

Knowledge and Attitude of Patients' Right towards Confidentiality of Their Health Information in Bowen University Teaching Hospital, Ogbomosho

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Abstract: Health information is the clear, concise and acute history of a patient's life and illness written from the medical point of view. It is the data related to a person's medical history including symptoms, diagnoses, procedures and outcomes. Thus, confidentiality of such health information is of great benefit to the patients, by providing a secured environment, while giving a full account of their illness during consultation or contact with the health service provider. Despite the ethical and legal obligations, unauthorized disclosure or access to confidential patient information has become more prevalent in today's health care service vicinity in the reasoning of the patients. This study was therefore conducted to examine knowledge and attitude of patients' right towards confidentiality of their health information in Bowen University Teaching Hospital (BUTCH), Ogbomosho.

Descriptive survey research design was adopted in this study and convenience sampling techniques was used to select 150 respondents; while questionnaire was used for data collection. The descriptive statistics of frequency counts, percentages and inferential statistics of Pearson product moment correlation and analysis of variance were used for the analysis with the aid of statistical package for social sciences (SPSS).

The finding of this study revealed that patients attending BUTCH, Ogbomosho had adequate knowledge of confidentiality of health information, while attitude was fair. However, there was a negative relationship between knowledge and attitude of patients attending BUTCH towards confidentiality of their health information ($r=-0.007$, $p>0.05$).

It was concluded therefore, that patients attending Bowen Teaching Hospital, Ogbomosho had adequate knowledge and fair attitude towards confidentiality of their health information. It was suggested among other therefore; that the management of Bowen Teaching Hospital, Ogbomosho should collaborate with the government, non-governmental organisations as well as

other stakeholders to organize effective health education programmes for patients on the importance of adequate knowledge and positive attitude towards confidentiality of their health information.

Keywords: knowledge, attitude, patients' right, confidentiality, health information, Bowen University Teaching Hospital (BUTCH), Ogbomosho.

INTRODUCTION

Health information is the clear, concise and acute history of a patient's life and illness written from the medical point of view. It is a collection of recorded fact concerning a particular patient and it is also a device used for recording the significant characteristics of a particular patient and his or her illness and the events occurring in the course of professional care for the purpose of providing the best medical care to the patient. It is the data related to a person's medical history including symptoms, diagnoses, procedures and outcomes (Mulliga 2015). The development of modern information technology and the increasing amount of multidisciplinary teamwork in health care mean that the principle of patient confidentiality is becoming difficult to uphold and debate about confidentiality so far has paid little attention to patients' views (Davis, Weisburd, and Hamilton, 2018).

Communications between patients and their doctors should be kept private; patients may withhold some information when describing their ailments if they are not assured of confidentiality and can reveal freely with the expectation that anything done or revealed will be kept private (Mandyen, 2013). Confidentiality of patient's records is as old as the act of medicine, one of the notable physicians in Greek period was Hippocrates which was known as father of medicine and author of Hippocratic Oath of pledge by physician which serves as a basis for confidentiality of patients' records (Lamidi, 2015).

Confidentiality is the right of a subject to control the disposition of information disclosed during the course of professional relationship and the reciprocal obligation of the professional to ensure that no harm will befall the subject as a result of disclosures of such information. The conditions under which the obligation may or must be breached are usually determined by laws which vary from one jurisdiction to another (Churchill, 2013). Confidentiality forms the basis of the legal aspect of the health records; it is the ethical cornerstone of good treatment and it is essential for establishing trust between clinicians and patients (Adeleke, 2011). Confidentiality is the right of individual to have personal, identifiable medical information kept private and such information should be available only to the physician of record and other health care and insurance personnel if necessary (Health Insurance Portability and Accountability Act, 2012)

Confidentiality is the cornerstone of good treatment and it is essential for establishing trust between health care providers and patient and is often used interchangeably with privacy in reference to medical data but their meanings are distinct (Guedy *et al*, 2016). Privacy in healthcare is the protection of a patient from any disclosure of personal health data by providing security to the patient and the patient health records, whereas confidentiality is the limitation of patient information to only those for whom it is appropriate and in other words, it is the restrictive use of information obtained from and about a patient (Davis *et al*, 2017). Confidentiality is of great benefit to the patient because it provides a secured environment in which they are most likely to seek medical care and be able to give a full account of their illness during consultation or contact with the health service provider and benefit the health care industry as it support public confidence and trust in health care services generally (Carlisle, Shickle, and McDonagh, 2017).

The disclosure of personal information could cause professional or personal problem, patients rely on physicians to keep their medical information private and it's rare for medical records to remain completely sealed. The most benign breach of confidentiality takes place when clinicians

share medical information as case studies, when this data is published in professional journals the identity of the patient is never divulged, and all identifying data is either eliminated or changed. If this confidentiality is breached in any way, patients may have the right to sue (Fallon and Starr, 2013).

Breach of confidentiality is a disclosure of private information that a medical professional has learned to a third party without the patient's consent or a court order. Such disclosure can be oral or written, by telephone or any electronic means of communicating. There may be a large number of people who may have access to information contained in a patient's file, all of whom will have valid reasons for requiring that access. They may include doctors, nurses, other treating practitioners and administrative staff. The entire staff should in that light, promise to uphold entire secrecy. In most teaching hospitals, the records of patients are exposed to medical students who are still under training and are not yet bound by oath. They have access to patient information and though it is expected that they must keep this information confidential, it is not easily enforceable (Mandyen, 2016).

The duty of confidentiality is not unlimited, there are some exceptions. Confidential information can be disclosed without a patient's consent if it is required by law or if disclosure is in the public's interest. Under the regulations of the medical laws of most jurisdictions, it is an act of professional misconduct for a physician to give information concerning the condition of a patient or any services rendered to a patient to a person other than the patient or his or her authorized representative except with the consent of the patient or his or her authorized representative or as required by law (Medical Law, 2007).

STATEMENT OF THE PROBLEM

Despite the ethical and legal obligations, unauthorized disclosure or access to confidential patient information has become more prevalent in today's health care service vicinity in the reasoning of the patients (Mulliga, 2015). In utilizing health care services, it is important that patients share personal information with health workers. Health care providers have a duty as professionals to respect the patient's trust and keep the information private, despite this legal obligation patient information still get out of the control of health care providers without due process. This problem has cost many patients life opportunity due to illegal disclosure of their medical record and their illness.

However, only few elite patients realize that can claim damage from hospital while many take it as their faith. Patients' awareness of their rights to confidentiality is often low and significant numbers of patients are not ready to give some of their personal information needed for their treatment. They can even give inaccurate or incomplete information in their medical histories because they believe that the healthcare providers might divulge such information to unauthorized third parties, consequently result to improper management of patient; even if the health care providers do not disclose such information. In view of these observations, this study was conducted to explore the degree to which the ethical knowledge and attitude of patients right towards confidentiality of their health information in Bowen University Teaching Hospital, Ogbomosho. Furthermore, the findings of this research may help various medical institutions adopt controls and policies concerning the appropriate use, access to and dissemination of patients' health information

OBJECTIVE OF THE STUDY

BROAD OBJECTIVE

The main objective of the study is to assess the knowledge and attitude of patients' right towards confidentiality of their health information in Bowen University Teaching Hospital, Ogbomosho.

SPECIFIC OBJECTIVES

The specific objectives are to:

- i. Examine the knowledge of confidentiality of health information among patients attending Bowen Teaching Hospital, Ogbomosho
- ii. To get the attitude towards confidentiality of health information among patients attending Bowen Teaching Hospital, Ogbomosho
- iii. Determine the relationship between knowledge and attitude of patients attending Bowen Teaching Hospital, Ogbomosho towards confidentiality of their health information.

RESEARCH QUESTIONS

The following research questions were answered:

- i. What is the knowledge of confidentiality of health information among patients attending Bowen Teaching Hospital, Ogbomosho?
- ii. What is the attitude towards confidentiality of health information among patients attending Bowen Teaching Hospital, Ogbomosho?
- iii. What is the relationship between knowledge and attitude of patients attending Bowen Teaching Hospital, Ogbomosho towards confidentiality of their health information?

MATERIALS AND METHODS

STUDY AREA

This study was carried out in Bowen University Teaching Hospital, Ogbomosho, Baptist Medical Hospital, Ogbomosho that has become Bowen University Teaching Hospital, Ogbomosho was established march 18, 1907 and transformed to a teaching in 2009; with over 400 bed capacities with over 1000 staffs and students in a serene environment. Multidisciplinary facility with 50,000 outpatients and 10,000 inpatients. Family medicine residency and nursing programme with other fully accredited training programs. Service standard with high quality assurance. Prompt care at affordable cost with cultured staffs. It is a first-class Christian Teaching Hospital marked by excellence and godliness for the training of doctors, nurses and other medical professionals. Descriptive research design was used in this study which assessed the knowledge and attitude of patient's right towards confidentiality of their health information in Bowen university teaching hospital, Ogbomosho

STUDY POPULATION

The study population comprised of patients attending outpatient clinic of Bowen University Teaching hospital, Ogbomosho.

SAMPLING SIZE AND SAMPLING TECHNIQUES

The sampling size that was used was one hundred and fifty (150) patients.

The sampling technique adopted for this study was a convenience sampling technique by the researcher to determine number of respondents to be selected. This sampling method was preferred as the questionnaires were filled by the respondents that were easy to reach at the particular time the study was carried out.

RELIABILITY AND VALIDITY OF INSTRUMENT

In order to validate the instrument, a draft of the questionnaire was presented to the researcher's supervisor for constructive criticisms. Subsequently, the corrections were effected before the administration of the instruments for the pilot study. The collected data were hereafter subjected to Cronbach alpha to determine the reliability coefficient, which had a reliability value of 0.70.

METHOD OF DATA ANALYSIS

The collected data was analyzed using Statistical Package for Social Science (SSPS) version 22. The descriptive statistics of frequency counts and percentages was used to analyze the

demographic information and research questions. Pearson product moment correlation (PPMC) and t-test analyze research question.

Ethical Consideration

Permission to participate in this study was voluntary. Also, the name of the respondent was not indicated on the questionnaire and the study was explained before administering the questionnaire. The respondents were verbally appreciated.

RESULT

RESULTS

SOCIO-DEMOGRAPHIC CHARACTERISTICS:

The following are the socio-demographic characteristics of the respondents.

Table 4.1: Distribution of the respondents by age

Age	Frequency	Percent
18-24 years	30	20.0
25-31 years	41	27.3
32-38 years	37	24.7
39-45 years	20	13.3
46 years and above	22	14.7
Total	150	100.0

As shown in table 4.1, 30 (20.0%) respondents were in the age range of 18-24 years, 41 (27.3%) were between 25-31 years, 37 (24.7%) were between 32-38 years, 20 (13.3%) were in the age range of 39-45 years, 22 (14.7%) were 46 years and above. This means that most of the respondents were in the age range of 25-31 years.

Table 4.2: Distribution of the respondents by gender

Gender	Frequency	Percent
Male	57	38.0
Female	93	62.0
Total	150	100.0

Table 4.2 revealed that 57 (38.0%) respondents were males, while 93 (62.0%) were females. This means that most of the respondents were females.

Table 4.3: Distribution of the respondents by ethnicity

Ethnicity	Frequency	Percent
Yoruba	122	81.3
Igbo	21	14.0
Hausa	7	4.7
Total	150	100.0

Table 4.3 revealed that 122 (81.3%) respondents were Yoruba, 21 (14.0%) were Igbo, while 7 (4.7%) were Hausa. This means that most of the respondents were Yoruba.

Table 4.4: Distribution of the respondents by religion

Religion	Frequency	Percent
Christianity	96	64.0
Islam	52	34.7
Traditional	2	1.3
Total	150	100.0

Table 4.4 revealed that 96 (64.0%) respondents were Christians, 52 (34.7%) were Muslims, while 2 (1.3%) were traditional worshipers. This means that most of the respondents were Christians.

Table 4.5: Distribution of the respondents by marital status

Marital status	Frequency	Percent
Single	38	25.3
Married	104	69.3
Divorced	3	2.0
Widowed	5	3.3
Total	150	100.0

Table 4.5 revealed that 38 (25.3%) respondents were single, 104 (69.3%) were married, 3 (2.0%) were divorcees, while 5 (3.3%) were widows. This means that most of the respondents were married.

Table 4.6: Distribution of the respondents by educational qualification

Educational qualification	Frequency	Percent
Primary school holder	20	13.3
O'level	37	24.7
OND	18	12.0
HND	26	17.3
B.Sc	45	30.0
P.hD	4	2.7
Total	150	100.0

Table 4.6 revealed that 20 (13.3%) were primary school holders, 37 (24.7%) had 'O'level, 18 (12.0%) possessed OND, while 26 (17.3%) had HND. In addition, 45 (30.0%) had BSc, while 4 (2.7%) had Ph.D. This means that most of the respondents had BSc.

Table 4.7: Distribution of the respondents by profession

Profession	Frequency	Percent
Civil servant	72	48.0
House wife	21	14.0
Student	40	26.7
Artisan	17	11.3
Total	150	100.0

Table 4.7 revealed that 72 (48.0%) respondents were civil servants, 21 (14.0%) were house wives, 40 (26.7%) were students, while 17 (11.3%) were artisans. This means that most of the respondents were civil servants.

RESEARCH QUESTIONS:

The following research questions were answered in the study:

Research question 1: What is the knowledge of confidentiality of health information among patients attending Bowen Teaching Hospital, Ogbomosho?

Table 4.8: Summary of result on knowledge of confidentiality of health information

S/n	Statement	Yes	No
1.	Protecting patient health records is part of the duty of all health professionals?	142 (94.7%)	8 (5.3%)
2.	Protecting the confidentiality of patient health records is very important?	145 (96.7%)	5 (3.3%)

3.	Is it legal to discuss health records information with anybody aside health practitioners?	52 (34.7%)	98 (65.3%)
4.	If yes, with who?		
	Insistence by Patient	25 (16.7%)	
	Court of Law	18 (12.0%)	
	Friend	6 (4.0%)	
	Insurance	5 (3.3%)	
5.	In what situation do you think patient health records can be released?		
	Insistence by Patient	55 (36.7%)	
	Court of Law	56 (37.3%)	
	Friend	17 (11.3%)	
	Insurance	22 (14.7%)	
6.	Does confidentiality of patient records has both ethical issue and legal principle?		
	Yes	94 (62.7%)	
	No	56 (37.3%)	
	Ethical issue only	18 (12.0%)	
	Legal principle only	11 (7.3%)	
	I don't know	20 (13.3%)	
7.	Is keeping confidentiality important during medical consultation?	139 (92.7%)	11 (7.3%)

As shown in table 4.8, 142 (94.7%) respondents affirmed that protecting patient health records is part of the duty of all health professionals, while 8 (5.3%) did not. In addition, 145 (96.7%) respondents acknowledged that protecting the confidentiality of patient health records is very important, while 5 (3.3%) did not. Also, 52 (34.7%) respondents acknowledged that, it is legal to discuss health records information with anybody aside health practitioners, while 98 (65.3%) disagreed. Moreover, 25(16.7%) respondents among those who indicated yes expressed that it is legal to discuss health records information with anybody aside health practitioners particularly based on insistence by patient, 18(12.0%) respondents indicated patients, 6(4.0%) mentioned court of law, 6(4.0%) indicated friend, while 5(3.3%) mentioned insurance.

In the same vein, 55 (36.7%) respondents stated that health records can be released based on the insistence by patients, 56 (37.3%) mentioned court of law, 17(11.3%) expressed friends, while 22 (14.7%) indicated insurance. Furthermore, 94 (62.7%) respondents indicated that confidentiality of patient records has both ethical issue and legal principle, while 56(37.3%) responded contrary to that. Also, 18 (12.0%) respondents stated that confidentiality of patient records has ethical issue only, 11(7.3%) mentioned legal principle only, while 20 (13.3%) respondents expressed that they don't know. Based on the responses of the respondents, it was

revealed that most of the respondents had satisfactory responses on knowledge of confidentiality of health information. This means that patients attending Bowen Teaching Hospital, Ogbomosho had adequate knowledge of confidentiality of health information.

Research question 2: What is the attitude towards confidentiality of health information among patients attending Bowen Teaching Hospital, Ogbomosho?

Table 4.9: Summary of result on attitude towards confidentiality of health information

S/n	Statement	Agree	Undecided	Disagree
1.	There is no breach of confidentiality if my relatives are with me during consultation with my health provider	78 (52.0%)	30 (20.0%)	42 (28.0%)
2.	I am afraid that if I report a breach of confidentiality to the proper authorities, health care providers in the hospital may not want to attend to me again.	80 (53.3%)	16 (10.7%)	54 (36.0%)
3.	I think confidentiality is violated if health care providers share my medical information with other health care providers.	39 (26.0%)	22 (14.7%)	89 (59.3%)
4.	I do not have a problem if my health care provider shares my health information in a public place	40 (26.7%)	16 (10.7%)	94 (62.7%)
5.	Having medical students around during consultation with my physician without my consent does not violate my right to confidentiality of my health information	126 (84.0%)	9 (6.0%)	15 (10.0%)
6.	I have the right to sue the hospital if my health information is divulged without my consent	65 (43.3%)	23 (15.3%)	62 (41.3%)
7.	My confidentiality is violated if health care providers share my medical information with other health care providers, even if it is important to my health care.	41 (27.3%)	18 (12.0%)	91 (60.7%)
8.	My confidentiality is not violated if health care providers share my health information with researchers	86 (57.3%)	19 (12.7%)	45 (30.0%)
9.	There is no punishment for health care providers for breach of confidentiality	41 (27.3%)	23 (15.3%)	86 (57.3%)
10.	I think health care providers can do whatever they want with my health information as long as my health status improves	30 (20.0%)	18 (12.0%)	102 (68.0%)
11.	I have the right to choose my health care provider so that my health information is kept more confidential	89 (59.3%)	16 (10.7%)	45 (30.0%)
12.	My confidentiality is not breached if my health care providers share my health information with the press	56 (37.3%)	18 (20.0%)	76 (50.7%)
13.	Even when my confidentiality is breached, I do not report it because I know no legal action will be taken against the health practitioner	56 (37.3%)	18 (20.0%)	76 (50.7%)

As indicated in table 4.9, 78 (52.0%) respondents agreed that, there was no breach of confidentiality if their relatives are with them during consultation with their health providers, 30 (20.0%) was unable to decide, while 42 (28.0%) disagreed. Also, 80 (53.3%) respondents agreed that, they were afraid that if they report a breach of confidentiality to the proper authorities,

health care providers in the hospital may not want to attend to them again, 16 (10.7%) did not decide, while 54 (36.0%) disagreed. Correspondingly, 39 (26.0%) respondents agreed that, they think confidentiality is violated if health care providers share their medical information with other health care providers, 22 (14.7%) did not decide, while 89 (59.3%) disagreed. Likewise, 40 (26.7%) respondents agreed that, they do not have a problem if their health care provider shares their health information in a public place, 16 (10.7%) did not decide, while 94 (62.7%) disagreed.

Further, 126 (84.0%) respondents agreed that, having medical students around during consultation with their physician without their consent does not violate their right to confidentiality of their health information, 9 (6.0%) did not decide, while 15 (10.7%) disagreed. Additional, 65 (43.3%) respondents agreed that, they have the right to sue the hospital if their health information is divulged without their consent, 23 (15.3%) did not decide, while 62 (41.3%) disagreed. Furthermore, 41 (27.3%) respondents agreed that, their confidentiality is violated if health care providers share their medical information with other health care providers, even if it is important to their health care, 18 (12.0%) did not decide, while 91 (60.7%) disagreed. Moreover, 86 (57.3%) respondents agreed that, their confidentiality is not violated if health care providers share their health information with researchers, 19 (12.7%) did not decide, while 45 (30.0%) disagreed.

Moreover, 41 (27.3%) respondents agreed that, there is no punishment for health care providers for breach of confidentiality, 23 (15.3%) did not decide, while 86 (57.3%) disagreed. In addition, 30 (20.0%) respondents agreed that, they think health care providers can do whatever they want with their health information as long as their health status improves, 18 (12.0%) did not decide, while 102 (68.0%) disagreed. Also, 89(59.3%) respondents agreed that, they have the right to choose their health care provider so that their health information is kept more confidential, 16 (10.7%) did not decide, while 45 (30.0%) disagreed. Additionally, 56 (37.3%) respondents agreed that, their confidentiality is not breached if their health care providers share their health information with the press, 18 (20.0%) did not decide, whereas 76 (50.7%) disagreed. Finally, 56 (37.3%) respondents agreed that, even when their confidentiality is breached, they do not report it because they knew no legal action will be taken against the health practitioner, 18 (20.0%) did not decide, whereas 76 (50.7%) declined. Based on the responses of the respondents, it was revealed that most of the respondents had fair responses on attitude towards confidentiality of their health information. This means that patients attending Bowen Teaching Hospital, Ogbomosho had fair attitude towards confidentiality of their health information.

Research question 3: What is the relationship between knowledge and attitude of patients attending Bowen Teaching Hospital, Ogbomosho towards confidentiality of their health information?

Table 4.10: Correlation analysis on relationship between knowledge and attitude towards confidentiality of health information

Variables	Mean	Std. Dev.	Knowledge	Attitude	N	Sig. (p value)	Remark
Knowledge	9.85	0.49	1	-0.007	150	0.934	Not Significant
Attitude	29.47	5.43	-0.007	1			

Correlation is significant at 0.05 alpha level ($p < 0.05$)

Table 4.10 showed that knowledge was not tested significant on attitude of patients attending Bowen Teaching Hospital, Ogbomosho towards confidentiality of their health information ($r = -0.007$; $p > 0.05$). It was further established that knowledge had a negative correlation with attitude of the patients towards confidentiality of their health information, while correlation coefficient's magnitude was very weak. This means that there was a negative and insignificant relationship between knowledge and attitude of patients attending Bowen Teaching Hospital, Ogbomosho towards confidentiality of their health information. The null hypothesis was therefore accepted.

DISCUSSION OF FINDINGS

The finding of this study on socio-demographic characteristics revealed that most of the respondents were in the age range of 25-31 years, of which majority were females, while most of such respondents were Yoruba. In addition, most of the respondents were Christians, of which majority were married, and most of such respondents had BSc, while majority were civil servants. In addition, it was established in this study that, patients attending Bowen Teaching Hospital, Ogbomosho had adequate knowledge of confidentiality of their health information. This was evident through the responses of most respondents which revealed that most of them affirmed that protecting patient health records is part of the duty of all health professionals. In addition, majority of respondents acknowledged that protecting the confidentiality of patient health records is very important. Furthermore, majority of the respondents indicated that confidentiality of patient records has both ethical issue and legal principle. The outcome of this study on knowledge of confidentiality of health information was in line with the assertion of Gostin (2012) which stated information on confidentiality of health information is important; as breaches of confidentiality may not only affect the person's dignity, but can cause harm.

In the same vein, the finding of this study revealed that, patients attending Bowen Teaching Hospital, Ogbomosho had fair attitude towards confidentiality of their health information. This was evident through the responses of most respondents which revealed that majority of them affirmed that, they were afraid that if they report a breach of confidentiality to the proper authorities, health care providers in the hospital may not want to attend to them again.

Correspondingly, few respondents agreed that, they think confidentiality is violated if health care providers share their medical information with other health care providers, while majority disagreed. Also, majority of the respondents disagreed that, they do not have a problem if their health care provider shares their health information in a public place. Further, majority of the respondents agreed that, having medical students around during consultation with their physician without their consent does not violate their right to confidentiality of their health information.

Additional, most of the respondents agreed that, they have the right to sue the hospital if their health information is divulged without their consent. Equally, most respondents disagreed that, their confidentiality is violated if health care providers share their medical information with other health care providers, even if it is important to their health care. Moreover, respondents agreed that, their confidentiality is not violated if health care providers share their health information with researchers. Equally, most respondents disagreed that there is no punishment for health care providers for breach of confidentiality. In addition, most of the respondents disagreed that, they think health care providers can do whatever they want with their health information as long as their health status improves.

Additionally, most respondents disagreed that, their confidentiality is not breached if their health care providers share their health information with the press. Also, most respondents disagreed that even when their confidentiality is breached, they did not report it because they knew no legal action will be taken against the health practitioner. The outcome of this study on attitude towards confidentiality of health information was in line with the assertion of Australian Medical Association (2002) that many people are extremely sensitive about the collection of and use of information related to their health and health-related treatment. The outcome of this study on attitude is also in line with the finding of Gostin & Hodge (2012) which established that American society places a high value on individual rights, personal choice, and a private sphere protected from intrusion.

SUMMARY, CONCLUSION AND RECOMMENDATIONS

SUMMARY

This study examined the knowledge and attitude of patient's right towards confidentiality of their health information in Bowen University Teaching Hospital, Ogbomosho. Hence, independent

variables were tested in relation to dependent variable. The tested dependent variable was confidentiality of health information, while knowledge and attitude of patient's right were examined as independent variables. Consequently, three research questions were raised and answered in the study.

Relevant literature was reviewed in line with dependent and independent variables. The review was made on sub-variables such as history of confidentiality, overview of confidentiality of patient health information, global outlooks on confidentiality of patient record, confidentiality in health information management, importance of confidentiality of patient health record, medical ethics on patient confidentiality and a host of others sub headings.

The population for the study comprised patients of Bowen University Teaching Hospital, Ogbomosho, Oyo State. The descriptive research design and convenience sampling techniques were used in this study. The descriptive statistics of frequency counts and percentages were used to analyse the demographic variables as well as research question 1 and 2, while Pearson product moment correlation coefficient was used to analyse research question 3.

The finding of this study revealed that patients attending Bowen Teaching Hospital, Ogbomosho had adequate knowledge of confidentiality of health information. Also, patients attending Bowen Teaching Hospital, Ogbomosho had fair attitude towards confidentiality of their health information. On the other hand, it was established that there was a negative relationship between knowledge and attitude of patients attending Bowen Teaching Hospital, Ogbomosho towards confidentiality of their health information.

CONCLUSION

It was concluded in the study that, patients attending Bowen Teaching Hospital, Ogbomosho had adequate knowledge of confidentiality of their health information. Also, patients attending Bowen Teaching Hospital, Ogbomosho had fair attitude towards confidentiality of their health information. On the other hand, it was concluded that there was a negative relationship between knowledge and attitude of the patients towards confidentiality of their health information.

RECOMMENDATIONS

Based on the findings of the study, the following recommendations were made:

1. Efforts should be intensified by the hospital management to ensure that, periodic sensitization programmes are organised for patients attending Bowen Teaching Hospital on the issue of knowledge and attitude of the patients towards confidentiality of their health information.
2. The management of the hospital should collaborate with the government, non-governmental organisations as well as other stakeholders to organize effective health education programmes for patients on the importance of adequate knowledge and positive attitude towards confidentiality of their health information.
3. The management of Bowen Teaching Hospital, Ogbomosho should ensure that the laws guiding the confidentiality of health records of patients in the hospital are properly enforced.

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