It is people not policies to deal with EHR privacy problem

As this is a digital era, electronic health records are being implemented in many countries. [1] Electronic health records are digitization of patients' data, providing many benefits to not only researchers but also the health system, because of the quick access and the sufficient information. [2] However, with technologies innovating and amount of electronic health records rapidly growing, ethical issues attract attention of both researchers and policymakers, [3] of which the privacy problem is one of the most concerned one. Many countries or areas have put forward policies to cope with privacy problem, but only policies are not enough when tackling such a complex problem, people around these policies are more important.

It is everyone's responsibility and civil rights to protect his privacy on his own. Policies cannot substitute people to determine whether their information should be collected. Health data are one kind of the most private information, because it is all about a unique person's body and most probably, spiritual and physical situation [4], even genetic information [5]. People are always bothered by others getting his or her personal information without being informed, but they don't pay equal attention on their health records. Questions such as what their health data include, who can access these data, what are these data for, are not frequently noticed in the protocols when health data are being collected. When they think their privacy rights are infringed, maybe the data provider, that is, the patients themselves, should be partly to blame because they don't find corresponding terms in the protocol but they actually are there.

It is stakeholders who actually take actions and respond to policies. Policies are only standards that generally standardize stakeholders' actions, but what they will do are somewhat kind of uncertainty. Most of the policies are requiring them to do or not to do something in a range of concreteness. If the policies are detailed and stringent, it could be too rigid and not able to deal with other problems. But if the policies are ambiguous, stakeholders don't pay enough attention and effort to improving their relevant measures to meet the policy-given standards because of their unclear definition. [6] Although there will be meetings before a new policy is put forward,

what stakeholders will do under the new policy is still worth considering. To what extend they agree with the legalized but ambiguous standards depends on how overlap their ambitions are. [7]

It is what policymakers should do after a policy is put forward that matters. To make their decision, the implementation of it, the feedbacks from people after its implement and the possible improvements of it are aspects to be thought of. Current privacy policies are pioneers and they need updates in the near future, but there are hardships arising. Electronic health data can be gathered from a variety of sources and be used in a range of ways [4], which add to the difficulty of clearly defining on what data should be protected by privacy policy. Policymakers need to be careful because where the health industry will go is somewhat depends on what the policies are, and the progress in turn affects the policies.

Policies are standards that urge people to do and not to do something, define rewards and punishments relatively. It itself is not sufficient to tackle privacy problem because it is people who face the problem and fight against it.

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