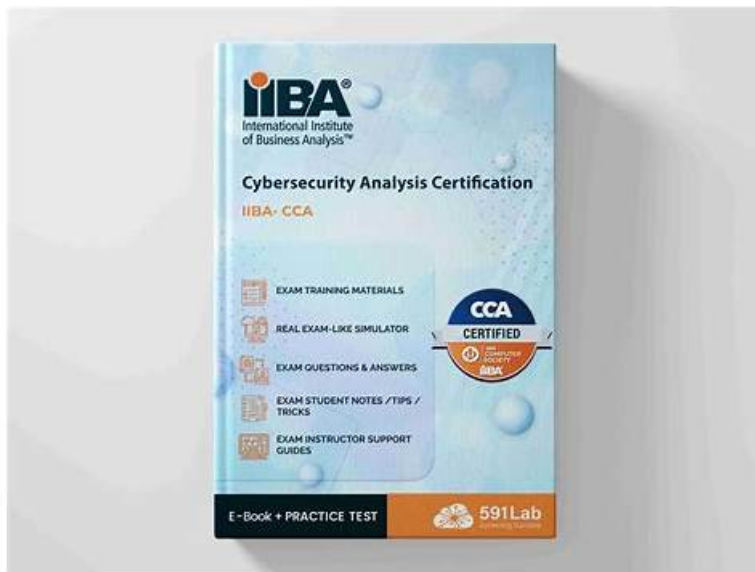


IIBAのIIBA-CCA認定試験に関連する優秀な教材



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>> IIBA-CCA資格認定試験 <<

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IIBA Certificate in Cybersecurity Analysis 認定 IIBA-CCA 試験問題 (Q53-Q58):

質問 # 53

What privacy legislation governs the use of healthcare data in the United States?

- A. PCI-DSS
- **B. HIPAA**
- C. PIPEDA
- D. Privacy Act

正解: B

解説:

In the United States, HIPAA, the Health Insurance Portability and Accountability Act, is the primary federal framework that governs how certain healthcare information must be protected and used. In cybersecurity and compliance documentation, HIPAA is most often discussed through its implementing rules, especially the Privacy Rule and the Security Rule. The Privacy Rule establishes when protected health information may be used or disclosed and grants individuals rights over their health information. The Security Rule focuses specifically on safeguarding electronic protected health information by requiring administrative, physical, and technical safeguards.

From a security controls perspective, HIPAA-driven programs typically include risk analysis and risk management, policies and workforce training, access controls based on least privilege, unique user identification, authentication controls, audit logging, integrity protections, transmission security such as encryption for data in transit, and contingency planning such as backups and disaster recovery. HIPAA also expects organizations to manage third-party risk through appropriate agreements and oversight when vendors handle protected health information.

The other options do not fit the question. The Privacy Act generally applies to U.S. federal agencies' handling of personal records, PIPEDA is a Canadian privacy law, and PCI-DSS is an industry security standard focused on payment card data rather than healthcare data. Therefore, HIPAA is the correct legislation for U.S. healthcare data protection requirements.

質問 # 54

Which of the following should be addressed in the organization's risk management strategy?

- A. Processes for responding to a security breach
- **B. Assignment of an executive responsible for risk management across the organization**
- C. Acceptable risk management methodologies
- D. Controls for each IT asset

正解: B

解説:

An organization's risk management strategy is a governance-level artifact that sets direction for how risk is managed across the enterprise. A core requirement in cybersecurity governance frameworks is clear accountability, including executive ownership for risk decisions that affect the whole organization. Assigning an executive responsible for risk management establishes authority to set risk appetite and tolerance, coordinate risk activities across business units, resolve conflicts between competing priorities, and ensure risk decisions are made consistently rather than in isolated silos. This executive role also supports oversight of risk reporting to senior leadership, ensures resources are allocated to address material risks, and drives integration between cybersecurity, privacy, compliance, and operational resilience programs. Without an accountable executive function, risk management often becomes fragmented, with inconsistent scoring, uneven control implementation, and unclear decision rights for accepting or treating risk. Option A can be part of a strategy, but the question asks what should be addressed, and the most critical foundational element is enterprise accountability and governance. Option B is too granular for a strategy; selecting controls for each IT asset belongs in security architecture, control baselines, and system-level risk assessments. Option C is typically handled in incident response and breach management plans and procedures, which are operational documents derived from strategy but not the strategy itself. Therefore, the best answer is the assignment of an executive responsible for risk management across the organization.

質問 # 55

What is an external audit?

- **A. A review of security-related activities by an independent party to ensure compliance**
- B. A process that the cybersecurity follows to ensure that they have implemented the proper controls
- C. A review of security-related measures in place intended to identify possible vulnerabilities
- D. A review of security expenditures by an independent party

正解: A

解説:

An external audit is an independent evaluation performed by a party outside the organization to determine whether security-related activities, controls, and evidence meet defined requirements. Those requirements are typically drawn from laws and regulations, contractual obligations, and recognized standards or control frameworks. The defining characteristics are independence and attestation: the auditor is not part of the operational team being assessed and provides an objective conclusion about compliance or control effectiveness.

Unlike a vulnerability-focused review (often called a security assessment or technical audit) that primarily seeks weaknesses to remediate, an external audit emphasizes whether controls are designed appropriately, implemented consistently, and operating effectively over time. External auditors usually test governance processes, risk management practices, policies, access control procedures, change management, logging and monitoring, incident response readiness, and evidence of periodic reviews. They also validate documentation and sampling records to confirm that what is written is actually performed.

Option B describes an internal assurance activity, such as self-assessment or internal audit preparation, where the security team checks its own implementation. Option C is closer to a financial or procurement review and is not the typical definition of an external security audit. Therefore, the best answer is the one that clearly captures an independent party reviewing security activities to ensure compliance with established criteria

質問 # 56

Analyst B has discovered unauthorized access to data. What has she discovered?

- A. Hacker
- B. Threat
- C. Ransomware
- **D. Breach**

正解: D

解説:

Unauthorized access to data is the defining condition of a data breach. In standard cybersecurity terminology, a breach occurs when confidentiality is compromised—meaning data is accessed, acquired, viewed, or exfiltrated by an entity that is not authorized to do so. This is distinct from a "threat," which is only the potential for harm, and distinct from a "hacker," which describes an actor rather than the security outcome. A breach can result from external attackers, malicious insiders, credential theft, misconfigurations, unpatched vulnerabilities, or poor access controls. Cybersecurity guidance typically frames breaches as realized security incidents with measurable impact: exposure of regulated data, loss of intellectual property, fraud risk, reputational harm, and legal/regulatory consequences. Once unauthorized access is confirmed, incident response procedures generally require containment (limit further access), preservation of evidence (logs, system images where appropriate), eradication (remove persistence), and recovery (restore secure operations). Organizations also assess scope—what data types were accessed, how many records, which systems, and the dwell time—and then determine notification obligations where laws or contracts apply. In short, the discovery describes an actual compromise of data confidentiality, which is precisely a breach.

質問 # 57

Compliance with regulations is generally demonstrated through:

- **A. independent audits of systems and security procedures.**
- B. review of security requirements by senior executives and/or the Board.
- C. extensive QA testing prior to system implementation.
- D. penetration testing by ethical hackers.

正解: A

解説:

Regulatory compliance is generally demonstrated through independent audits because regulators, customers, and partners typically require objective evidence that required controls exist and operate effectively. An independent audit is performed by a qualified party that is not responsible for running the controls being assessed, which strengthens credibility and reduces conflicts of interest. Cybersecurity and governance documents describe audits as a formal method to verify compliance against defined criteria such as laws, regulations, contractual obligations, or control frameworks. Auditors review policies and procedures, inspect system configurations, sample access and change records, evaluate logging and monitoring, test incident response evidence, and validate that controls are consistently performed over time. The outcome is usually a report, attestation, or findings with remediation plans—artifacts commonly used to prove compliance.

A Board or executive review supports governance and oversight, but it does not, by itself, provide independent verification that controls are functioning. QA testing focuses on product quality and functional correctness; it may include security testing but does not typically satisfy regulatory evidence requirements for ongoing operational controls. Penetration testing is valuable for identifying exploitable weaknesses, yet it is a point-in-time technical exercise and does not comprehensively demonstrate compliance with procedural, administrative, and operational requirements such as access governance, retention, training, vendor oversight, and continuous monitoring. Therefore, independent audits are the standard mechanism to demonstrate compliance in a defensible, repeatable way.

質問 # 58

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