Sacred Heart UNIVERSITY

Healthcare and AI Poll

greatblue
WHAT'S NEXT.

Report of Findings

November 25, 2025

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Sacred Heart UNIVERSITY

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WHAT'S NEXT.

Our Story

Sacred Heart University and GreatBlue Research partner to research salient issues facing the United States. This collaboration combines the academic excellence of a top-rated private University and the research design, analysis and reporting expertise of GreatBlue Research.

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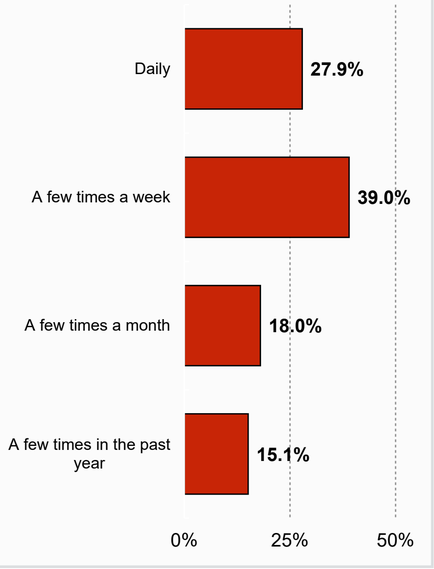
Areas of Investigation

Sacred Heart University leveraged a quantitative research approach to address the following areas of investigation:

- General attitudes toward and usage of AI technologies
- Experiences accessing different types of healthcare services
- Barriers to care and perceptions of healthcare quality
- Confidence and behavior around health information and literacy
- Awareness and perceptions of AI use in healthcare delivery
- Willingness to engage with AI-powered healthcare services
- Privacy, data security, and trust in AI systems
- Perspectives on fairness, bias, and transparency in AI healthcare decisions
- Trust dynamics between AI and human healthcare providers
- Attitudes toward patient rights and ethical use of AI in healthcare
- Perceived opportunities for AI to improve specific areas of healthcare
- Expected impact of AI on key healthcare challenges (e.g., access, cost, quality)
- Demographic profile of respondents

Research Methodology | Snapshot

Methodology Digital survey*	No. of Completes 1,500	No. of Questions 40**	Sample Procured by GreatBlue	Freq. of AI Usage
Target Market U.S. Residents***	Margin of Error +/- 2.43%	Confidence Level 95%	Research Dates November 7 - 12, 2025	



* Data quality personnel, in addition to computer-aided interviewing platforms, ensure the integrity of the data is accurate.
** This represents the total possible number of questions including screening and demographic questions; not all respondents will answer all questions based on skip patterns and other instrument bias.
*** Respondents had to confirm that they had used generative artificial intelligence (AI) tools at least once in the past 12 months and not be employed in a role developing, training, or deploying AI systems .
The final sample was weighted according to age, gender, and U.S. region. Demographic weighting targets were originally derived from and based on the U.S. Census Bureau, 2023 American Community Survey 5-Year Estimates.

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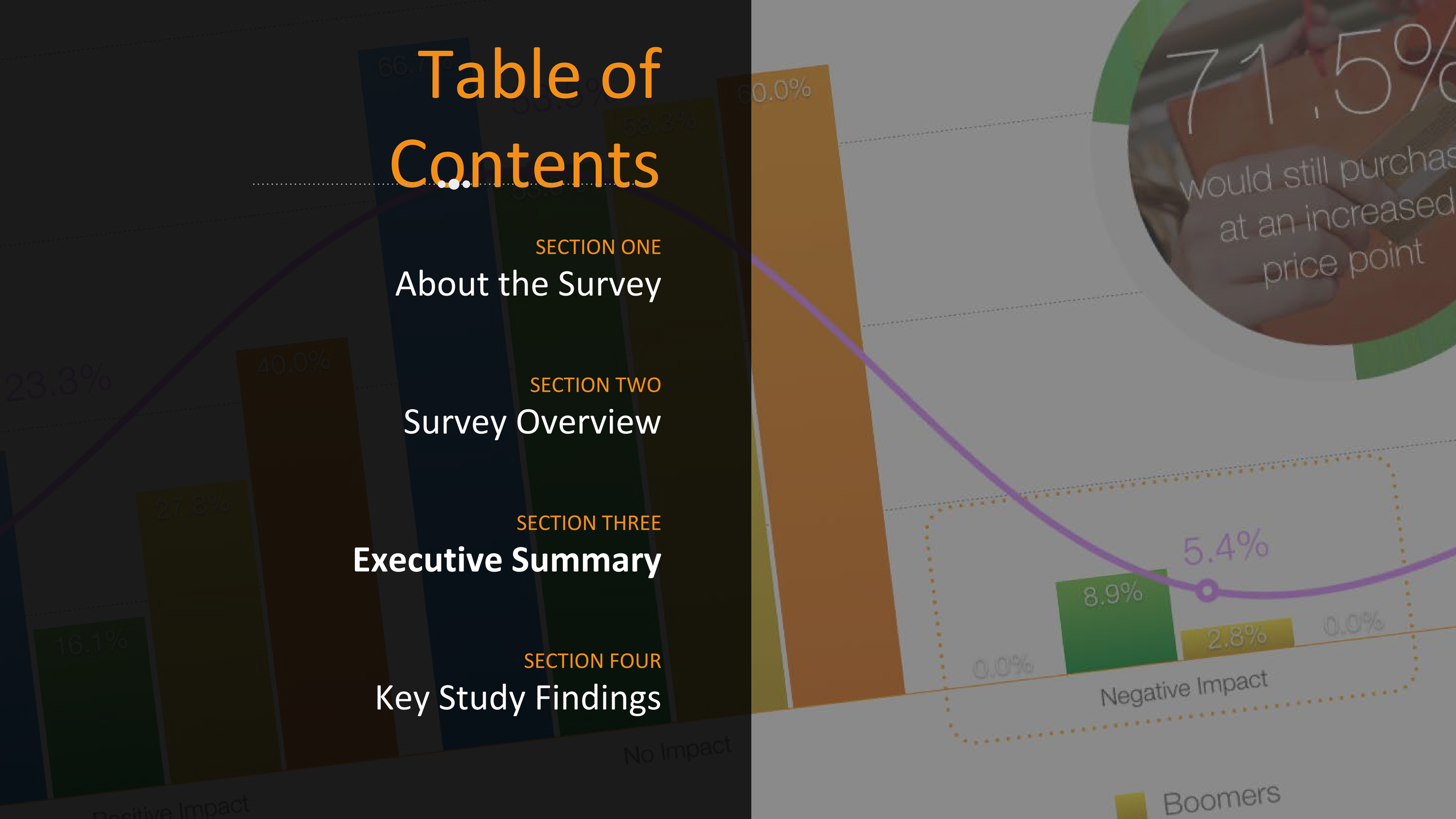

Study of the Impact of Artificial Intelligence (AI) on the U.S. Healthcare Landscape | Executive Summary

This report provides an in-depth analysis of the attitudes and perceptions of U.S. respondents regarding artificial intelligence (AI) in healthcare, including its usage, transparency expectations, trust in decision-making, and willingness to adopt AI-powered tools. The following represent the key themes and insights:

- **Curiosity-Driven AI Use**: Nearly seven-in-ten U.S. respondents (68.3%) held a positive overall view of AI, and nearly one-third (31.6%) reported using AI to search for health information. However more often AI was used for exploratory or curiosity-driven purposes. Usage was highest among 18–34-year-olds and individuals with a post-graduate degree, while women were slightly more likely than men to use AI for health research despite expressing less overall trust in AI.

- **Wide Support for Patient Transparency and Choice**: Nearly nine-in-ten respondents believed patients should be informed when AI is involved in their care (87.5%), and a similar share said patients should have the right to know when AI is used in drug prescription development (86.0%). More than four-in-five agreed that patients should be able to opt out of AI-driven care (83.4%) and that AI's role should be communicated clearly and in plain language (85.9%). Transparency expectations were strongest among women and older adults.

- **Perceived Use Outpaces Personal Adoption**: While nearly two-thirds believed AI is already being used to deliver healthcare services (64.5%), fewer than two-in-five said they anticipate AI completely replacing doctors for some tasks in the next 10 years (37.9%). Men were more willing than women to allow AI to diagnose conditions, while older adults (55+ year-olds) showed relatively more comfort with AI being used for reading and communicating test results, suggesting selective rather than broad adoption.

- **Trust and Autonomy Concerns**: Fewer than half of U.S. respondents trusted AI to protect their personal health information (43.0%), and concerns about autonomy were evident as only a minority believed AI should be allowed to make treatment recommendations without a doctor's approval. Respondents 55+ year-olds were the least likely to trust AI with their health information, while men and post-graduate degree holders expressed notably higher levels of trust.

- **Uneven Expectations for Regulation and Oversight**: Nearly one-third of respondents believed healthcare providers should be primarily responsible for regulating AI (29.2%), followed by the federal government (21.2%) and professional medical associations (20.5%). Individuals with a post-graduate degree were more likely to favor federal oversight, while individuals with a high school education or less were more likely to place regulatory responsibility on healthcare providers themselves.

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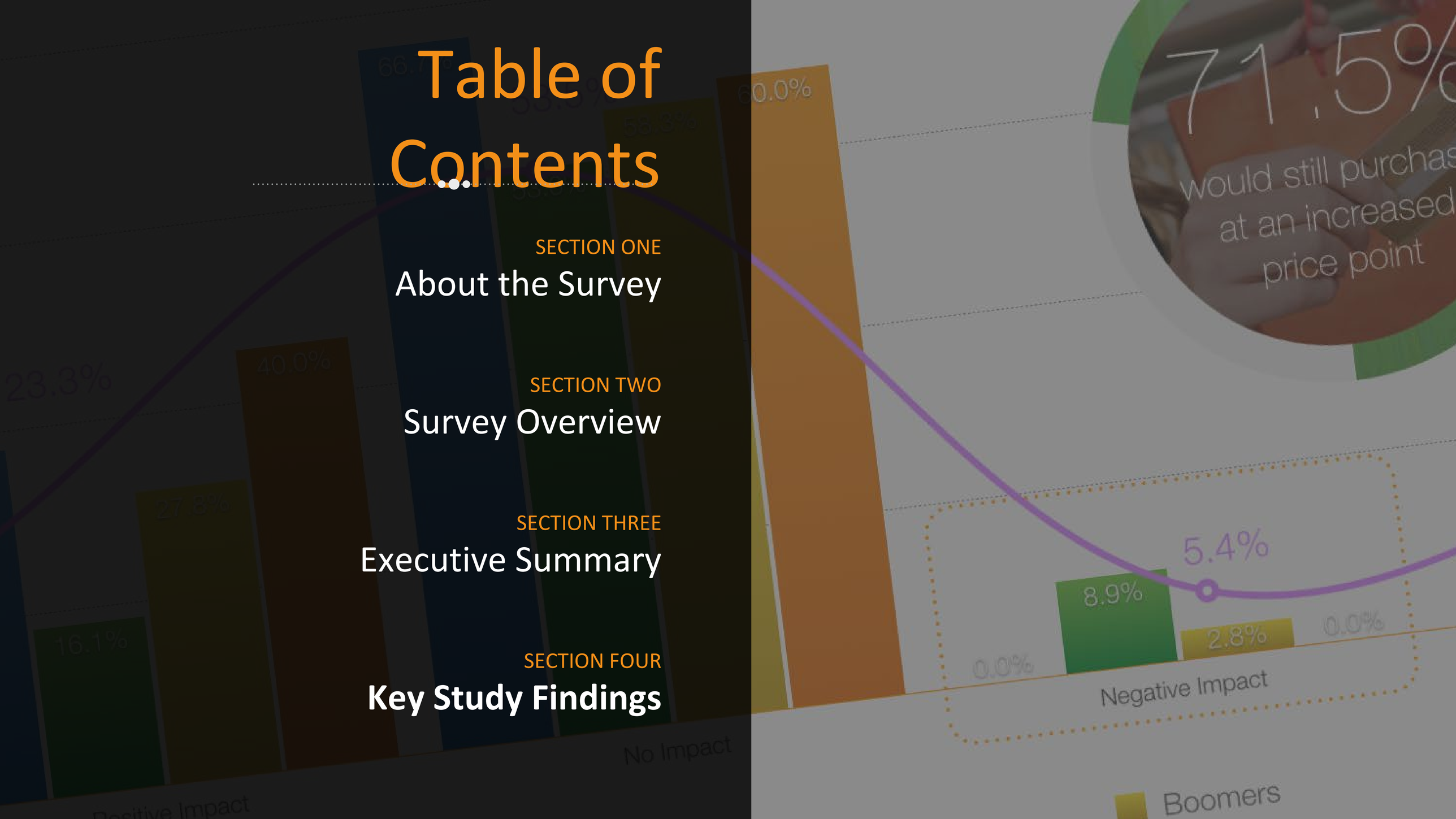
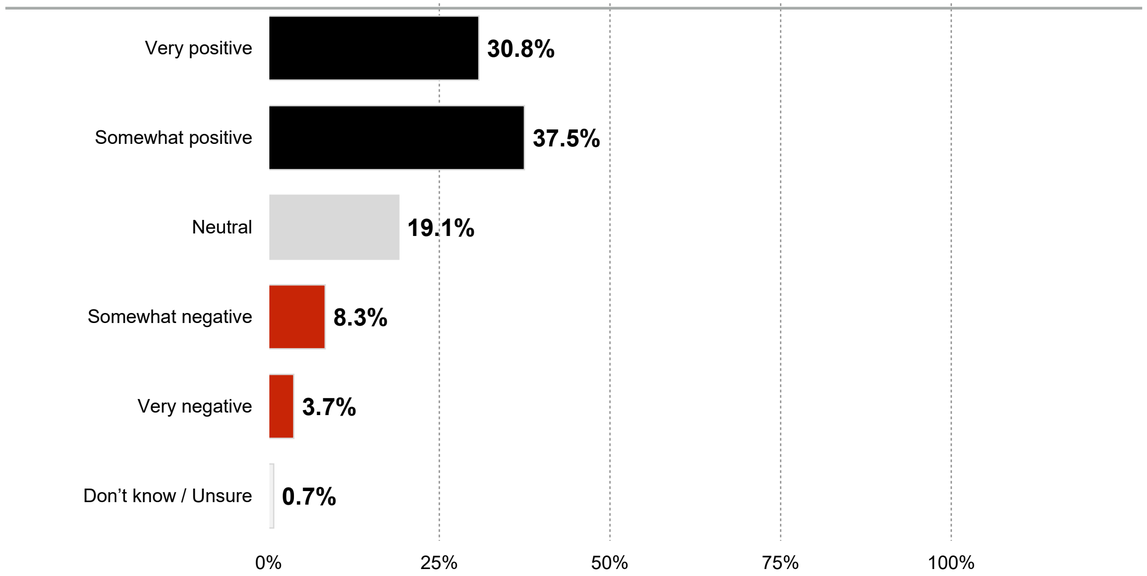


Artificial Intelligence (AI) | Perception and Common Usage

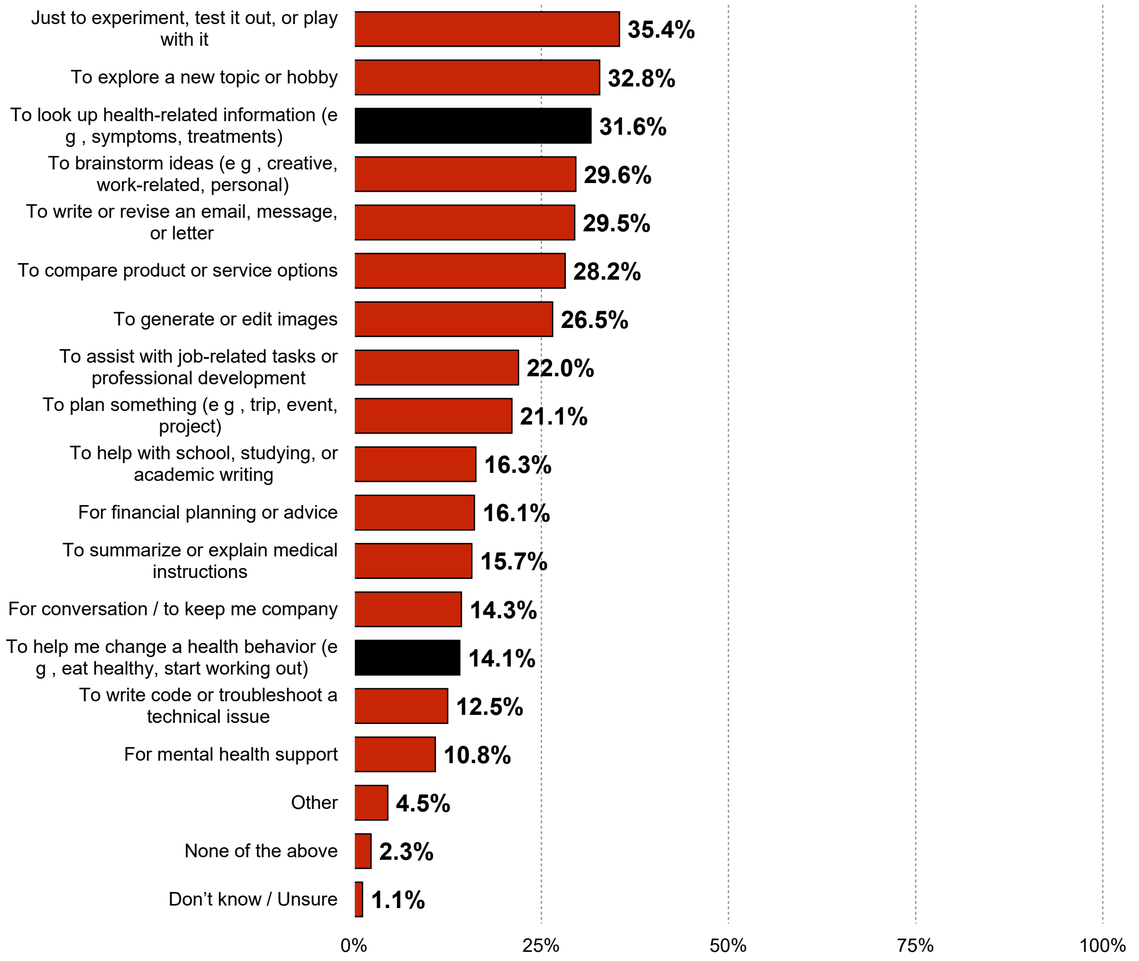
Nearly seven-in-ten U.S. respondents reported a positive overall view of AI technologies (68.3%), with most using AI tools in exploratory or curiosity-driven ways. The most common uses were to “experiment, test it out, or play with it” (35.4%), “explore a new topic or hobby” (32.8%), and “look up health-related information” (31.6%).

- Fewer 55+ year-olds expressed a positive view of AI (61.8%), compared to 18–34-year-olds (71.1%) and 35–54-year-olds (73.4%), yet approximately one-third of 55+ year-olds used AI to look up health information (33.9%).
- Individuals with a post-graduate degree were the most positive overall (83.9%), and more than one-third used AI for health information (37.4%).
- Women were less likely than men to view AI positively (62.0% vs. 74.7%), yet women were slightly more likely to use AI to search for health information (33.9% vs. 29.5%).

Overall View of AI Technologies



Common Uses of AI



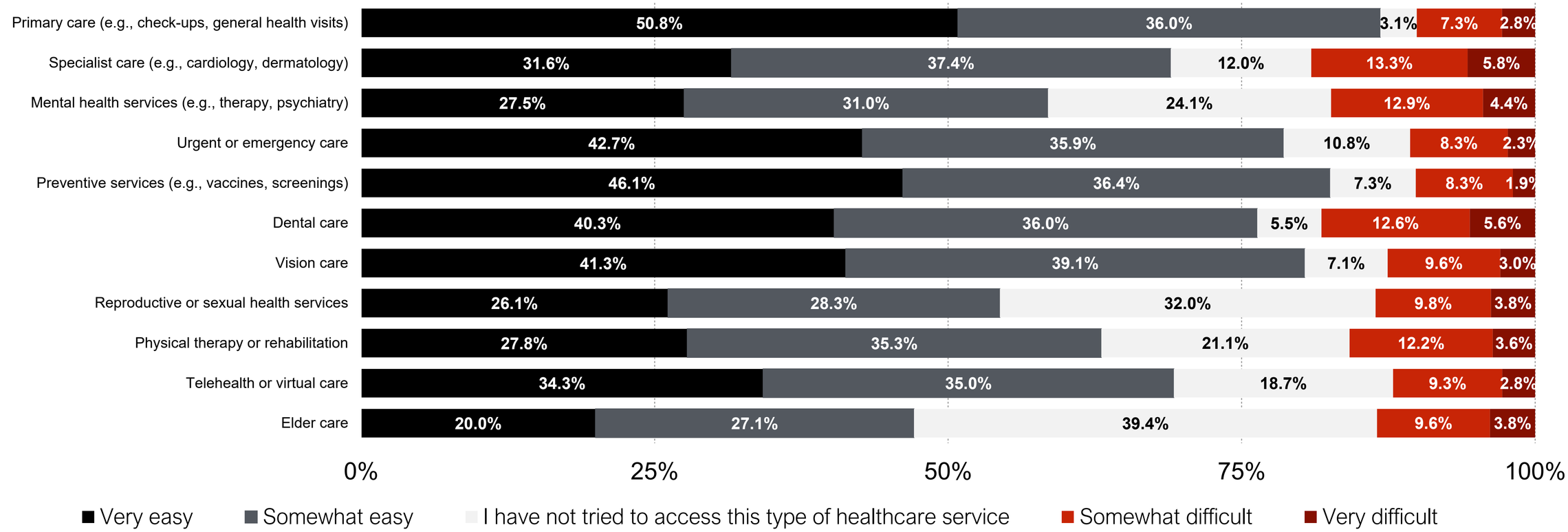
N=1,500
Q: Which best describes your overall view of AI technologies?
Q: In the past 3 months, in what ways have you personally used generative AI tools like ChatGPT, Google Gemini, Microsoft Copilot, Claude, or similar? Please select all that apply.

Healthcare in the U.S. | Access

The data indicate that U.S. respondents experienced varying levels of ease in accessing different types of healthcare services. Nearly nine-in-ten reported that accessing “primary care” was easy (86.8%), followed in rank order by “preventive services” (82.5%), “vision care” (80.4%), and “urgent care” (78.6%).

- Fewer 18–34-year-olds indicated that accessing “primary care” (82.7%) and “specialist care” (64.2%) was easy, compared to older age groups.
- Liberal/liberal-leaning respondents were more likely to report ease in accessing “reproductive and sexual health services” (58.0%) than conservative/conservative-leaning respondents (48.1%); however, two-in-five conservatives had not attempted to access this type of care in the past.
- Compared to urban residents, fewer rural respondents found it easy to access ”specialist care” (64.0% vs. 71.9%) and/or “mental health services” (54.0% vs. 67.1%).

Ease or Difficulty Accessing Healthcare Services



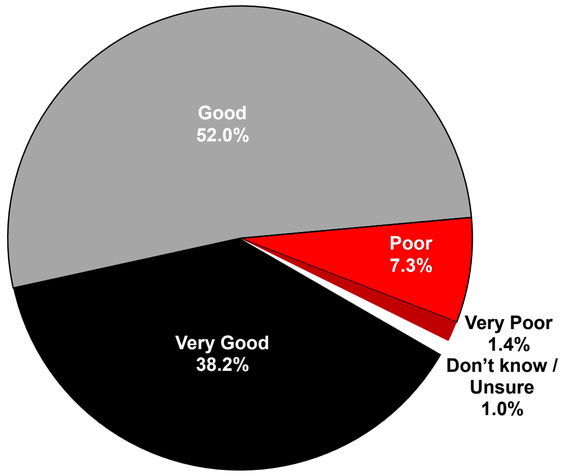
N=1,500
Q: How easy or difficult is it for you to access each of the following types of healthcare services?

Healthcare in the U.S. | Barriers

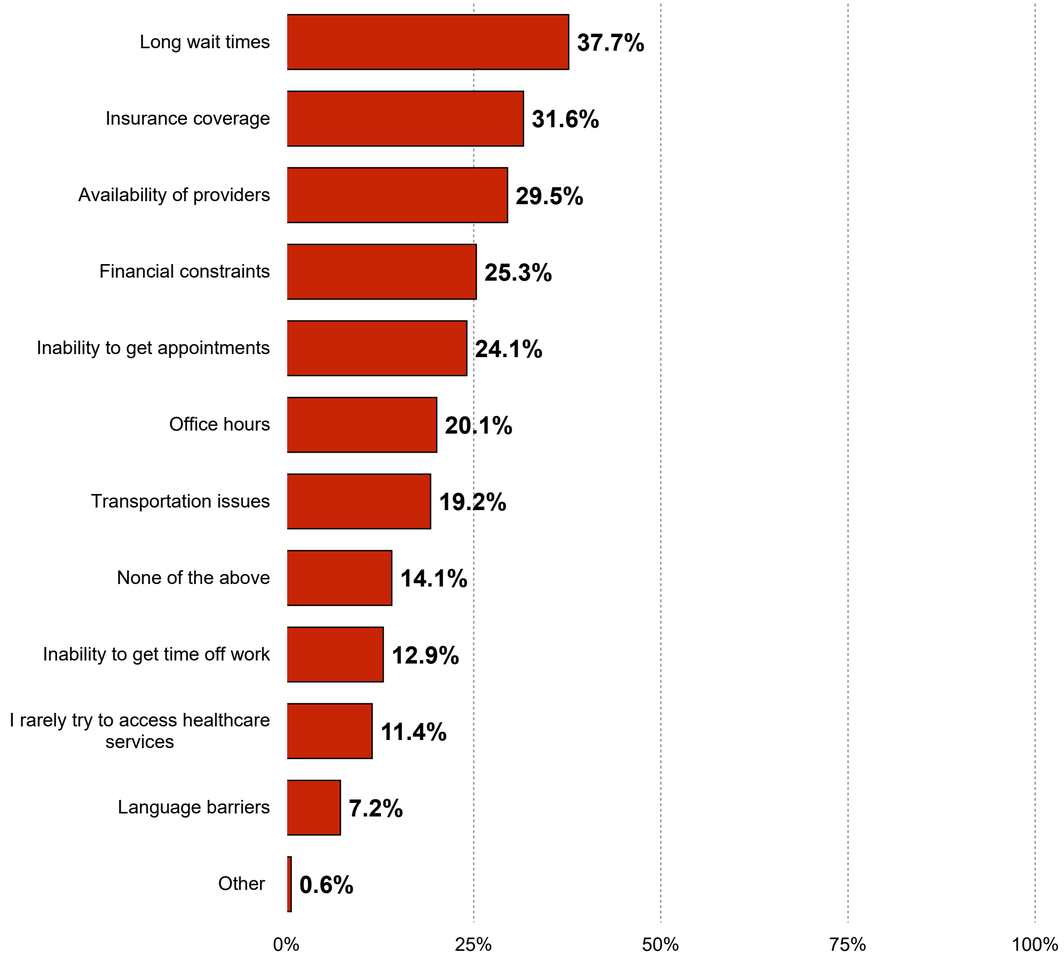
Nearly nine-in-ten U.S. respondents rated the quality of healthcare they received as “very good” or “good” (90.2%). The most significant barriers cited were “long wait times” (37.7%), “insurance coverage” (31.6%), and the “availability of providers” (29.5%).

- 18–34-year-olds were more likely to cite “financial constraints” as a barrier (34.1%), compared to 35–54-year-olds (27.8%) and 55+ year-olds (16.6%).
- Individuals with a high school education or less were more likely to report “transportation issues” as a barrier (24.7%) than those with a college degree (14.5%) or a post-graduate degree (14.1%).
- While overall quality of care was relatively consistent across urbanicity, only 30.7% of rural respondents rated their care as “very good” compared to 41.0% of urban respondents.

Overall Quality of Healthcare Services Received



Barriers to Accessing Healthcare



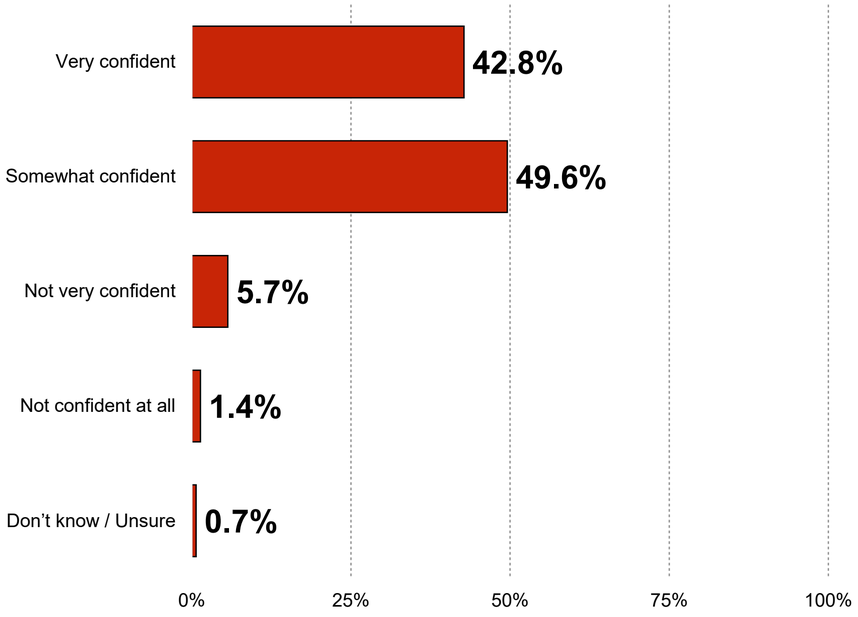
N=1,500
Q: On average, how would you rate the quality of the healthcare services you have accessed?
Q: What are the most significant barriers you face when trying to access healthcare services? Please select all that apply.

Health Information and Literacy | Comprehension

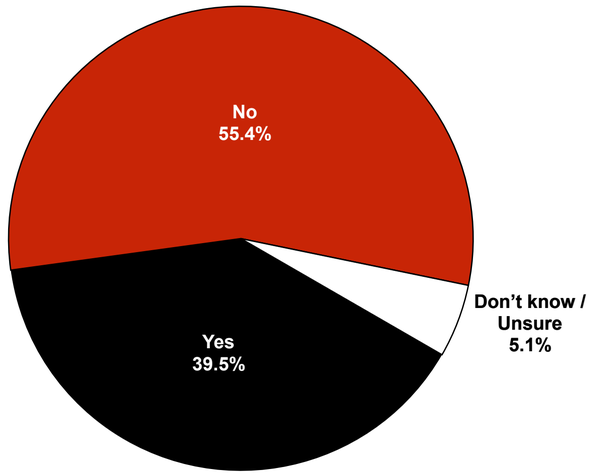
More than nine-in-ten U.S. respondents indicated confidence in understanding information provided by healthcare professionals (92.4%). However, almost two-in-five had previously felt unsure about how to follow a doctor's instructions (39.5%) and the vast majority had at least occasionally/sometimes (85.8%) researched their health condition or treatment options on their own.

- A majority of 18–34-year-olds reported feeling unsure about how to follow doctor instructions (51.3%); more than 35–54-year-olds (43.4%) and 55+ year-olds (27.1%).
- Women were more likely than men to have felt unsure about following instructions (41.8% vs. 36.9%) and were slightly more likely to research health conditions on their own (88.4% vs. 83.1%).
- Individuals with a college or post-graduate degree were more likely to confidently understand the information provided by healthcare professionals but were also more likely to research their health independently.

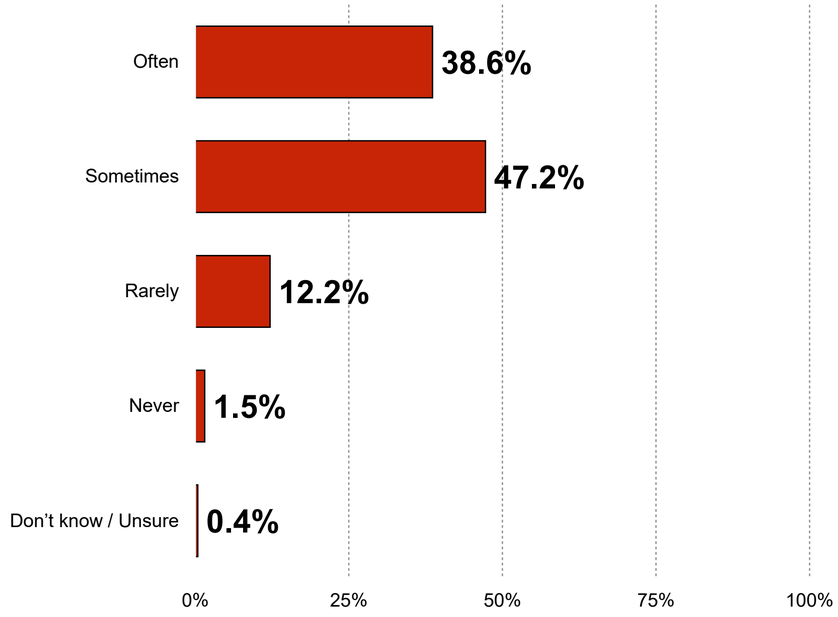
Confidence Understanding Healthcare Information



Uncertainty Following Doctor's Treatment Instructions



Research Health Conditions Autonomously



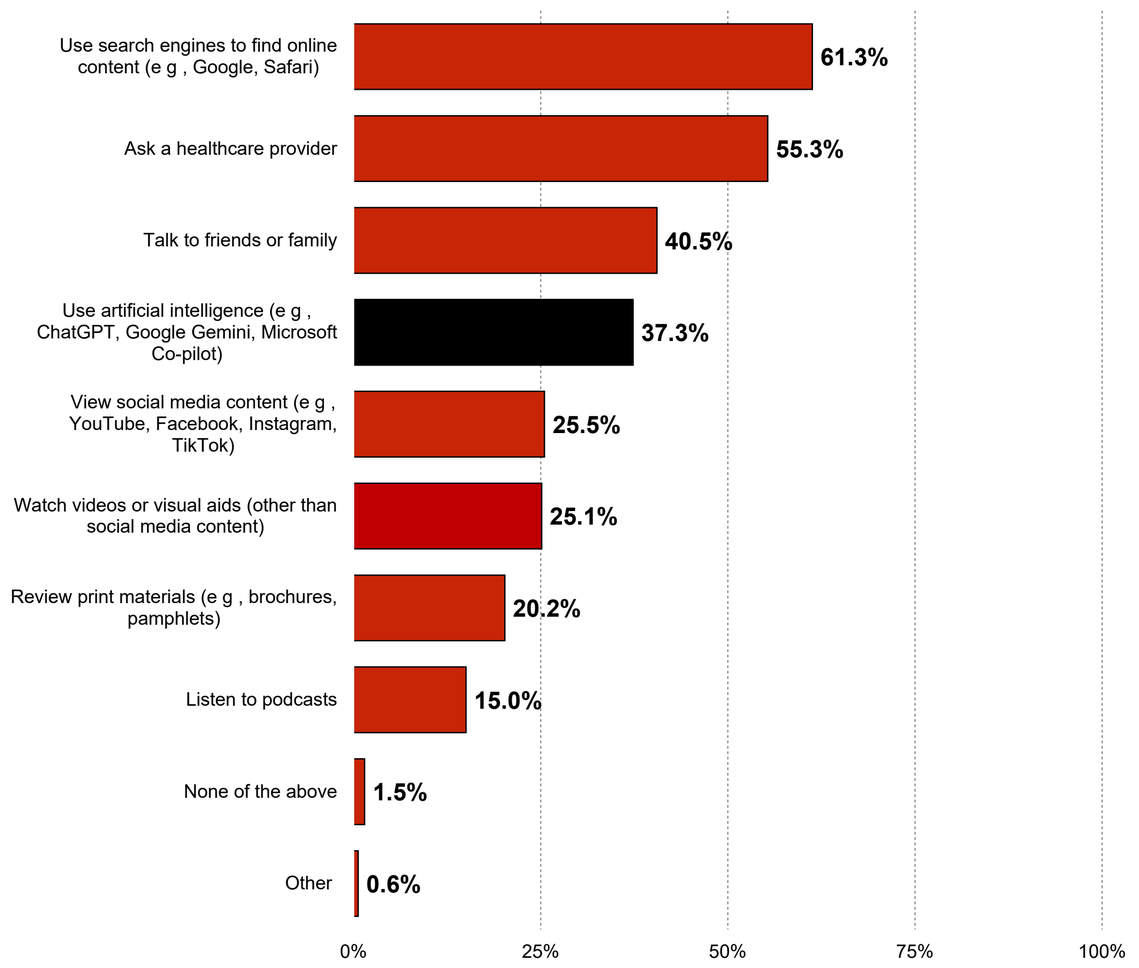
N=1,500
Q: How confident are you in understanding information provided by healthcare professionals about your health?
Q: How often do you research your health conditions or treatment options on your own?
Q: Have you ever felt unsure about how to follow a doctor's instructions once you have left the doctor's office and are back at your home?

Health Information and Literacy | Sources of Information

More than one-third of U.S. respondents reported using AI technologies to search for health information (37.3%). “Search engines” (61.3%), “healthcare providers” (55.3%), and conversations with “friends or family” (40.5%) were more commonly used, although AI has surpassed social media content as a health information source (25.5%).

- 18–34-year-olds were most likely to use AI for health information (44.3%), compared to 35–54-year-olds (39.4%) and 55+ year-olds (30.3%).
- Individuals with a post-graduate degree were more likely to use AI for health information (46.7%) than individuals with a college degree (36.6%), some college (36.7%), or a high school education or less (33.8%).
- Men were more likely than women to use AI for health information (40.7% vs. 34.4%).
- Urban respondents were also more likely than rural respondents to use AI for health information (42.0% vs. 31.7%).
- There were no meaningful differences across political ideology.

Sources of Healthcare Information



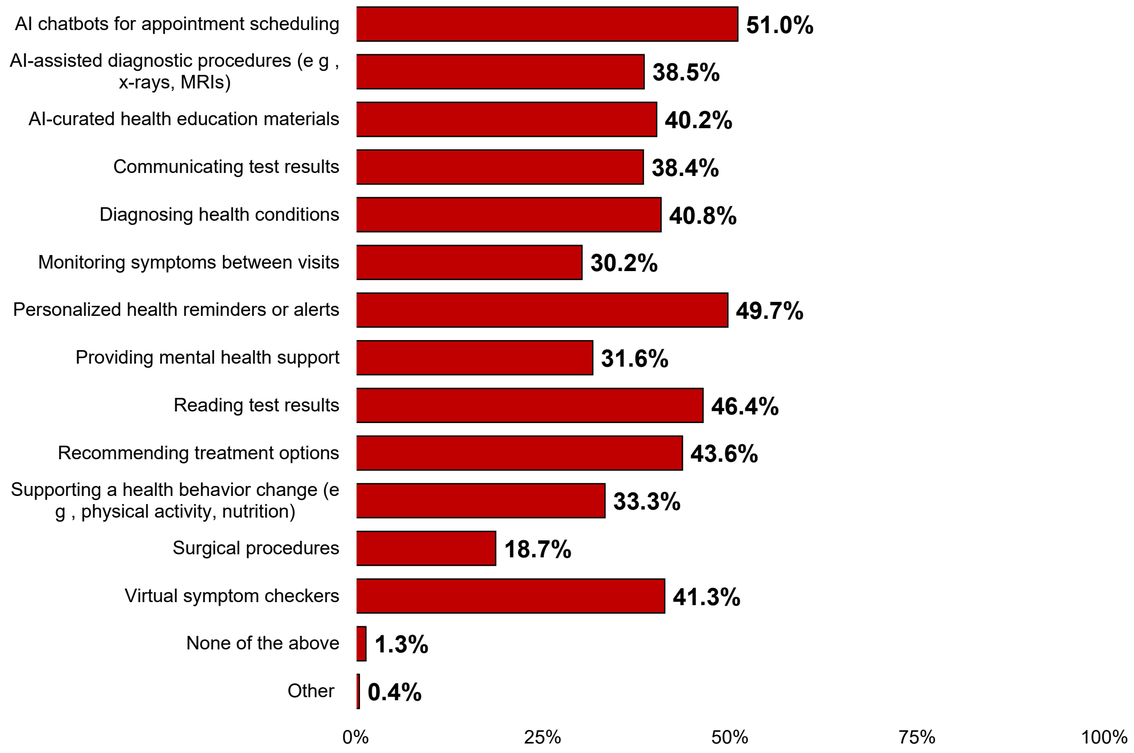
N=1,500
Q: How do you prefer to seek out or search for information about your health? Please select all that apply.

Healthcare and AI | Perceived Uses

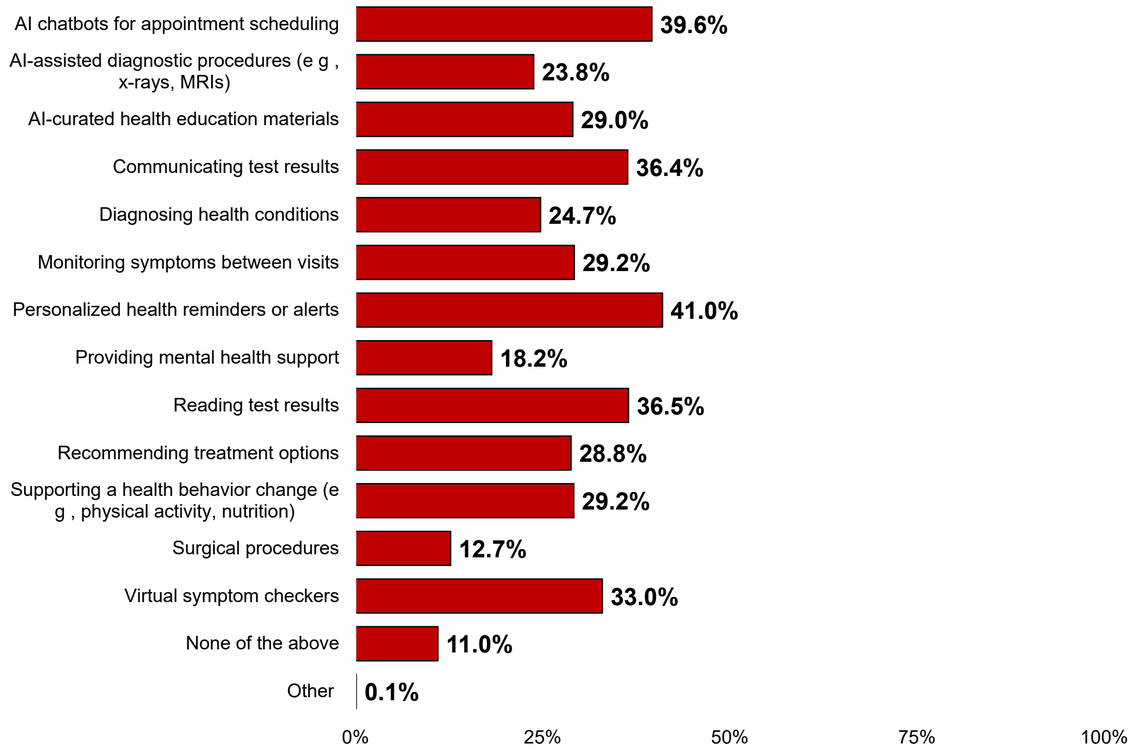
U.S. respondents believed AI is currently being used for administrative and informational tasks, including “appointment chatbots” (51.0%), “personalized health reminders” (49.7%), and “reading test results” (46.4%). However, willingness to personally use AI for these same use cases was lower, with interest highest for reminders (41.0%), scheduling chatbots (39.6%), and reading test results (36.5%).

- ❖ Women were more likely than men to use AI as a virtual symptom checker (35.8% vs. 30.1%), while men were more willing to allow AI to actually diagnose health conditions (29.7% vs. 20.1%).
- ❖ Individuals ages 55+ were the most willing to use AI for clinical support tasks, including reading test results (43.8% vs. 34.2% for 35–54-year-olds and 29.3% for 18–34-year-olds) and communicating results (40.5% vs. 36.5% for 35–54-year-olds and 30.8% for 18–34-year-olds).

Perceived Current Uses of AI in Healthcare



Willingness to Use AI-Powered Healthcare Services



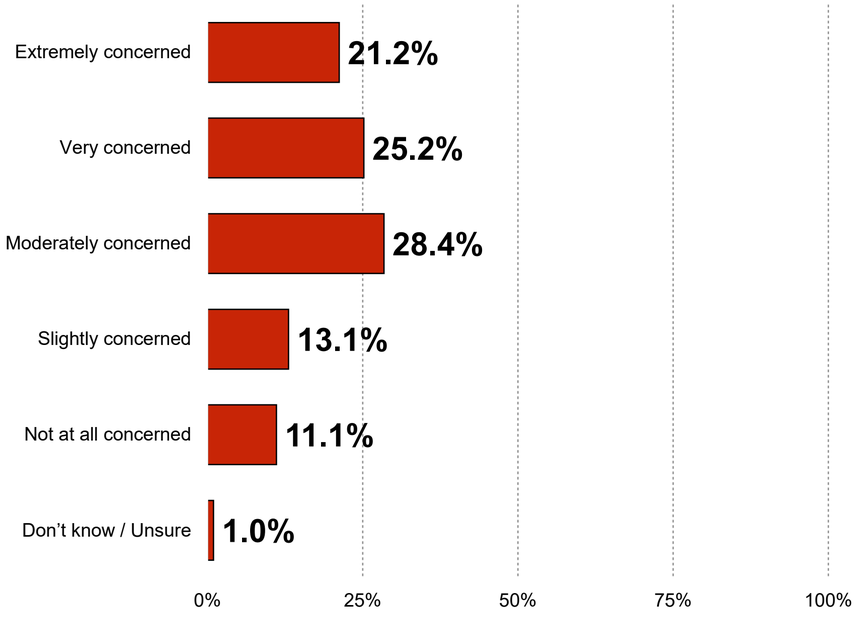
Q: Do you think AI is being used for any of the following healthcare services at this point in time? Select all that apply. (N=965)
Q: And, which of the following AI-powered healthcare services would you be willing to use at this point in time? Please select all that apply. (N=1,500)

Healthcare and AI | Privacy and Regulation

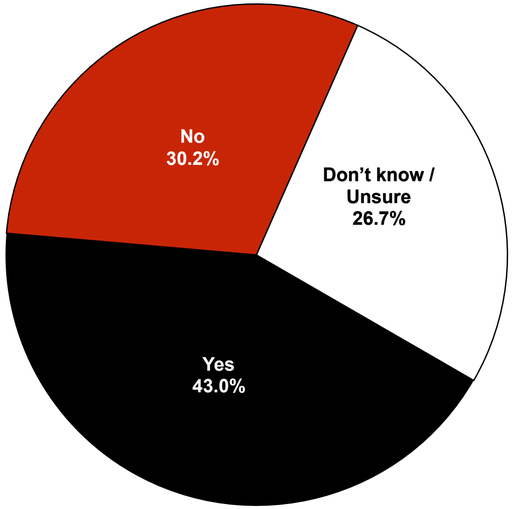
Most U.S. respondents expressed concern about how their personal health data are used, with nearly three-fourths reporting at least “moderate concern” (74.8%). Further, fewer than half trusted AI technologies to protect their health information (43.0%). When asked who should be primarily responsible for regulating AI in healthcare, respondents most frequently selected healthcare providers (29.2%), followed by the federal government (21.2%) and medical associations (20.5%).

- Respondents ages 55+ were the least likely to trust AI to protect their personal health information (30.4%) compared to 18–34-year-olds (53.5%) and 35–54-year-olds (48.6%). Men were also more likely than women to trust AI to protect their health data (50.2% vs. 36.3%).
- Liberal/liberal-leaning respondents were more likely to trust AI to protect their health information (51.1%) compared to conservative/conservative-leaning respondents (40.1%).
- Individuals with a post-graduate degree were more likely to believe the federal government should regulate AI in healthcare (25.6%) compared to those with a high school education or less (19.4%) or some college (19.6%), whereas individuals with a high school education or less were more likely to place responsibility on healthcare providers (32.5% vs. 27.8% of those with a post-graduate degree).

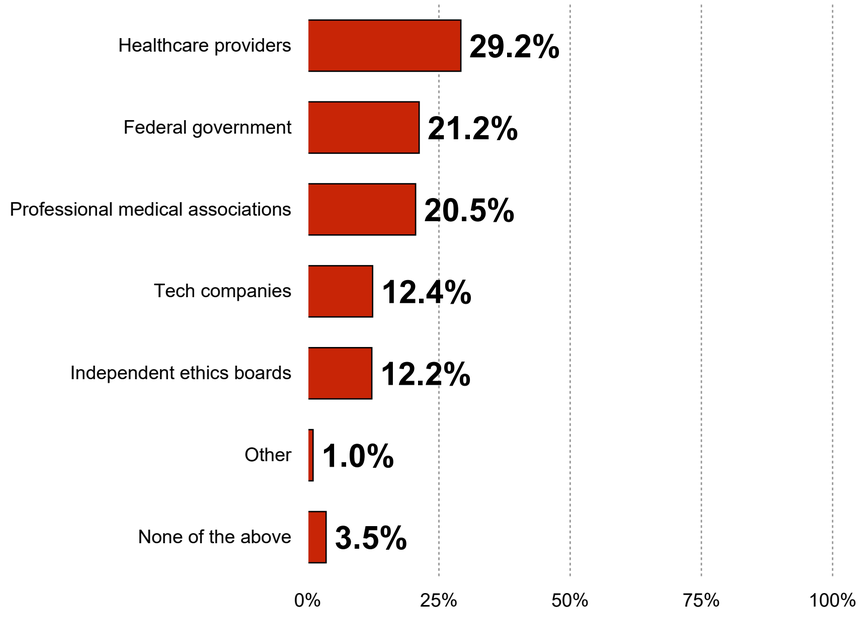
Concern over Use of Personal Health Data



Trust AI to Protect Health Data



Responsibility for Regulating AI in Healthcare



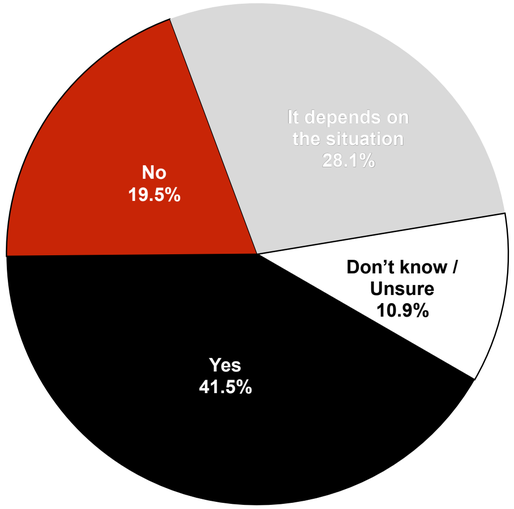
N=1,500
Q: How concerned are you about how your personal health data is used?
Q: Do you trust AI technologies to protect your health information and privacy?
Q: Who should be most responsible for regulating how AI is used in healthcare? Please select only one

Healthcare and AI | Role in Decision-Making

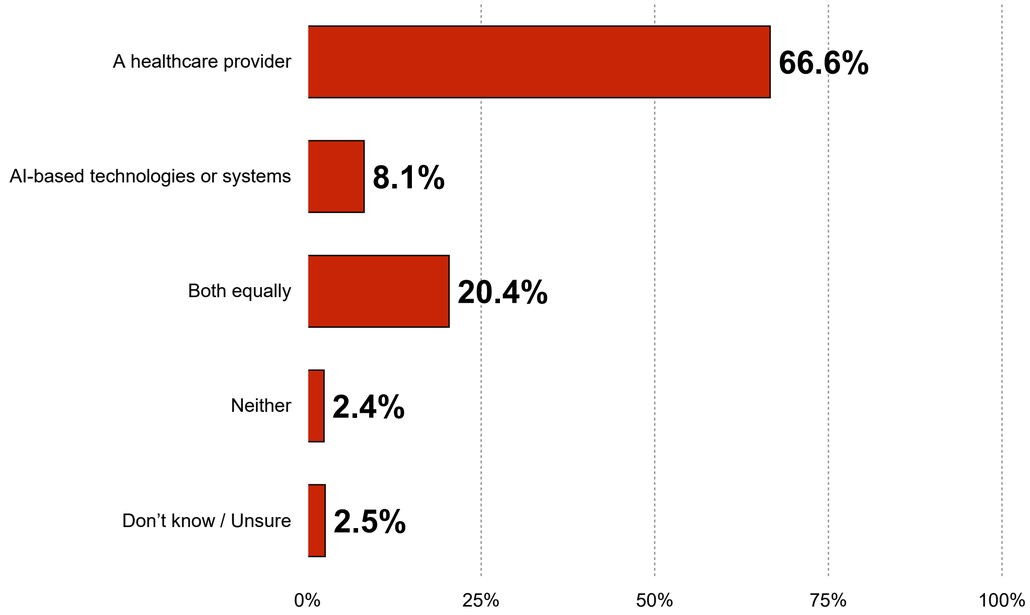
U.S. respondents expressed mixed views on AI's ability to make fair and unbiased healthcare decisions. More than two-fifths believed that AI could make unbiased decisions (41.5%), while nearly one-fifth disagreed (19.5%) and over one-quarter reported that it depends on the situation (28.1%). When asked who they trusted more for healthcare recommendations, nearly two-thirds selected a healthcare provider (66.6%), whereas fewer than one-in-ten selected AI technologies alone (8.1%). Interestingly, approximately one-in-five trusted providers and AI technologies equally (20.4%).

- Nearly one-half of 18–34-year-olds believed AI can make unbiased healthcare decisions (50.3%), compared to fewer than one-third of 55+ year-olds (32.6%), which aligns with younger adults being more likely to trust both AI and providers equally (26.7% vs. 12.4% of 55+ year-olds).
- Men were more likely than women to believe that AI can make fair and unbiased decisions (48.6% vs. 34.9%).
- Individuals with a post-graduate degree (52.5%) and those with a high school education or less (44.0%) were slightly more likely than individuals with some college (37.8%) or a college degree (37.4%) to believe that AI can make unbiased decisions

Belief that AI Can Make Fair, Unbiased Healthcare Decisions



Parties Trusted to Make Healthcare Decisions



N=1,500
Q: Do you believe AI technologies can make fair, unbiased healthcare decisions?
Q: Who do you trust more to make recommendations about your healthcare?

Healthcare and AI | Patient's Rights

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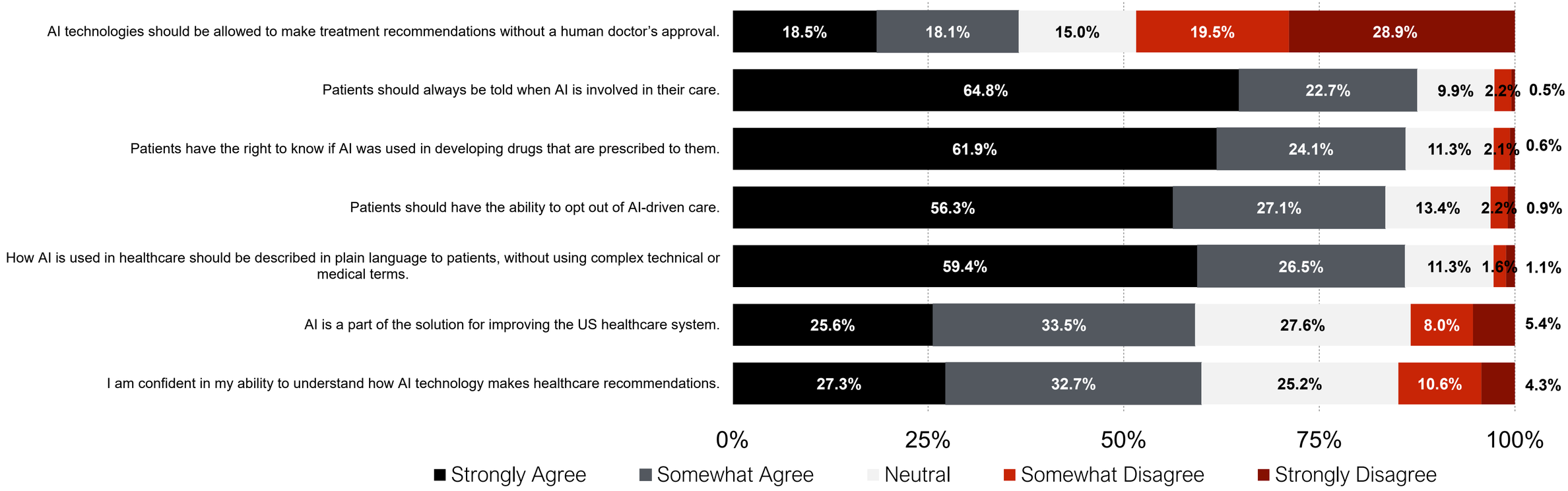
Nearly nine-in-ten U.S. respondents believed that patients "should be told whenever AI is involved in their care" (87.5%) and that they have the "right to know whether AI was used in developing drugs to prescribe" (86.0%). More than four-in-five agreed that patients "should be able to opt out of AI-driven care" (83.4%) and that "AI's role should be communicated clearly and in easy-to-understand language" (85.9%). However, fewer than six-in-ten believed that AI is part of the overall "solution for improving healthcare in the United States" (59.1%).

- Nearly one-half of 18–34-year-olds (48.5%) and two-fifths of 35–54-year-olds (45.0%) believed AI "should be allowed to make treatment recommendations without a doctor's approval," compared to one-fifth of 55+ year-olds (20.4%). Men (42.5%) were also more likely than women (30.9%) to support this autonomy.
- More than three-quarters of individuals with a post-graduate degree believed AI is "part of the solution to improving healthcare" (78.5%), compared to nearly three-fifths of college graduates (60.6%) and roughly one-half of those with some college education (52.9%) or a high school education or less (53.8%).

Perceptions Regarding the Role of AI in Healthcare



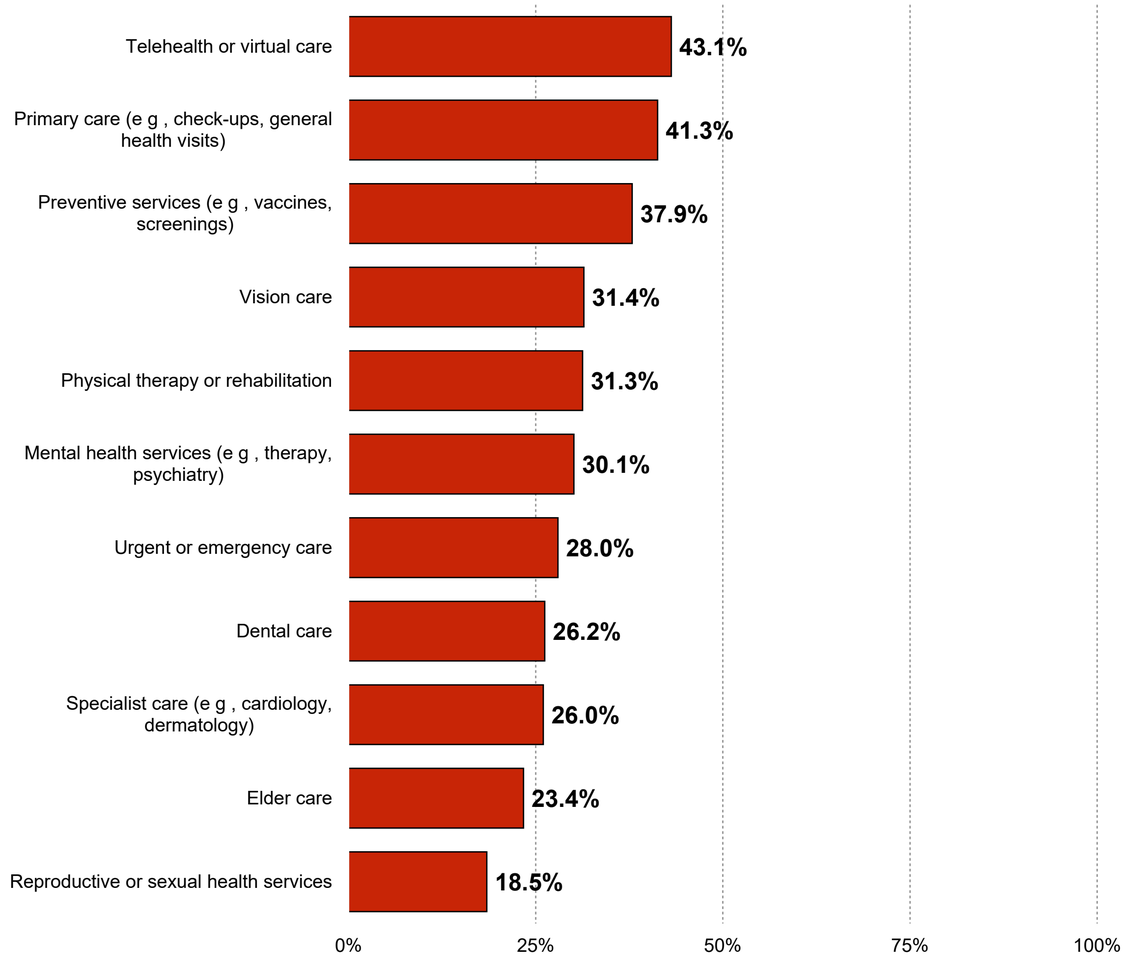
N=1,500
Q: On a scale of 1 to 5, please indicate how strongly you agree or disagree with the following statements:

Healthcare and AI | Care Assistance

U.S. respondents believed that several healthcare areas could benefit from AI technologies. The most commonly identified were “telehealth or virtual care” (43.1%), “primary care” (41.3%), and “preventive services” (37.9%).

- More 18–34-year-olds (34.8%) and 35–54-year-olds (35.8%) than 55+ year-olds (21.6%) believed AI could benefit “mental health services.”
- More 55+ year-olds believed AI would benefit the delivery of “preventive services” (44.6%), compared to 35–54-year-olds (34.0%) and 18–34-year-olds (33.4%).
- Individuals with a post-graduate degree were most likely to see benefits in a variety of areas, including “telehealth” (52.6%), “primary care” (52.5%), and “preventive services” (51.6%).
- Compared to urban respondents, rural respondents were also more likely to see benefits in areas such as “telehealth” (47.2% vs. 41.0%) and “preventive services” (41.4% vs. 35.7%).

Areas of Healthcare that Could Benefit the Most from AI



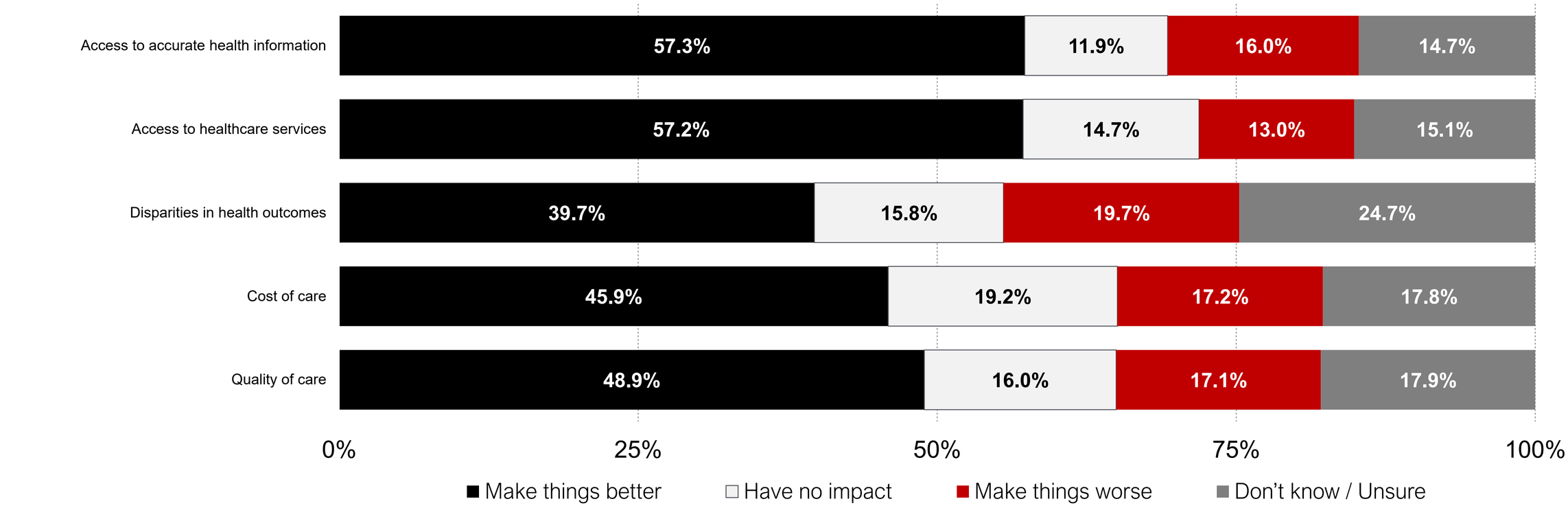
N=1,500
Q: What area(s) of healthcare do you think could benefit from AI technologies? Select all that apply.

Healthcare and AI | Patient's Rights

When asked how AI would affect healthcare, more than one-half of U.S. respondents believed it would improve "access to accurate health information" (57.3%) and "access to healthcare services" (57.2%). Nearly one-half believed AI would improve "quality of care" (48.9%) and "cost of care" (45.9%), while fewer believed AI would reduce "disparities in health outcomes" (39.7%).

- Younger adults (18–34-year-olds and 35–54-year-olds) were more likely to believe AI would help "reduce disparities in health outcomes" (44.2% and 42.2%, respectively) than 55+ year-olds (34.1%).
- Men were more likely than women to believe that AI would improve aspects of healthcare, including – most notably – "quality of care" (57.2% vs. 41.0%).
- Individuals with a high school education or less were less likely to believe AI would improve "access to accurate health information" (53.0%) than individuals with a post-graduate degree (72.2%).

AI Impact on Healthcare Challenges



N=1,500
Q: How would AI impact the following healthcare challenges

Healthcare and AI | Current and Future Role

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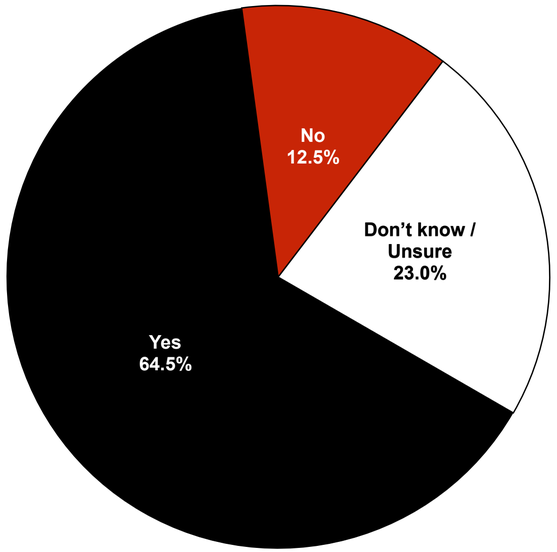
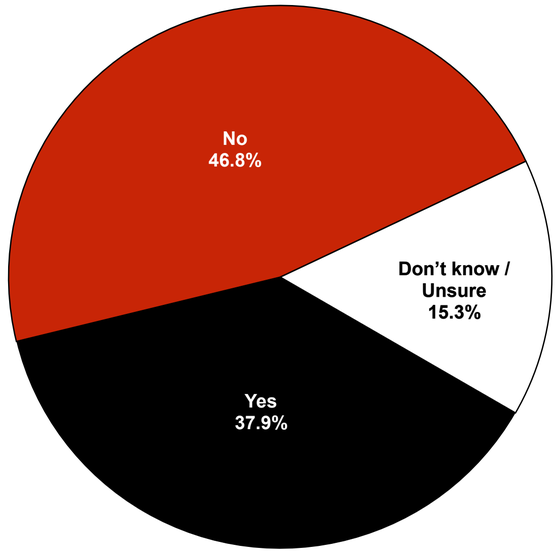
Almost two-thirds of U.S. respondents believed that AI is currently being used to support or deliver healthcare services (64.5%), while nearly one-quarter were unsure (23.0%). However, fewer than two-in-five believed that AI will completely replace human doctors for some tasks within the next 10 years (37.9%).

- More than three-quarters of individuals with a post-graduate degree believed AI is currently being used to deliver healthcare (77.6%), compared to two-thirds of those with a college degree (66.2%), three-fifths of those with some college education (60.7%), and just under three-fifths of those with a high school education or less (59.8%).
- Nearly one-half of 18–34-year-olds (45.0%) and roughly two-fifths of 35–54-year-olds believed AI will replace doctors for some tasks in the next decade (41.0%), compared to fewer than one-third of 55+ year-olds (29.7%).
- Fewer rural respondents (34.9%) believed AI will replace doctors for some tasks in the next decade compared to urban respondents (44.6%).

Belief that AI is Currently Being Used to Support/Deliver Healthcare Services



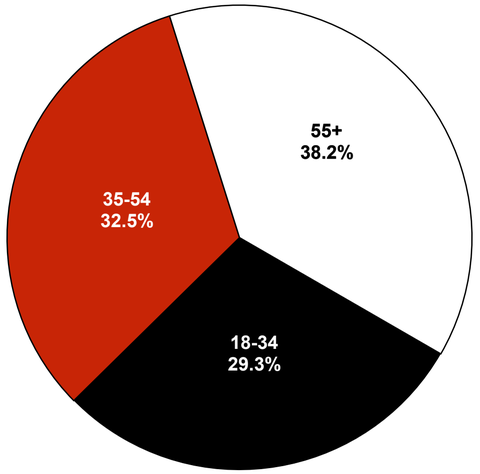
Belief that AI will Replace Doctors in the Next 10 years



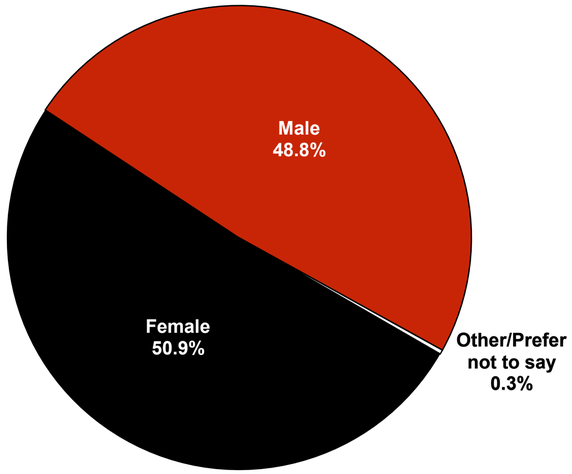
N=1,500
Q: Do you believe AI is currently being used to support or deliver any healthcare services?
Q: Do you believe AI will replace human doctors for some healthcare tasks in the next 10 years?

Demographics | Brief Respondent Profile

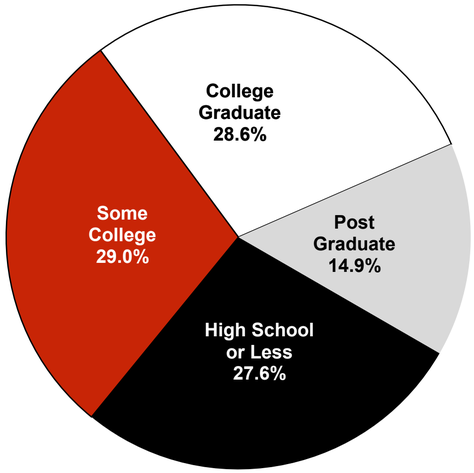
Age



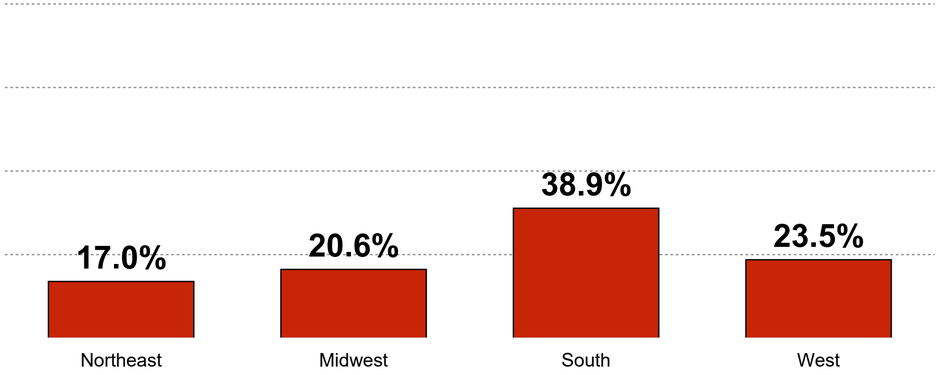
Gender



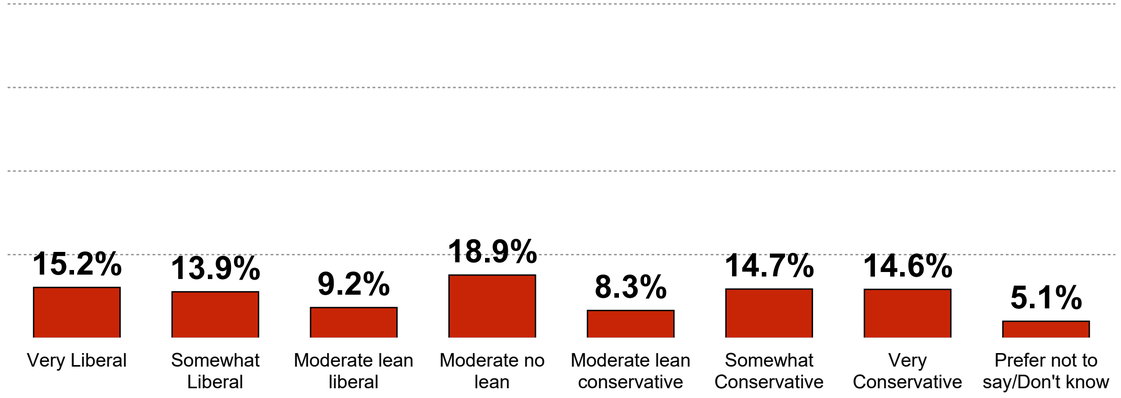
Education



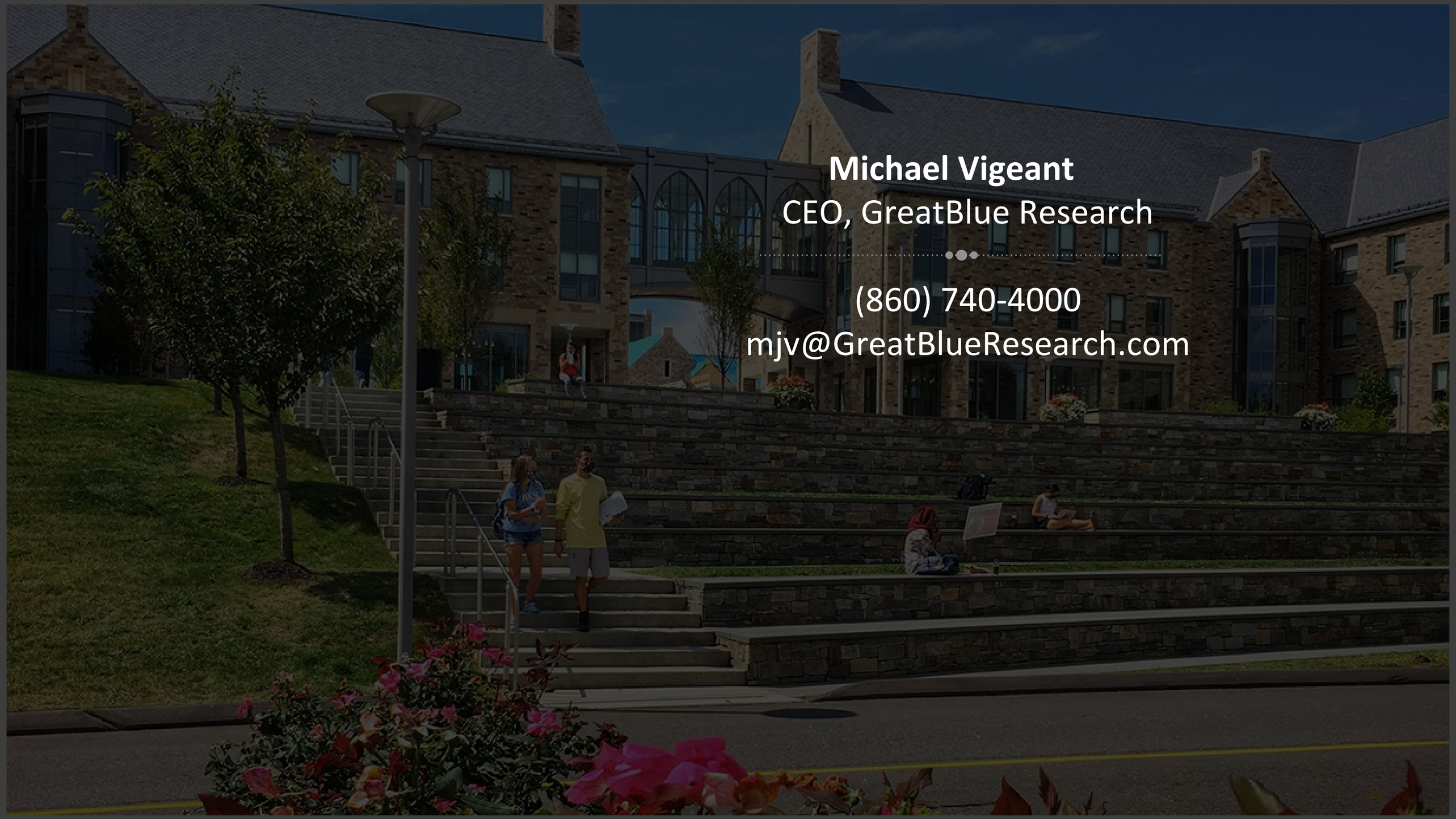
U.S. Region



Political Ideology



N=1500
Q: Which of the following categories best describes your age?
Q: Which of the following genders do you most closely identify with?
Q: What is the highest grade of school you have completed?
Q: Which of the following states do you currently reside in?
Q: When it comes to most political issues, do you think of yourself as:?



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