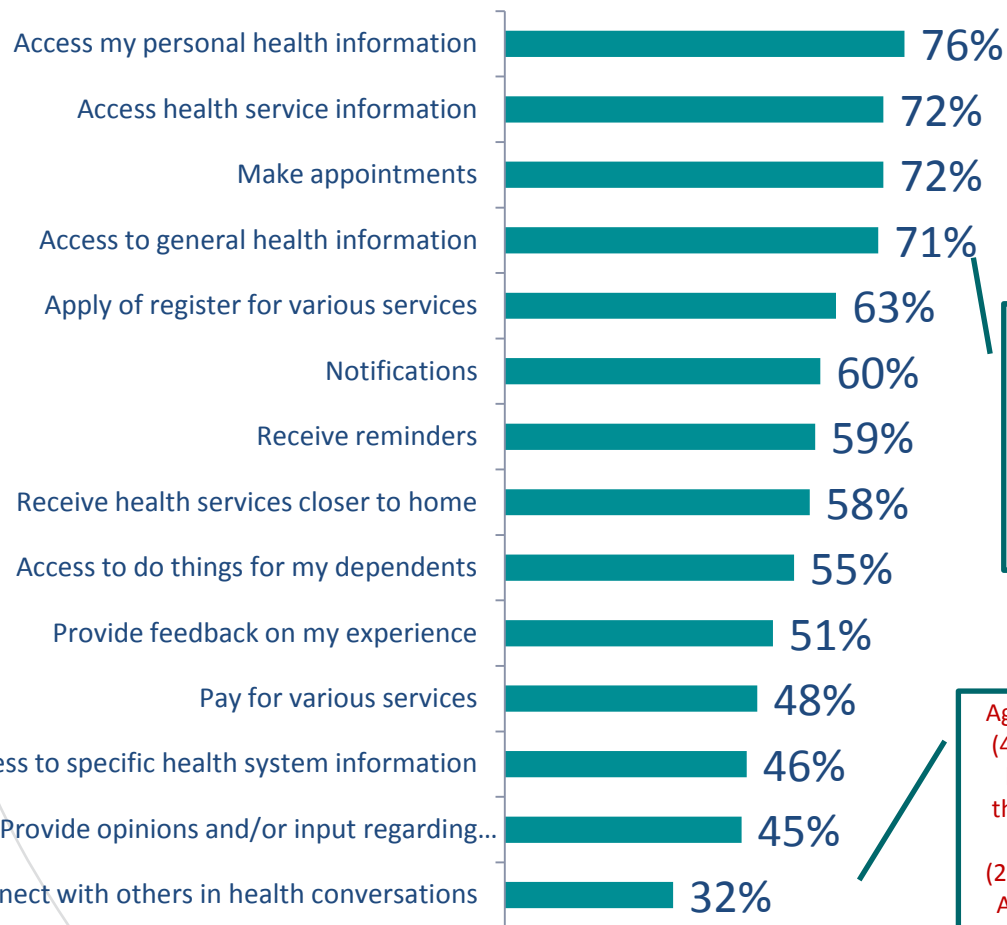
Base: Total Sample (n=364)

Q6. How important is it to you for online health to be available through a secure computer (i.e. website).

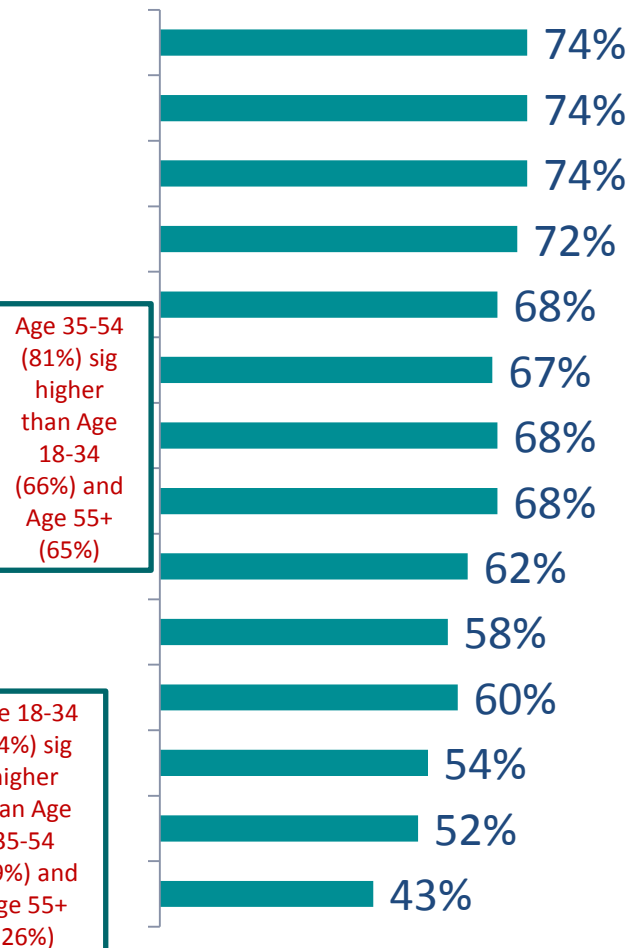
Q7. How important is it to you for online health to be available securely from a cell phone or mobile device.

Generally the priority and the impression of accessing health online are similar. Most items also rank highly with prioritizing and overall positive impression. Items that are on top of the list include accessing personal health information, general health service information, and making appointments/applying for registrations. Lower on priority and general impressions are providing input/feedback or connecting with others.

Priority of Access to Services Top 2 Box Scores (Very high/High Priority)



Impression of Access to Services Top 2 Box Scores (Very/Somewhat Positive)



Age 35-54
(81%) sig
higher
than Age
18-34
(66%) and
Age 55+
(65%)

Age 18-34
(44%) sig
higher
than Age
35-54
(29%) and
Age 55+
(26%)

Base: Total Sample (n=364)

Q3. If had the choice, how much of a priority would it be to be able to access or do the following electronically...

Q4. Please rate your **overall impression** towards having access to the following online health elements electronically.

There's strong support behind health online. BC residents agree that online health will be useful, keep them more informed, it makes sense, gets people talking about health, and empowers people to take more control of their health. It's weaker on being safe and secure.

Felling Towards Online Health

■ Does not describe it at all ■ Describe it somewhat ■ Describe it completely

Females (64%) sig higher than Males (48%)

This is useful



This will help me stay more informed about my health



This makes sense to me



This is relevant to me



These are appropriate services to be offered by our health system



This is an interesting way to think about managing my, or my family's,...



This will make me feel in more control of my, or my family's, health



This will help me stay more informed about relevant dialogue in health



This gives me more confidence that I can manage my, or my family's, health



This is believable



This is an interesting way to think about participating in dialogue in health



This is the way I like to think about managing my, or my family's, health



This initiative is important to me



This is clear, it is not confusing



This makes me think about the BC health system in a new way



This will make me feel better able to support the people I love



This is the way I like to think about participating in dialogue in health



This makes me feel good about our health system



Females (31%) sig higher than Males (21%)

This is safe and secure



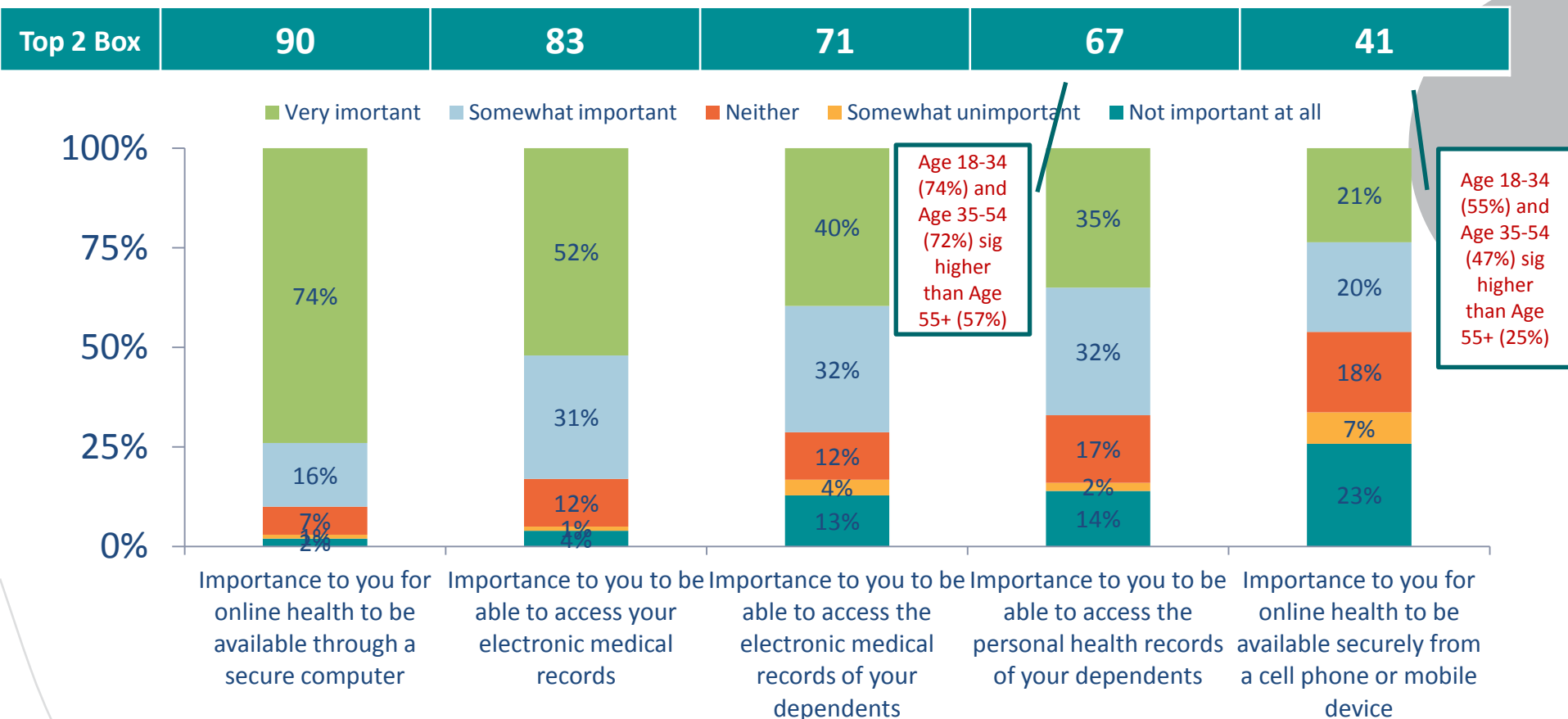
This makes me uncomfortable



I find this confusing



The importance of accessing health online via a secure computer is very important to all BC residents. The ability to access electronic medical records is also of high importance. Accessing electronic medical and personal health records of dependants is of slightly less importance but still very much supported by those ages 54 and under.



Base: Total Sample (n=364)

Q6. How important is it to you for online health to be available through a secure computer (i.e. website).

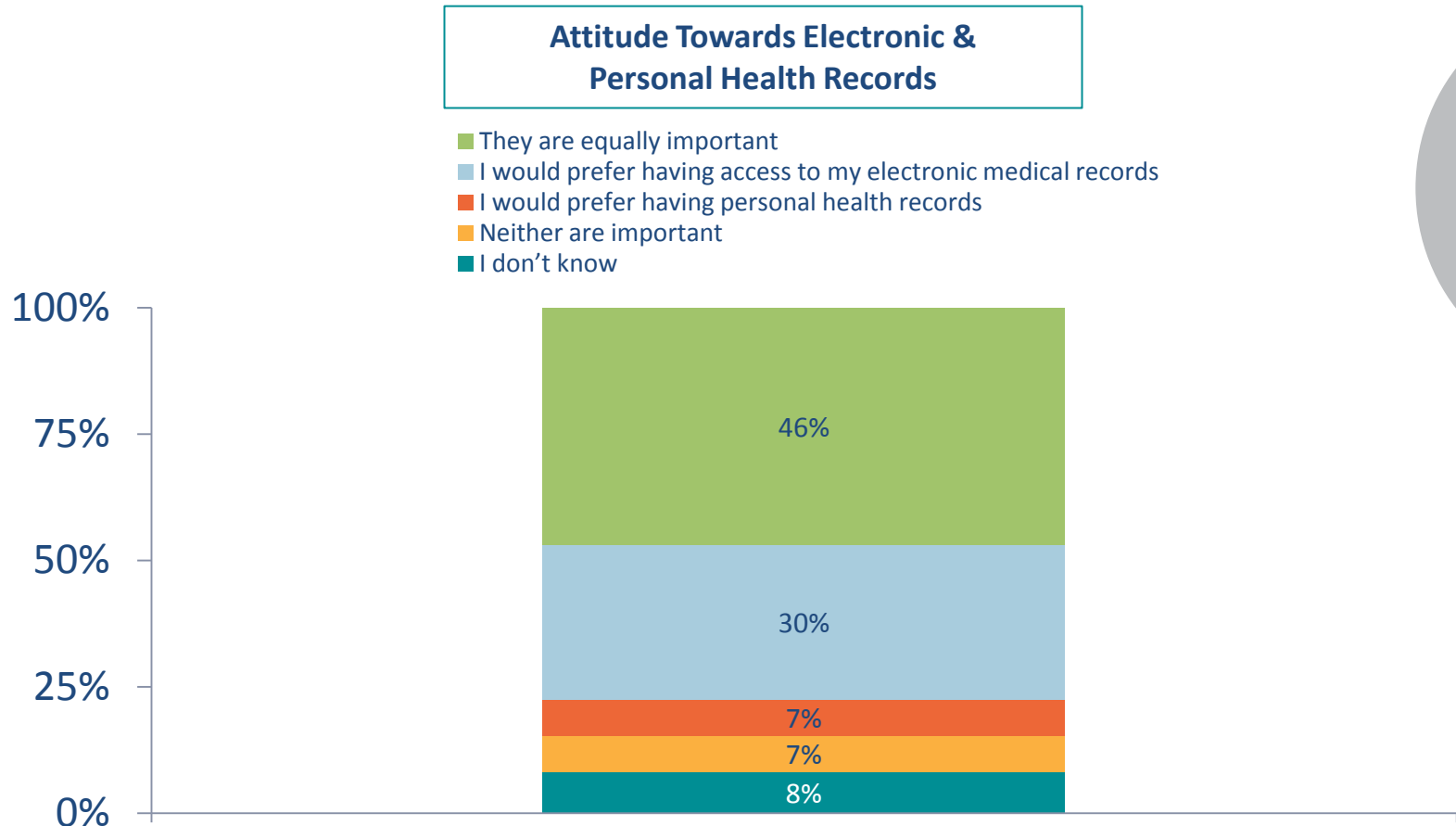
Q7. How important is it to you for online health to be available securely from a cell phone or mobile device.

Q10. How important is it to you to be able to access your electronic medical records?

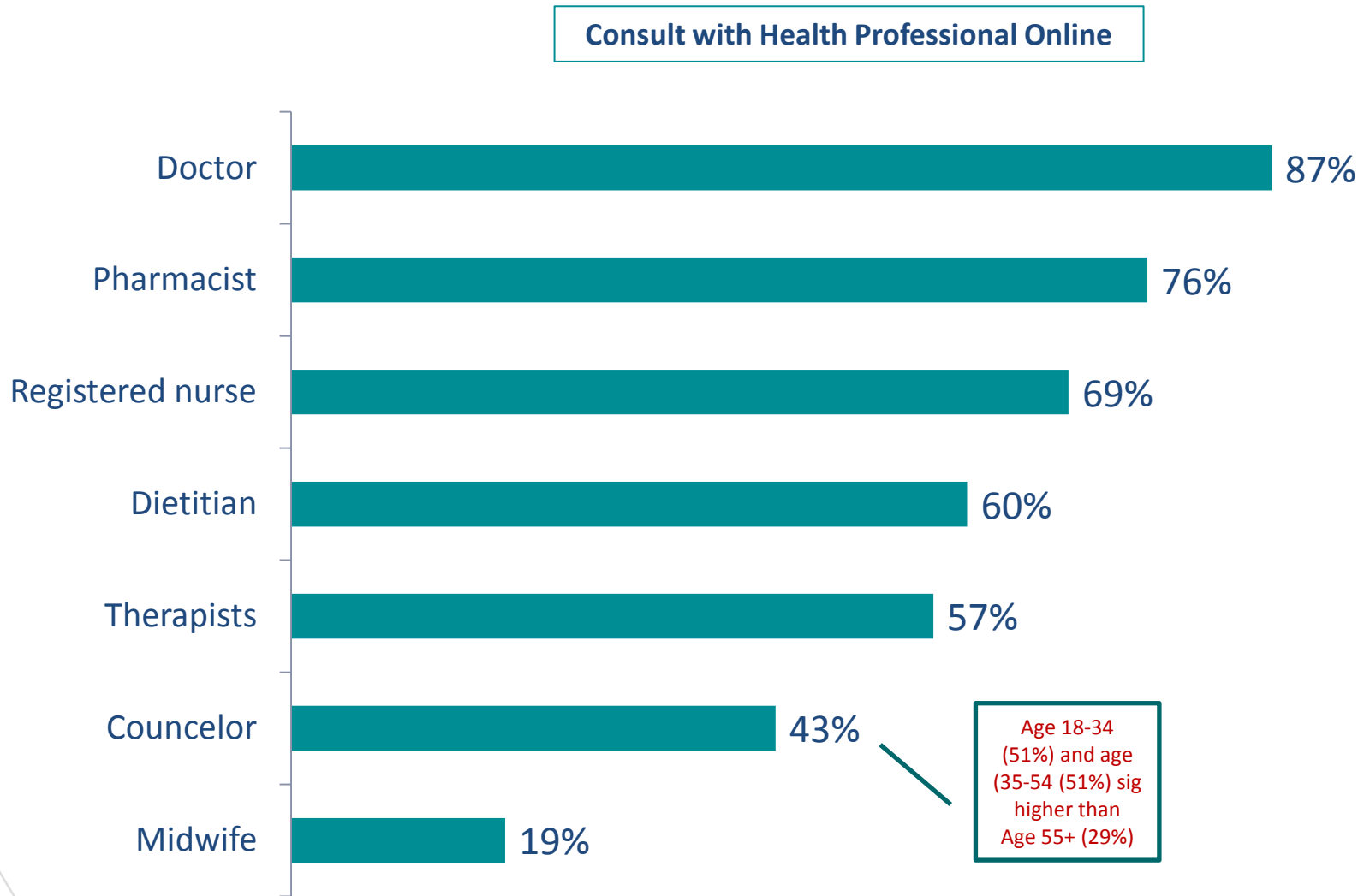
Q11. How important is it to you to be able to access the electronic medical records of your dependents?

Q14. How important is it to you to be able to access the personal health records of your dependents?

Approximately one-in-two of BC residents claim that personal and electronic health records are equally important. Approximately one-in-three residents would prefer having access to electronic medical records.



Doctors and pharmacists are the most desirable health professionals to consult with online, followed by registered nurses, dietitians, and therapists, respectively.



2

There is an opportunity to further inform residents about the benefits of health online.

BC residents associate the benefits of health online to convenience and accessibility. The younger demographic does not recognize the added benefits of accessing health online to the health care system. The older age groups are not seeing the potential benefits of health online like the younger groups.

Benefits of Online Health	Total Sample	Age 18-34 A	Age 35-54 B	Age 55+ C
(Net) Convenience	38	56 BC	40 C	24
Easy access / accessible	12	19 C	13	7
Reduces time waiting for service / results	10	8	15	8
Convenience	9	20 BC	8	3
Speed / faster	9	8	11	7
Saves travel / access from anywhere (incl. access from home, work, mobile)	7	14 BC	4	4
Other convenience (e.g. easy to use, access any time)	6	14 BC	5	3
(Net) Access To Health Information	35	26	36	40 A
(Subnet) Makes Health Information More Convenient	19	17	18	22
Access information quickly (incl. immediately, getting answers immediately)	11	6	12	14
Easy to get information (incl. easy access to health questions)	5	6	5	6
Get information any time / when you need it	3	5	3	2
Other access to health information (e.g. whether a doctor should be contacted)	6	5	4	8
Look up general health information (incl. educate oneself on medical issues)	5	2	6	7
Look up diagnostic or treatment information (e.g. surgery, symptoms, medications)	4	1	5	5
Access to information (incl. knowledge, keep me informed)	4	4	5	3
(Net) Access To Medical Records	17	19	18	14
(Subnet) Access To Your Own Records	15	19	16	13
Access to your own records	7	8	6	6
Convenient access to your own records (e.g. access any time, easy to access records)	4	6	5	3
(Net) Improves Health Care / Health Services	15	8	17 A	19 A
Benefits to health care system / health care providers (e.g. saves money, congestion)	5	2	5	9 A
Other improves health care system / services (e.g. access in remote areas)	5	2	9 A	4
More convenient access to health care (incl. easy access, fast access)	4	2	5	4
Can take control of your health care / empowering patients	3	2	2	4
(Net) Administrative Benefits	9	11	9	9
Other administrative benefits (e.g. reminders, pay online, check wait times)	7	7	6	6
Schedule appointments online	5	9	4	4
Nothing/ None	7	3	3	13 AB

HTH-2013-00020

Base: Total Sample (n=364); Age 18-34 (n=96); Age 35-54 (n=129); Age 55+ (n=139)

Q8. What do you think are the most important benefits of online health?

The perceived benefits of a personal health care records are most strongly associated with increasing patient autonomy and accountability, it's a good idea, and that it's benefits for health care providers.

Benefits of a Personal Health Record	Total Sample	Age 18-34 A	Age 35-54 B	Age 55+ C
(Net) Service Benefits	49	53 C	56 C	40
(Subnet) Increases Patient Autonomy & Accountability	21	23	22	19
Self-awareness (e.g. knowing about your health)	9	13 C	11 C	4
Increases patient autonomy / control (e.g. empowers patients)	6	4	9	5
Increases patient accountability (incl. increases patient involvement)	4	6	2	5
Self-awareness / monitoring can lead to better health / healthy habits	3	3	2	5
(Subnet) Communication / Sharing Of Information	15	13	19	12
More accurate / complete / better sharing of information	7	6	10	6
Other communication / sharing of information (e.g. information can be viewed by descendents, the information would be there if you were unable to communicate)	5	4	4	6
Sharing information with HCPs / with multiple HCPs	4	3	6 C	1
(Subnet) Convenient / Easy	11	13	12	9
Other convenient / easy (e.g. easy documentation, less road trips to the doctor)	6	9 C	9 C	2
Saves time (e.g. cuts down on wait times, immediate results)	5	3	5	7
Other service benefits (e.g. accessibility, data collection, lower healthcare costs)	7	5	9	6
Keep track (incl. keep track of health)	4	3	8 C	1
(Net) Reaction	21	22	20	20
Good / good idea	7	6	7	9
Other reaction (e.g. might be useful, interesting, more pros than cons)	7	9	5	7
(Subnet) Target	7	8	8	4
Other target (e.g. only benefits the patient, the younger generation, people who cannot communicate effectively)	4	4	5	2
Beneficial for people with chronic / multiple conditions	3	4	4	2
(Net) Benefits For HCPs	17	17	19	15
(Subnet) HCPs Can Conduct Better Assessments	8	11	6	8
HCPs can generate better / more accurate diagnoses	4	5	2	4
Sharing information with HCPs / with multiple HCPs	4	3	6 D	1
(Net) Health Benefits	11	15 B	6	14 B
Improved health (e.g. take better care of oneself, motivation to stay healthy)	5	6	3	6
Nothing/ None	15	10	10	22 AB

HTH-2013-00020

Base: Total Sample (n=364); Age 18-34 (n=96); Age 35-54 (n=129); Age 55+ (n=139)

Q13. Now we are going to ask you a few questions about personal health records. What do you think are the potential benefits?

Perceived benefits of health services closer to home are that it is convenient and that it is great for people who have mobility issues or live in remote areas. Saving time is more of a benefit to those aged 35 and up.

Benefits of Access to Health Services Closer to Home	Total Sample	Age 18-34 A	Age 35-54 B	Age 55+ C
(Net) Service Benefits	62	59	68	58
(Subnet) Convenient	41	42	43	39
(Sub-subnet) Fast / Saves Time	24	18	26	26
Faster / saves time (unspec.)	9	3	12 A	10 A
Other faster / saves time (e.g. instant information, quicker diagnosis/treatment)	5	5	5	6
Short / no wait times	5	5	6	4
Faster access to health care (e.g. sometimes it takes too long to get appointment)	5	3	5	6
(Sub-subnet) Being At Home / No Travelling	8	7	9	6
Not having to travel (incl. travel can be made difficult due to weather)	5	6	6	4
Convenient / Easy (unspec.)	7	15 BC	5	3
Access / Easier access (e.g. greater access to health services)	5	7	5	4
Other convenient (e.g. always available, can get the info wherever I am)	4	3	5	3
Other service benefits (e.g. info on tests and prescriptions, more appointment times)	10	13	8	9
Save money (e.g. saves system money, lower costs)	9	7	9	10
(Subnet) Quality Of Care	8	5	8	9
Other quality of care (e.g. alleviate pressure on clinics/hospitals)	5	2	6	6
Increased access to specialists	3	3	2	4
Information / education	7	4	9	8
Increases patient accountability / involvement / proactivity	4	4	5	4
Less / no need to go to doctor's office / emergency room unnecessarily	4	3	5	5
Health benefits (e.g. better health, less stress)	4	5	4	2
(Net) Reaction	27	29	28	26
(Subnet) Target	16	16	18	14
Great for people in remote / rural areas	9	7	12	7
Other target (e.g. for patients with on-going conditions, those who have no form of transportation, for areas with doctor shortages)	7	9	7	5
Great for individuals with mobility issues (e.g. elderly, immobile, homebound)	3	2	4	2
Other reaction (e.g. friendly, might be helpful to some, sounds okay)	8	8	8	8
Nothing/ None	12	7	8	19 AB

HTH-2013-00020

Base: Total Sample (n=364); Age 18-34 (n=96); Age 35-54 (n=129); Age 55+ (n=139)

Q17. Now we are going to ask you a few questions about access to health services closer to home. What do you think are the potential benefits?

3

**There are some
challenges that lie
ahead.**

Among those with negative impressions, the main concerns with most health online items were regarding security, privacy, and technology concerns.

	Personal health info	Health service info	Make appts	General health info	Apply or register	Notifications	Receive reminders	Health services closer to home	Do things for my dependent	Provide feedback	Pay for services	Specific health system info	Provide opinions	Connect with others
	n=31 A	n=21 B	n=27 I	n=29 C	n=29 K	n=25 J	n=29 H	n=31 G	n=27 N	n=29 F	n=28 L	n=31 D	n=32 M	n=47 E
NET Security of information/ Privacy	94 CDEF GHIJ MN	90 DEFG MN	78 DEFM	72 DEM	72 DEM	68 E	72 DEM	68 E	59	48	82 DEFM	45	44	43
Not confident that my information will remain private.	81 CDEF GHIK MN	57 D	48 D	48 D	48 D	60 DEM	48 D	55 D	41	38	46	23	31	34
Not confident that the technology systems are sufficiently protected from security threats	61 DEFM	52 DEF	44 DE	45 DEF	45 DEF	40 E	48 DEF	52 DEF	41 E	21	46 DEF	19	28	15
Computers and technology are fallible.	52 DEFM	57 DEFM	44 DEM	55 DEFM	45 DEM	40 EM	52 DEFM	55 DEFM	33 E	25	39 EM	19	16	13
Not confident that my personal health information provided online will be accurate.	23	62 ADEFL MN	44 EM	41 EM	38 EM	48 ADEF MN	38 EM	48 ADEF MN	22	21	32 E	23	16	11

There are also concerns with BC residents around making appointments and accessing general health information due to limited internet accessibility and health literacy.

	Personal health info	Health service info	Make appts	General health info	Apply or register	Notifications	Receive reminders	Health services closer to home	Do things for my dependent	Provide feedback	Pay for services	Specific health system info	Provide opinions	Connect with others
	n=31 A	n=21 B	n=27 I	n=29 C	n=29 K	n=25 J	n=29 H	n=31 G	n=27 N	n=29 F	n=28 L	n=31 D	n=32 M	n=47 E
NET Equal Access	26	48	63 ADEM	66 ADEFLM	45	52 A	41	55 A	41	38	39	35	28	38
Not confident that all British Columbians have equal health literacy	26	43	41	62 ADEFH KLMN	34	44	34	39	26	28	29	29	25	32
Not confident that all British Columbians will have equal access to internet services	19	38	48 ADEF	45 ADEF	41	48 E	31	39 E	37	21	32	19	25	17
Inequitable access or inequitable health literacy will create inequities in the quality of care for BC citizens.	16	33 E	37 EF	31 EF	24 E	40 AEF	28 E	45 AEF	22	10	29 E	26 E	25 E	6

Complexity and intimacy concerns were greater with accessing general health information, applying or registering, health services closer to home, or providing opinions.

	Personal health info	Health service info	Make appts	General health info	Apply or register	Notifications	Receive reminders	Health services closer to home	Do things for my dependent	Provide feedback	Pay for services	Specific health system info	Provide opinions	Connect with others
	n=31 A	n=21 B	n=27 I	n=29 C	n=29 K	n=25 J	n=29 H	n=31 G	n=27 N	n=29 F	n=28 L	n=31 D	n=32 M	n=47 E
NET Too Complex	13	24	15	34 AEL	28	28	21	35	26	17	11	35 AEL	50 ABEFHL	13
It's too complex to understand	10	14	15	34 AEFLN	17	28 L	17	32 AEFLN	11	10	7	29 L	41 ABEFH IKL	11
It's too complex to access	6	24	7	14	28 AEIL	20	17	26 AEL	22	14	7	26 AEL	22	6
I don't think my health care provider(s) will be willing to contribute to or support me	10	24	19	28 L	14	28 L	10	19	11	31 AEHL	7	23	19	11
NET Other	6	5	22	14	7	24	17	26 ABK	30 ABK	10	11	32 ABFKL	16	40 ABCFHKLM
Prefer doing this in person	0	0	11	0	0	4	3	19 ABCDE FHLM	4	3	0	0	0	0
Not relevant	3	0	0	0	0	0	0	0	7	0	0	10	0	4

Privacy and security are the number one concerns regarding personal health records, especially among those ages 35 and up.

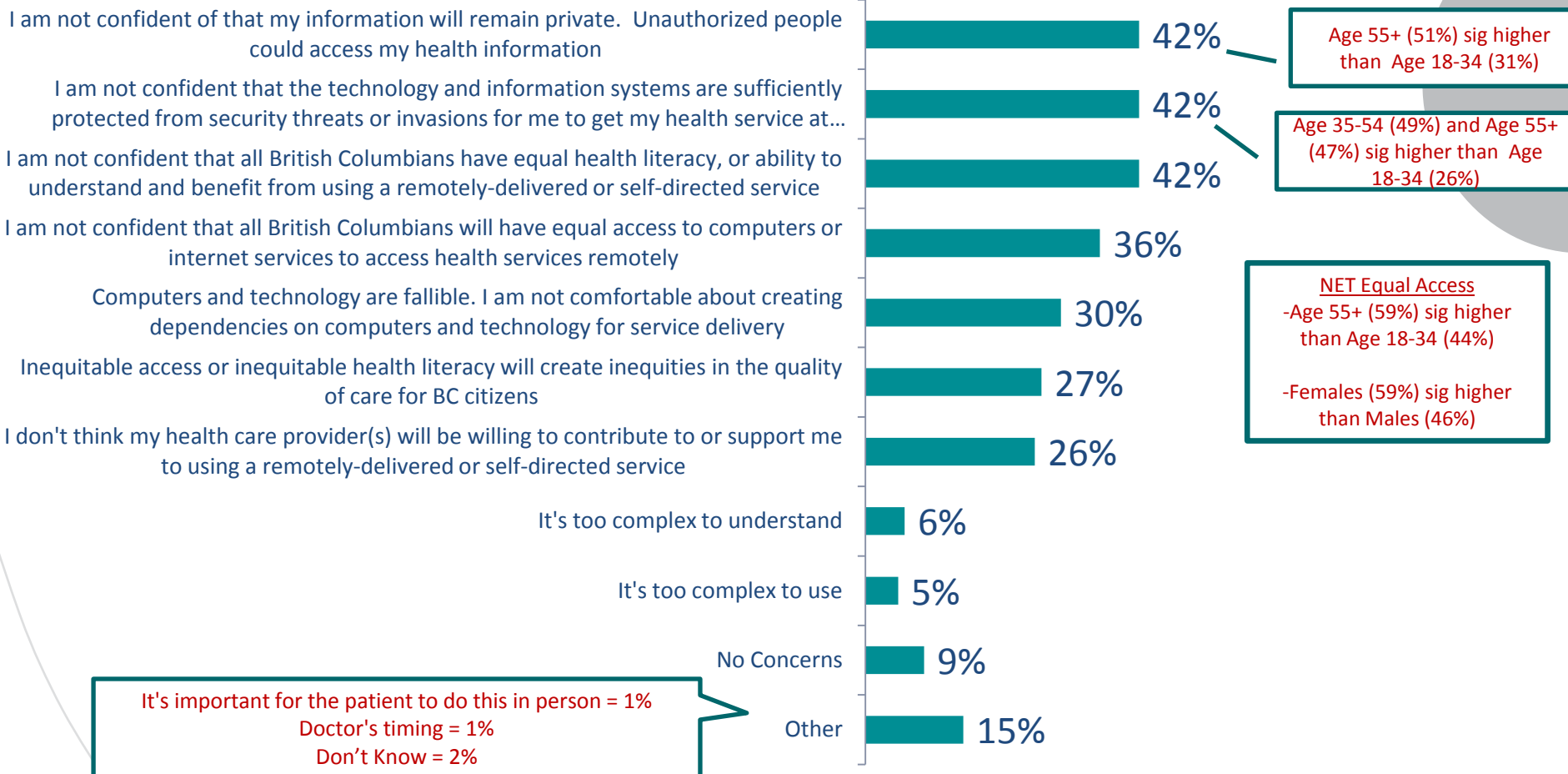
Concerns with Personal Health Records	Total Sample	Age 18-34 A	Age 35-54 B	Age 55+ C
(Net) Privacy	32	33	33	30
Privacy (unspec.)	10	11	12	8
Potential abuse of medical information / information could fall into the wrong hands (e.g. medical records in the hands of health insurance companies)	6	5	4	8
Others accessing my medical records	6	3	9 A	4
Who has access to my data?	5	6	3	5
Other privacy (e.g. would want to keep it private, patient should be able to share records with spouse and other family members)	4	3	3	5
Confidentiality (unspec.)	3	5	3	1
(Net) Security	29	15	34 A	34 A
Security (unspec.)	22	10	27 A	25 A
Unauthorized access of medical records* double net with Privacy)	5	1	4	8 A
Other security (e.g. could be corrupted, hackers getting important medical information, system crashes)	4	3	5	4
(Net) Quality of Data	7	9	5	7
Accurate data (e.g. not recorded properly, patients could falsify their own records)	6	9	4	6
Other quality of data (e.g. people won't keep it up to date, not consistent record keeping)	1	1	1	2
(Net) Health Care	5	6	4	6
Impact my quality of health care (e.g. not having professional advice, avoid self diagnosis, some doctor at the end of a comptuer wouldn't know me)	4	3	2	6 B
Other health care (e.g. would not be used by professionals)	2	3	3	1
Other	7	6	5	10
Nothing/ None	23	28	23	19

Similar to personal health records, the main concerns are regarding security and privacy issues.

Concerns with Electronic Medical Records	Total Sample	Age 18-34 A	Age 35-54 B	Age 55+ C
<u>(Net) Security</u>	47	53	46	43
Security (unspec.)	34	32	37	33
Hacking	9	16 B	6	8
Loss or unavailability of data (e.g. system crashes, records lost due to glitches, needs proper back-up)	5	8	2	6
Other security (e.g. security of my family, data not sent elsewhere, sabotage)	2	2	3	1
<u>(Net) Privacy</u>	38	34	42	37
<u>(Subnet) Access To Information</u>	23	22	23	23
Other people accessing my information	7	9	8	6
Information could fall into the wrong hands (incl. unsavoury viewers, people who would sell the info)	6	5	8	6
Access by unauthorized / inappropriate people (incl. outside of me and my doctors)	5	4	2	9 B
Other access to information (e.g. who will have access?, should have to give permission for access)	5	3	6	4
Privacy (unspec.)	14	16	14	14
Confidentiality (unspec.)	4	5	6 C	1
Other privacy (e.g. expect privacy breaches if stored in the US because of Patriot Act, people using my info in a way I'm not comfortable with)	1	0	2	1
Accuracy of information (e.g. data entry errors, will it be up to date?)	7	7	5	9
<u>(Net) Negative Effect On Patient Experiences</u>	4	3	4	5
Patients may not know how to interpret their own info / interpret incorrectly	3	2	3	3
Other negative effect on patient experiences (e.g. out-of-date records killing citizens, practitioner editorializing and future practitioner will be less objective)	2	2	1	2
Information being used against you (e.g. insurance companies, affecting employment)	3	2	2	6
Nothing/ None	18	21	19	16

The main concerns with having health services closer to home are regarding privacy, technology, and an equality of health literacy among BC residents.

Concerns with Health Services Provided Closer to Home



4 + 5

**Key opportunity/challenges
among sub-groups despite
the limited differences
between various sub-groups.**

The younger groups place the greatest priority on acquiring information, applying/registering for various services and accessing and doing things for their dependants. The youngest group (18-34) place greater priorities than the other age groups with accessing my personal health information, paying for services, accessing specific health information, providing input on the health care system and connecting with others. Priority is generally lower among those ages 55 and over.

Priority of Health Online Components Top 2 Box (Very High/High)	Total Sample A	Age 18-34 B	Age 35-54 C	Age 55+ D
Access my personal health information	76	80	75	75
Access health service information	72	71	72	72
Make appointments	72	74	75	67
Access to general health information	71	66	81 BD	65
Apply or register for various services	63	73 D	69 D	50
Notifications	60	64	60	56
Receive reminders	59	56	65	56
Receive health services closer to home	58	58	61	55
Access and do things for my dependents	55	66 D	58 D	45
Provide feedback on my experience	51	52	51	50
Pay for various services	48	60 CD	47	41
Access to specific health system information	46	57 cD	45	39
Provide opinions and/or input regarding BC's health system	45	53 cd	42	42
Connect with others in health conversations	32	44 CD	29	26

Base: Total Sample (n=364)

Q3. If had the choice, how much of a priority would it be to be able to access or do the following electronically...

Priorities are higher among those who have been a patient or the dependent has been a patient in the past year, than those who have not been a patient.

Priority of Health Online Components Top 2 Box (Very High/High)	Has Been a Patient (n=280)	Depend- ents/ Close family (n=203)	None of These (n=37)
	A	B	C
Access my personal health information	78 c	77 c	62
Access health service information	73	72	59
Make appointments	73	73	59
Access to general health information	71	74 c	59
Apply or register for various services	64 C	65 C	46
Notifications	60 c	62 c	46
Receive reminders	59	61 c	46
Receive health services closer to home	58	59	51
Access and do things for my dependents	56 C	59 C	32
Provide feedback on my experience	51	50	49
Pay for various services	50	51	38
Access to specific health system information	48	41	41
Provide opinions and/or input regarding BC's health system	49 C	43 c	27
Connect with others in health conversations	33	31	24

Base: Total Sample (n=364)

Q3. If had the choice, how much of a priority would it be to be able to access or do the following electronically...

Those between the ages of 35-54 are also more likely to use the internet for various (e) services than those aged 55+ and in some cases, more than those aged 18-34.

Usage of (e)Services	Total Sample	Age 18-34	Age 35-54	Age 55+
	A	B	C	D
Researching online, accessing information	88%	81	95 BD	87
Online Banking	86	89	89 d	82
Online Shopping	74	85 D	78 D	64
Connecting with others (social media)	74	76 d	82 D	65
Registering/applying/paying for stuff	62	64 d	71 D	51
Online Gambling	11	14	12	9
eInsurance	3	2	5	2
Researching online, accessing information	88	81	95 BD	87

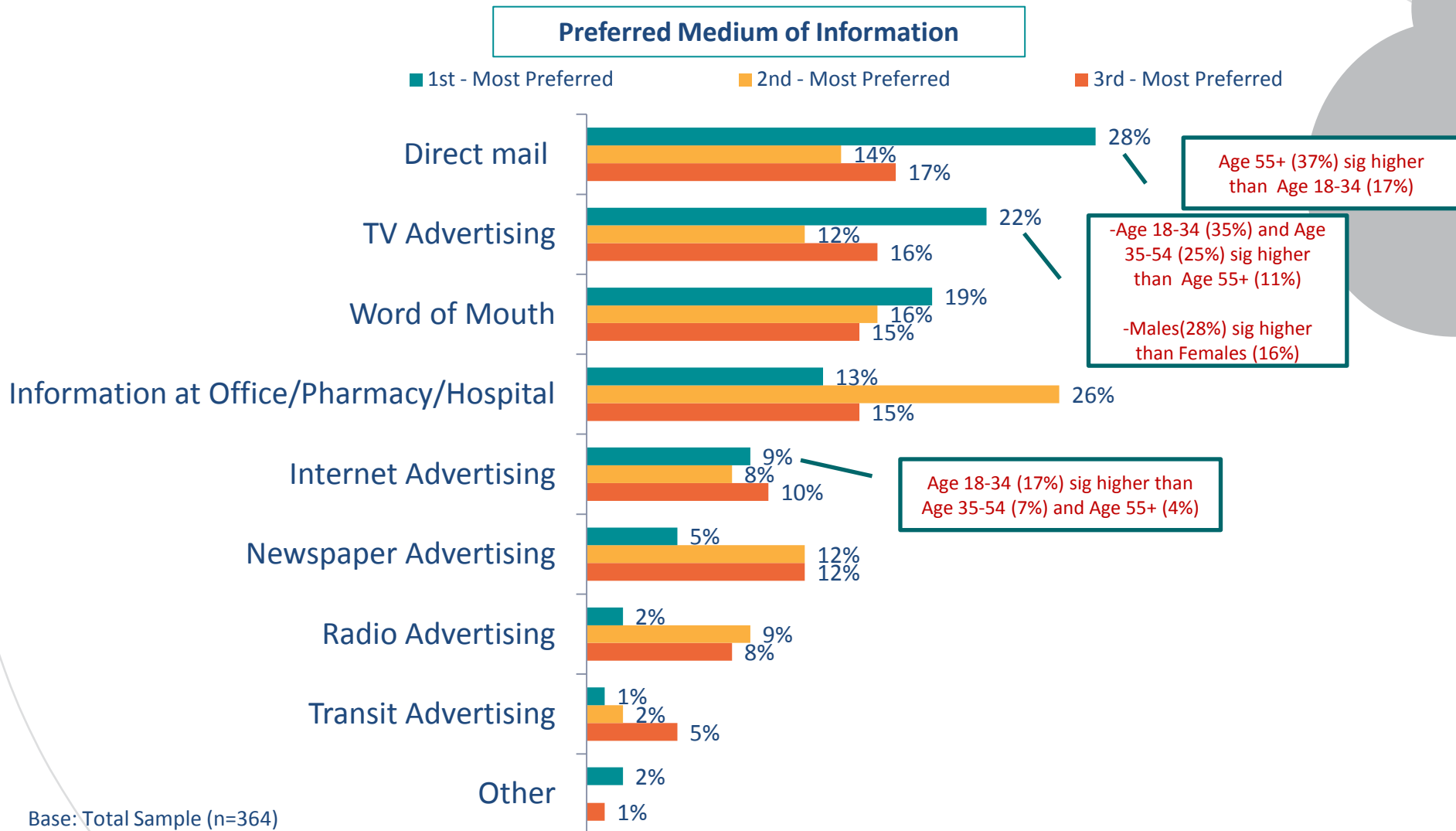
Approximately one-in-five residents are interested in receiving non-emergency medical health such as prescription refills, test results, or education. Those aged 35-54 are more interested in preventative medicine.

Health Services Interested in Receiving in Home	Total Sample	Age 18-34 A	Age 35-54 B	Age 55+ C
<u>(Net) Medical Services</u>	55	54	57	53
<u>(Subnet) Non-emergency Medical Help</u>	19	18	21	19
Prescription refills	5	6	4	5
Test results	4	3	4	6
Other non-emergency medical help (e.g. physicals, monitoring, prescription delivery)	4	4	5	4
Out of hospital medical care (e.g. massage, post-natal visits, after-surgery care)	4	3	5	3
Support services (e.g. homecare, autism support, child development)	3	2	3	4
<u>(Subnet) Medical Education / Outreach</u>	18	20	17	17
Health education (e.g. side effects of medicines, info on current medical condition)	9	6	8	11
Medical professionals who can answer questions	6	7	8	3
Consultation with my doctor	5	7	3	5
<u>(Subnet) Administrative Services</u>	15	13	15	17
Accessing my own medical records	10	7	12	10
Booking an appointment	5	3	3	7
Other administrative services (e.g. online services, reminders for appts, payments)	3	5	1	3
Other medical services (e.g. immunization, blood test, psychiatric evaluation)	7	7	5	7
House calls (incl. house visits for ill children)	5	4	2	8 B
Diagnosis (e.g. medical examination, self-diagnosis)	5	3	5	5
<u>(Subnet) Preventative Medicine</u>	5	2	8 A	4
Diet and exercise advice	3	2	5	3
Other preventative medicine (e.g. online tracking, stress reduction, anxiety help)	2	1	5 C	1
Everything	7	6	6	7
<u>(Net) Means of Communication</u>	5	4	9 C	3
Other means of communication (e.g. email, phone calls)	4	3	5	2
Videoconferencing	3	2	5	2
Nothing/ None	19	21	13	22 B
Don't Know/ Refused	17	16	21	14

6

**A multi-media
campaign is likely
needed.**

A multi-media communications strategy will need to be in place in order to reach the target effectively. Older age groups prefer direct mail while the younger age groups prefer alternative channels like TV or word of mouth. However, having information at the doctor's office, pharmacy, and hospitals would also be beneficial and preferred.



Base: Total Sample (n=364)

Q21. How would you like to be informed about new information, tools, and services that are developed as it relates to the health care system. Please choose according to your most preferred, second most preferred and third most preferred ways of being informed.

Next Steps

1

Continue with online health. Overall, accessing online health is initially well received with the most resistance coming among those 55+. Overall impressions are good and there does not appear to be any major red flags from a citizen perspective with the health components at this time.

2

The middle age group 35-54 will likely be the drivers of online health. They are generally tech savvy, avid users of online services (i.e. online banking), and place very high priority on the majority of the online health key components (i.e. accessing information, apply for services, accessing their dependents information). The main concerns that will need to be addressed with this group are security and privacy concerns.

- ⇒ That being said, the age group 18-34 is also very important as they also place high priority on online health components and are more likely to participate in health dialogue online.
- ⇒ The 55+ will be the challenging group to get support from as they are concerned with privacy, security, computer/internet/technology capabilities, and like the idea of talking to your health care provider one-on-one.



3

Formulate the messaging and brand strategy. How can the messaging and brand address the concerns around privacy, security, health literacy, and technology so that most residents feel comfortable with this concept of online health?

⇒ How to approach the 55+ group will also need to be addressed given their perceptions and attitudes differ from the younger groups.



4

A multi-touchpoint campaign is likely needed to reach the BC population effectively. When it comes to personal health, residents will want to feel well informed of any changes taking place. As such, this will require several accessible channels of communication ranging from direct mail and in-person for 55+ to TV or internet for ages 54 and under. Making sure that this multi-touchpoint strategy is reaching the target audience with the appropriate message is critical.

5

Avoid any branding/communication errors. Once the messaging and brand strategy has been identified, it is imperative that the initial introduction of online health to BC residents is clear, concise, and well received by most people. Ipsos ASI can help the BC Ministry of Health improve the communication messaging while minimizing any negative reactions by:

- ⇒ Pretesting the communications strategy among the appropriate groups to refine and improve the overall messaging and identify any negative reactions.
- ⇒ Working with you to identify the appropriate media plan and strategy to effectively reach your target.
- ⇒ Having a more effectively spent communications budget.



Thank you!



For additional information, please contact:

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Sample

Sample Profile

	Total Sample (n=364)
Male	50
Female	50
Age 18-24	5
Age 25-34	21
Age 35-44	14
Age 45-54	21
Age 55-64	21
Age 64+	17
Northern BC	7
The Interior/Kootenays	18
Fraser Valley	12
Vancouver Island	14
Greater Vancouver	50
Urban area	73
Rural area	23
Remote area	4

	Total Sample (n=364)
Employed Full-time	38
Employed Part-time	14
Self-employed	9
Homemaker	9
Student	5
Other	25
Did not complete high school	2
High school	20
Some college/university	32
Completed college/university	42
Post-graduate or Professional	8
Under \$70,000	63
\$70,000 - \$99,999	21
\$100,000 - \$119,999	9
\$120,000 - \$149,999	3
\$150,000 or over	3
Children living at home	26
No children living at home	74