

# One-step, three-factor authentication with in-ear EEG

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## Abstract

We propose the first research study of one-step three-factor authentication. Specifically we seek to demonstrate its feasibility and quantify its performance using Ear EEG (electroencephalogram). By performing a single mental task, our user will be able to present three authenticators at once – a knowledge factor (their chosen secret thought and/or mental task), an inherence factor (their brainwave signals), and a possession factor (the EEG sensing earpiece that is custom-fitted to their ear). We will build the custom-fit Ear EEG earpieces and conduct an experimental study to evaluate the accuracy and usability of this authentication method.

## 1 Introduction and Motivation

It is well appreciated by experts and end-users alike that strong authentication is critical to cybersecurity and privacy, now and into the future. Unfortunately, news reports of celebrity account hackings serve as regular reminders that the currently dominant method of authentication in consumer applications, single-factor authentication using passwords or other user-chosen secrets, is faced by many challenges. Major industry players such as Google and Facebook have been strongly encouraging their users to adopt two-factor authentication (2FA). However, the need for users to submit two different authenticators in two separate steps has frustrated wide adoption, due its additional hassle cost to the users. For instance, the popular Apple iPhone has already implemented the necessary technologies to support device unlock using either a user-selected passcode or a fingerprint. Therefore the device could easily support a two-step two-factor authentication scheme if desired. However, it is easy to understand why users would balk at having to enter

a passcode *and* provide a fingerprint each time they want to unlock their phone.

In previous work, “one-step two-factor authentication” has been proposed as a new approach to authentication that can provide the security benefits of two-factor authentication without incurring the hassle costs of two-step verification [1]. By employing consumer-grade EEG (electroencephalogram) sensing technologies, it was demonstrated in a 2013 passthoughts study that a user can submit both a knowledge factor (i.e., secret thought) and an inherence factor (i.e., brainwave signal unique to the individual) in a single step by performing a single mental task [2]. Additionally, the robustness of this method against impersonation attacks was demonstrated, including conditions where the attacker may have learned the target’s secret thought and/or secret task [3].

In the present proposal, we will undertake, to the best of our knowledge, the first ever study of one-step three-factor authentication. In computer security, authenticators are classified into three types: knowledge factors (e.g., passwords and PINs), possession factors (e.g., physical tokens, ATM cards), and inherence factors (e.g., fingerprints and other biometrics). Because three-factor authentication (3FA) requires the user to submit one distinct instance of each type of authenticator, it represents the strongest level of authentication security possible.

We propose the use of custom-fit Ear EEG technology as the platform for investigating the feasibility, performance, and usability of one-step three-factor authentication. In addition to the same knowledge factor and inherence factor as in our previous work, the user can submit in the same step the possession factor in the form of the EEG-sensing ear-piece(s) that are custom-fitted to and worn in their ear. These earpieces can serve as physical tokens in the same way as bank ATM cards and wearable hardware tokens. Furthermore, because the earpieces are custom-fitted to each individual, they will likely not be able to produce good electrical impedances when worn by a different individual.

## 2 Related Work

The use of EEG as a biometric signal for user authentication has a short history. In 2005, Thorpe et al. motivate and outline the design of a passthoughts system, where, rather than typing a password, users authenticate by thinking of a passthought [6]. Since 2002, a number of independent groups have achieved 99- 100% authentication accuracy using multi-channel sensors

placed on the scalp [7-10]. In 2013, one group showed that 99% authentication accuracy can also be achieved using a consumer-grade single-channel sensor [2]. In particular, the lack of signal diversity from multiple EEG channels can be overcome by allowing the users to choose their own personalized passthoughts (e.g., sing their favorite song in their head). There are two significant consequences of this result. First, the passthoughts approach is no longer constrained by the high cost ( $\sim \$10k$ 's) and low usability (gel-based electrodes; aesthetic challenges of an EEG cap) of medical-grade multi-channel devices. Second, because users can choose and easily change their secret mental task, this approach can support one-step two-factor authentication [1] via the simultaneous presentation of the inference factor (brainwave signatures due to the unique folding structures of the cortex) and the knowledge factor (the secret mental task).

Research in in-ear EEG is only several years old. Nonetheless, the concept has attracted a lot of attention because of the discreetness factor of in-ear EEG over traditional scalp-based EEG. A research team at the Imperial College London and Aarhus University published a landmark paper in 2011 that introduced the concept of in-ear EEG, demonstrating for the first time the feasibility of recording brainwave signals from within the ear canal [11]. Follow-up work from the same group demonstrated its ability to produce signal-to-noise ratios comparable to those from conventional EEG electrode placements, robustness to common sources of artifacts, and use in a brain-computer interface (BCI) system based on auditory evoked potentials and visual evoked potentials [12-14]. Our own 2016 study [4] was the first to merge these two streams of work, using in-ear EEG signals for user authentication with a consumer-grade device. United Sciences is currently developing a consumer hearable called The Aware that will measure EEG from the ear [15]. Behavioral authentication methods such as keystroke dynamics [16] and speaker authentication [17] can be categorized as one-step two-factor authentication schemes. In both cases, the knowledge factor (password or passphrase) and inference factor (typing rhythm or speaker's voice) are employed. In contrast, the Nymi band [18] supports one-step two-factor authentication via the inference factor (cardiac rhythm that is supposed to be unique to each individual) and the possession factor (the wearing of the band on the wrist). However, as far as we know, no one has proposed or demonstrated a one-step three-factor authentication scheme.

### 3 Proposed project

We propose the first ever research study on one-step three-factor authentication. The study will yield a number of novel contributions to the literature. First, we expect to demonstrate the feasibility of presenting three authenticators in a single step. Second, we will quantify the performance accuracy of user authentication using custom-fit in-ear EEG hardware. Third, we can quantify the relative performance of signals captured from different locations within the ear. Fourth, we will evaluate the effectiveness of new classes of mental tasks for EEG-based authentication. Fifth, we will evaluate the usability of custom-fit in-ear EEG hardware.

### 4 Research plan

There will be four key components and major research tasks to this proposed study: (i) design and build custom-fit hardware, (ii) design and implement authentication tasks, (iii) experimental platform and protocol for data collection, and (iv) analysis of authentication performance.

In a 2013 passthoughts study [2], unmodified commercial off-the-shelf EEG sensing hardware was used. In our 2016 Ear-EEG passthoughts study [4], we modified the off-the-shelf hardware in order to support data collection from within the ear canal. Once modified, the same device could be used for all participants. In the current study, we propose to build in-ear EEG sensors that are custom-fit to the contours of the ears and ear canals of each individual participant. Therefore, it is necessary for us to build a separate pair of devices for each participant. In partnership with our research collaborators at Starkey Hearing Science, who specialize in hearing-aid technologies, we will acquire moldings of participants' ears, and use the molds to build custom-fit acrylic earpieces with embedded EEG electrodes.

A key research challenge is to design and build the electrodes to produce signals of robust quality, given the small volume of the ear cavity, the small surface areas of the electrodes, and the limited distances between the electrodes within the ear. We will need to experiment with the locations of the electrodes, including the reference and ground electrodes, which may be placed on the ear lobes or behind the ears on the left and right mastoids.

We propose an update and expansion of the authentication tasks, to take advantage of our lessons learned from previous studies on the relative strengths of different mental tasks, with regards to authentication accuracy and usability as reported by participants. Furthermore, given the in-ear

placement of the electrodes, and hence spatial proximity to the temporal lobes, we see a unique opportunity to design and test novel authentication tasks based on either auditory imagery or auditory steady-state response (ASSR). The ten authentication tasks and their attributes are listed in the tables below.

<b>Task</b>	<b>Description</b>
Breathe	Relaxed breathing with eyes closed.
Breathe - Open	Relaxed breathing with eyes open.
Sport	Sport-related motor imagery of participant’s choice.
Song	Imagining a song of participant’s choice playing.
Song - Open	Imagining a song with eyes open.
Speech	Imagining a phrase of participant’s choice being spoken.
Listen	Tone & Listening to a continuous tone.
Listen - ASSR	Listening to noise modulated at 40 Hz.
Face	Imagining a person’s face of participant’s choice.
Sequence	On timed cues, imagine a face, a number, and a word.

Table 1: Set of tasks proposed for authentication with descriptions.

Task	External stimuli?	Personal secret?	Eyes?	Imagery?
Breathe	No	No	Closed	None
Breathe - open	No	No	Open	None
Sport	No	Yes	Closed	Motor
Song	No	Yes	Closed	Aural
Song - open	No	Yes	Open	Aural
Speech	No	Yes	Closed	Aural
Listen - Tone	Yes	No	Closed	None
Listen - ASSR	Yes	No	Closed	None
Face	No	Yes	Closed	Visual
Sequence	Yes	Yes	Open	Visual

Table 2: Properties of authentication tasks. We selected tasks with a variety of different properteries, but preferred tasks that did not require external stimuli, as the need to present such stimuli at authentication time could present challenges for usability, and user security.

This will allow us to quantify the security and usability performances of these tasks, both collectively as they contribute to overall authentication accuracy, as well as comparatively against one another. We will use Open-

BCI, an open-source EEG biosensing system as our data collection platform. This requires integrating the custom-fit Ear EEG devices with the OpenBCI board. We will also need to extend our own data collector software, to support the recording of OpenBCI data that is synchronized with PsychoPy, which we use for stimuli presentation. We will recruit on the order of 20-30 participants who are willing to commit to multiple session visits, first for ear molding, then for device impedance testing, and then for one or more data collection sessions.

For authentication analysis, we will build upon the analysis methodology and tools from our previous studies. We will apply the logarithmic binning technique that we have developed in [5] to the EEG power spectrum data during the signal pre-processing step. We will then apply machine learning to train and test a support vector classifier as in [4]. We will compare the results against the threshold-based authentication protocol based on cosine similarity as in [2,3]. A key change for this study is that we will be able to collect up to 8 separate channels of EEG data, including multiple channels from each ear. This is in contrast to our previous studies, where we collected only a single channel of EEG, either on the prefrontal cortex (FP1) location or in the ear canal. Therefore, we will need to develop new analytic techniques to both (i) assess improvements in authentication accuracy due to the increased channels of data, and (ii) assess relative contributions of individual electrode locations to authentication accuracy. Finally, we will evaluate the usability of custom-fit Ear EEG authentication along several dimensions. They include the comfort and fit of the earpieces, the preparatory steps of using the devices, the ease and repeatability of the authentication tasks, and the recall rates of the personal secrets.

## 5 Preliminary results

We performed a very small pilot study ( $n=2$ ) to better assess our projects' feasibility, in particular the new custom-fit ear piece hardware. Our cursory analysis indicates that we can successfully detect EEG signals from the ear (Section 5.1), that these signals can be used for reliable authentication among two people (Section 5.2), and that the success of the authenticator relies on the user's chosen secret, and not just the inherence factor of the user's unique signal (Section 5.3).

## 5.1 Data collection

Our initial participants were recruited from a nearby university and scheduled for ear molding and impedance checking sessions. Finally, the data collection visit was scheduled and took approximately 90 minutes for set up and experiment execution. The OpenBCI system we used allows for 8 channels of simultaneous recording, along with separate ground and reference channels. Data was initially collected with the ground placed at the center of the forehead, and using the left mastoid as reference, though we can easily re-reference to another channel by subtracting a desired channel (such as right mastoid). Each earpiece (shown in the image below) contain three channels each: one placed on the helix, and two inside the canal - one front-facing and the other back-facing. The remaining two channels were placed on the right mastoid for later re-referencing, and at approximately Fp1 (on the forehead above the left eye) for validating the data collected in the ears against a scalp-based measure. Before beginning the experiment, the data from all channels was visualized and participants were asked to blink and clench their jaws to confirm all channels were active and properly connected.

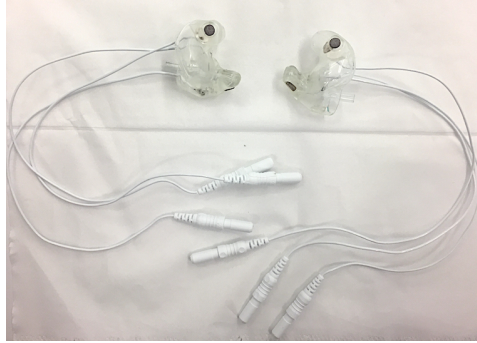


Figure 1: Pair of custom-fit earpieces with 3 embedded electrodes each located at the helix and front-facing and back-facing within the ear canal.

During the experiment, participants were seated in a comfortable position in a quiet room facing a laptop screen on which the instructions and stimuli were presented. Each task was completed once in sets five trials each, and then each was completed again for another five trials. Each trial was 10 seconds in length, for a total of 10 trials and 100 seconds of data collected per task. The instructions were read aloud to the participant by the experimenter, and the experiment was advanced using a pointer held in

the participant's lap to minimize motion artifacts in the data. The experimenter also recorded the participant's chosen secrets for the sport, song, face, speech, and sequence tasks and reminded the participant of these for the second set of trials.

## 5.2 Pilot Data Validation

Using the pilot data from two participants, we were able to confirm the custom-fit earpieces are able to collect EEG data using three tests: good impedances measured for the ear electrodes, alpha-band activity attenuation when a participant's eyes were open versus closed, and the presence of a significant ASSR signal.

The recorded impedances of the earpiece electrodes were less than 5 kOhms, a benchmark used widely in previous ear EEG work, except one. The left helix electrode of one participant was measured at 9 kOhms, and generally the helix impedances for both participants were higher than their ear canal counterparts. We expected this result, given that the helix electrode relies on quality of the earpiece's fit outside the ear, and is not as securely and tightly placed as the electrodes within the ear canal. Nonetheless, the data from all electrodes were tested in the remaining two data quality tests.

For the alpha-attenuation test, data from the "Breathe" task was compared with that of the "Breathe - Open" task. It is a well-known feature of EEG data that activity in the alpha-band (approximately 8-12 Hz range) increases when the eyes are closed compared with a similar state with eyes open. For both of our pilot participants this attenuation is clearly visible even in just a single trial's data. To further validate, we also performed this calculation on the data collected from the Fp1 electrode and see the effect clearly here as well. It is important to note that the left ear results are reported using the right mastoid as reference, and the right ear results in turn using the left mastoid as reference. When using the same side mastoid for reference the effect is not visible, though may be if we average across many trials. This is not surprising, as the further a reference electrode is from the active channel the less "real" signal is being subtracted from the active channel. This has important design implications for eventual real-world deployment of this authentication method however, as it will likely involve pieces on or around both ears to properly function, and not just one. The figures below show the alpha attenuation in the left and right ear channels, as well as Fp1.

Finally, for the ASSR test we calculated power spectra for data from the



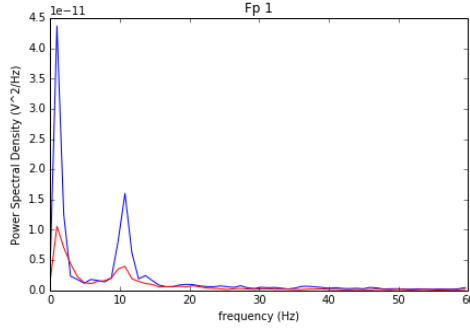


Figure 2: Alpha-attenuation (8-12 Hz range) in Fp1 channel, referenced at left mastoid, for comparison to ear channels. Red indicates breathing data with eyes open, blue indicates the same task with eyes closed.

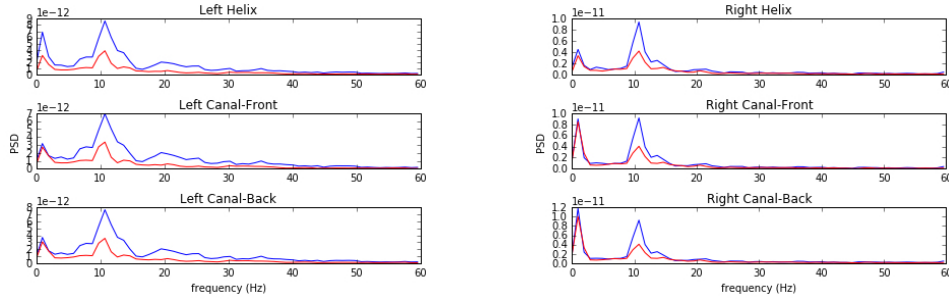


Figure 3: Alpha-attenuation (8-12 Hz range) in left and right ear canal channels, referenced at opposite mastoids respectfully. Red indicates breathing data with eyes open, blue indicates the same task with eyes closed.

"Listen - ASSR" task. The audio stimulus used for this task is modulated at 40 Hz, which should, in turn, produce an EEG response visible in the data at 40 Hz. Strangely, in our tests we do see an ASSR spike but it is located around 74 Hz instead. While this has us somewhat perplexed about our stimulus, the purpose of this test was to ensure that the response seen in the ear channels matched the response seen from the Fp1 recordings, which is evident comparing the figures below.

### 5.3 Authentication performance

Following [5], we use logarithmic binning to produce compressed feature vectors of a variable size. This technique has been show to offer robust, linear

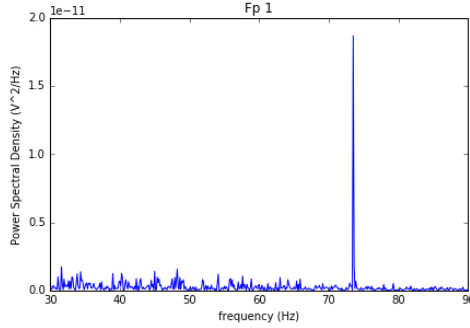


Figure 4: Power spectrum for data collected from the Fp1 channel during 40 Hz ASSR stimulus. An ASSR spike is clearly visible, though not at 40 Hz where it was expected.

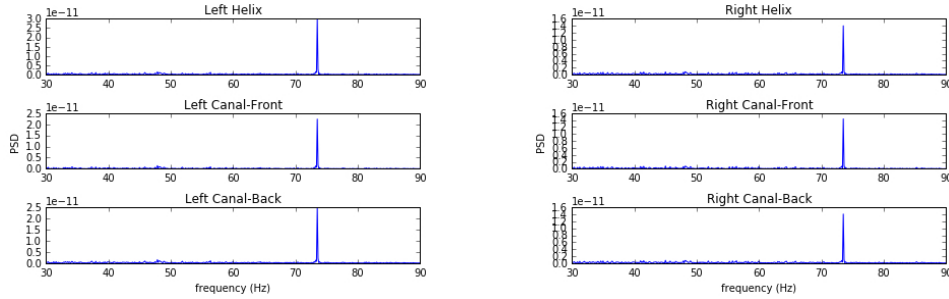


Figure 5: Power spectra for data collected from the earpiece channels during 40 Hz ASSR stimulus. Again, the spike is clearly visible though not at 40 Hz, however it does match the

classifiability in healthy subjects. It is unique in its use of the entire frequency spectrum. Since EEG activity is associated with frequencies from 1-40Hz, we presume this range contains the majority of relevant signal. However, we do not rule out the possibility that useful signal exists in other frequency ranges. Muscular activity, for example, might be correlated with mental gestures in some cases. Logarithmic binning produces feature vectors biased toward known sources of signal, while still including data points from outside this frequency range that may be informative.

We analyzed the EEG signals collected during the tasks using a support vector classifier (SVC). Since past work has shown that classification tasks in EEG-based BCI are linear [25], we used XGBoost, a popular tool for generating ensemble linear classifiers. For each task, for each participant,

100 seconds of data were collected in total across 10 trials of 10 seconds each, resulting in 30 samples per participant, per task, following preprocessing.

Task	Left Ear		Right Ear		Fp1	
	FAR	FRR	FAR	FRR	FAR	FRR
Breathe	0	0	0	0	0	0
Breathe - Open	0.039	0	0	0	0	0
Sport	0.039	0.036	0	0	0	0
Song	0	0	0	0	0	0
Song - Open	0	0	0	0	0	0
Speech	0	0	0	0	0	0
Listen - Tone	0	0	0	0.009	0	0
Listen - ASSR	0	0	0	0	0	0
Face	0	0	0	0.002	0	0
Sequence	0	0	0	0	0	0

Table 3: Authentication accuracy for each sensor position. Left and right ears were a composite of three electrode positions along the helix, front of the ear canal, and back of the ear canal.

Finally, for each subject, for each task, we trained a binary classifier in the following manner: the right subject, performing the right task, were taken as positive examples. The wrong person, performing any task, were taken as negative examples. For a random, balanced subsample of those groups, we trained an ensemble binary classifier with XGboost. For the remainder of the data, we tested the classifier’s accuracy, measuring the false acceptance rate (FAR) and the false rejection rate (FRR) (Table 3).

Overall, FAR and FRR were extremely low across the board. The right ear performed better than the left ear (possibly because the reference was on the left ear, thus furthest from the right ear). In line with the results of prior work, Fp1 performed better than either the left or the right ear, achieving perfect FAR and FRR scores on all tasks.

## 5.4 Disentangling inference and knowledge

Though our classifier’s accuracy is strong, we still cannot say that it relies on both knowledge and inference to authenticate the subject. Is it the passthrough that the classifier is authenticating, or do users (or earphones) simply have characteristic EEG readings?

If our classifier *only* relied on inference, we would expect the right person performing the wrong task to reliably authenticate with the classifier

described in Section 5.2. In other words, we would expect the FAR for right-person-wrong-task to be the same as the FAR for right-person, right-task. We calculated the FAR for each task, and performed a two-tailed t-test to determine our confidence that this set of FARs was drawn from a different distribution from those generated during the right-person, right-task trials.

<b>Task</b>	<b>Right Ear</b>	<b>Left Ear</b>	<b>Fp1</b>
Breathe	0	0.240	0
Breathe - Open	0.254	0.129	0
Sport	0.222	0.135	0
Song	0	0.211	0
Song - Open	0	0.166	0
Speech	0.311	0.116	0
Listen - Tone	0	0.333	0
Listen - ASSR	0.322	0.078	0
Face	0.355	0.055	0
Sequence	0.433	0	0
<b>p-value</b>	<b>*0.0076</b>	<b>*0.009</b>	N/A

Table 4: FARs for right-person, wrong-task, and p-values corresponding to confidence that these FARs were drawn from the same distribution as from the right-person-right-task trials.

Our low p-values (Table 4) indicate that the passthought, as well as the inference factor associated with the custom-fit EEG earbud, both contribute to the classifier performance discussed in Section 5.2. We are confident, then, in our claim that this work could potentially yield multiple-factor authentication in a single step. However, we will need to collect a great deal more data to substantiate this claim rigorously.

## 6 Proposed Future Work

In expanding on the feasibility study we describe above, our first task comprises of collecting data from more subjects, ideally for a subject population of 30. In addition, we hope to collect more diverse data, by taking regular samples over a period of a few weeks, and in a variety of circumstances. Our goal here is gauge the stability of EEG readings over time, and outside of lab environments. If the system will need to be calibrated occasionally, these readings could help us understand how frequently such calibration sessions

might need to take place

Toward this end, propose to build a working, real-time passthrough authenticator. After performing an initial calibration setup, similar to our pilot study’s protocol, above, we will send subjects home with their custom-fit ear EEG, and ask them to use the device to authenticate two to three times a day for a week. (We may ask subjects to set a recurring event on their calendar to remind them, or pay subjects in accordance with how frequently they authenticated, up to some reasonable maximum). After a week, subjects will return to the lab to return their equipment, debrief about their experience, and receive payment. We will use this opportunity to walk subjects through a relatively detailed post-interview, during which we will focus on their experiences with the device (things they may not have posted to others on the platform).

The goal of this work is to understand both the technical issues facing ear-EEG authentication (Does the system work reliably? When and why does it fail?), and the usability issues (How do subjects feel about having an EEG device in their ear throughout the day?). Finally, this closed-loop BCI system could help us understand how learning effects on the human side might impact authentication performance, as the human and machine co-adapt during multiple authentication attempts.

After testing that our system can reliably provide authentication with a secret passthrough (knowledge) and unique EEG signal (inherence), we will turn our attention to the final, third factor: possession (of the unique, custom-fit ear EEG device). We propose to cryptographically assure device possession by assigning each custom-fit electrode a unique public/private key-pair. User accounts could be associated with an earpiece’s public key, and authentication attempts from the earpiece could be signed with its private key, producing authentication attempts that are not forgeable by other custom-fit earpieces.

## 7 Conclusion

At the end of the proposed project, we will have developed an authentication attempt that provides three factors (knowledge, inherence and possession) in a single authentication attempt. This work could lead to authentication strategies that are both more secure and more useable than traditional, password-based authentication.

## 8 Proposed Budget

With two graduate students working on the project and a target sample size of 30 participants we propose the following budget:

- 2x 8-Channel OpenBCI Systems: \$1,200.00 (\$600.00 each)
- 30x Pairs of custom-fit earpieces with 3 embedded electrodes including labor cost: \$5,100.00 (\$170.00 per pair)
- 30x Compensation for two visits per participant: \$2,400.00 (\$80.00 each)
- 2x Graduate student support for two years: \$144,000.00 (\$72,000.00 each)
- Travel and registration costs for conferences: \$6,000
- **Total: \$158,700.00**

## 9 Group Member Contributions

Work for this project was approximately split evenly between the two group members. Both group members were involved in the project ideation and literature review, preparation of initial and final presentations, and preparation of this final proposal. Individually, Max created the experimental stimulus in PsychoPy and carried out the initial data collection of the pilot participants with some support from Nick. Max also ran the alpha-attenuation and ASSR data validation analyses. Along with assisting in data collection, Nick developed and ran the machine learning authentication analyses on our pilot data.

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