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**Earnscliffe Research and
Communications**

Report on the First Ministers'
Meeting on the Future of Health
Care:
Monitoring Changes in Public
Opinion

Presented to: Health Canada

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Introduction

Veraxis Research and Communications is pleased to present this report to Health Canada on public opinion surrounding the First Ministers' Meeting (FMM) on the future of health care conducted September 8-15, 2004.

The research was comprised of a telephone survey of a random sample of 2,569 Canadians which yields a margin of error of +/- 1.9 percent, 19 times out of 20. The research was designed to measure potential changes in public opinion as the FMM progressed. As a consequence, a baseline sample of 1,027 Canadians was completed on September 8-9, 2004. The margin of error for this baseline data is +/-3.1 percent.

The remaining sample of 1,542 was collected over the following six evenings, averaging 257 per night, from September 10-15, 2004. For each night's results there is a margin of error of +/- 6.0 percent. Many graphs provide a three-day rolling figure to provide a smaller margin of error in noting changes through the duration of the meeting. These three-day rolling data points have a margin of error of +/- 3.5 percent. All data was statistically weighted proportionate to the demographics of the Canadian population.

Objectives

The research was designed to accomplish several objectives:

- #1 ○ Determine the level of public attention to health care and assessments of the quality of the health care system in Canada;
- #2 ○ Explore public perceptions of problems in the health care system and determine the general and comparative support for proposed reforms to the system such as reducing waiting times, home care, national pharmacare and catastrophic drug care;
- #3 ○ Determine awareness of, and views on, the First Ministers' Meeting;
- #4 ○ Examine public perceptions and expectations of federal/provincial/territorial governments in the health care system;
- #5 ○ Assess whether the public perceptions of health care reform have shifted from the 2003 FMM;
- #6 ○ Explore public preferences for funding accountability regimes particularly relating to provincial/territorial service delivery and federal government funding;

- Monitor change in public opinion throughout the course of the FFM; and
- Measure public opinion about the televised format of the debate and to identify viewership of the event.

Presentation of Findings

This research was undertaken to measure changes in public perceptions over the course of the FMM. A second request of Health Canada was to use the data collected over the 7 days as a cross sectional picture of public opinion regarding health care and the FMM. Treating the 2,569 cases as cross sectional rather than as a time series ignores any changes in public opinion during the course of the FMM. However, it did allow us to use the larger sample size to explore demographic and attitudinal differences associated with health care reform and government roles and responsibilities. When single numbers are presented for measures, this is the cross sectional – 7 day average – value.

Executive Summary

Canadians are concerned about the state of the health care system. Public attention to this issue is high with almost three-quarters of Canadians (74%) saying they follow the issue at least somewhat closely. A plurality of Canadians (43%) believes the system has deteriorated in the last two years while only 14 percent believe that it has improved.

Two demographic groups emerged as significantly more interested in and concerned about the health care system – women and Canadians over the age of 55. Health care reforms are also more salient to women and older Canadians. Lower income respondents also differed significantly on several measures as did recent users of the system. Regional differences were often stark.

A majority of Canadians (65%) see the reform of the health care system as requiring both more federal funding and a more efficient management of existing resources. During the course of the First Ministers' Meeting, the perception that the biggest problem was a lack of federal funding declined slightly.

Neither level of government has convinced the public that they are providing leadership in fixing the health care system. Only 29 percent of Canadians believe that the federal government has provided leadership on this issue and 32 percent believe that the provincial governments have provided leadership.

The reform that is seen by the public to be the most significant to the quality of the health care system is to reduce wait times. No other proposed reform including a national pharmacare program came close to the salience of the reduction of wait times. There is widespread support for the position that the federal government's role extends far beyond the provision of a national pharmacare plan to include setting and safeguarding a national objectives for a national public Medicare system. By a large margin, the public would prefer that increased funding go to improving the existing system such as wait times before adding new programs to the system.

Expectations of accountability were widely distributed. For instance, two-thirds of the public would prefer the provincial governments be responsible to either the federal government or an independent agency rather than simply to their own electorates. Yet, there is strong support for flexibility in how provinces spend their health care dollars in order to meet the particular needs within the province. In fact, the data reveal that the public is considerate of federal-provincial accountability regimes in an area that is largely under provincial jurisdiction but heavily dependent on federal financing and defined by the Canada Health Act.

While not dichotomous in practice, or in fact, in the data, there do appear to be predispositions to be federally aligned or provincially aligned. This extends to perceived responsibility, the relative benefits of perceived positions, accountability structures and funding regimes.

A majority of Canadians (54%) were aware of the FMM, and awareness rose through the duration of the meeting. There was overwhelming support for televising the meeting and an expectation that the public format would increase the likelihood of a deal being struck. As the FMM proceeded, public expectations for an agreement between the federal and provincial/territorial governments grew. Concern over the inability to produce an agreement was high. Over 80 percent of Canadians believed the health care system would deteriorate if the governments failed to reach an agreement. If an agreement had not been reached, the public would have laid the blame at the feet of the federal government rather than the provincial governments (by a 2 to 1 margin).

Most public attitudes remained very stable throughout the FMM. There was a move in the direction of identifying with the provincial position in the talks. However, although the public *identified* with the provincial government, when forced to choose between the provincial position and the federal position, there was greater support for the federal government's position in certain areas.

For instance, at the start of the FMM, September 8-10, 49 percent of Canadians agreed that the Medicare is a national program and that the federal government has a broad role beyond being only involved in pharmacare such as ensuring national standards are upheld and there is compliance with the Canada Health Act. Support for this federal position was in the context of a trade-off with the provincial position that the federal government's role in health care should be to create a national pharmacare program which would reduce the financial burden on the provinces and allow them to spend more money in other areas such as reducing waiting times. Support for a broad federal role in a national Medicare program increased to 57 percent - an 8-point increase - by week's end.

Résumé

Les Canadiens et les Canadiennes sont inquiets quant à l'état du système de soins de santé. Le public accorde une grande importance à cette question, avec presque trois quarts de la population canadienne (74 %) qui affirme suivre de près ou plutôt de près ce dossier. Un grand nombre de Canadiens et de Canadiennes (43 %) croit que l'état du système s'est détérioré au cours des deux dernières années, alors que seulement 14 pour cent d'entre eux sont d'avis qu'il s'est amélioré.

Deux groupes démographiques se démarquent quant à leur intérêt et à leurs préoccupations pour le système de soins de santé : les femmes et les Canadiens et les Canadiennes âgés de plus de 55 ans. Les femmes et les personnes âgées accordent en outre une plus grande importance aux réformes du système de soins de santé. Les gens à faible revenu se différencient aussi de manière significative sur plusieurs points, ainsi que les récents utilisateurs du système. Les différences régionales sont souvent très marquées.

La majorité des Canadiens et des Canadiennes (65 %) considère que la réforme du système de soins de santé nécessite à la fois un financement fédéral plus important et une gestion plus efficace des ressources existantes. Durant la période où a eu lieu la Rencontre des premiers ministres (RPM), le nombre de personnes d'avis que le manque de financement fédéral constitue le plus important problème a légèrement diminué.

Aucun des ordres de gouvernement n'a réussi à convaincre le public qu'il faisait preuve de leadership quant au réaménagement du système de soins de santé. Seuls 29 pour cent des Canadiens et des Canadiennes estiment que le gouvernement fédéral fait preuve de leadership dans ce dossier, alors que ce taux se situe à 32 pour cent pour les gouvernements provinciaux.

La réforme que le public considère la plus importante pour la qualité du système de soins de santé est la réduction des temps d'attente. Toutes les autres réformes proposées, y compris la mise en œuvre d'un programme national d'assurance médicaments, se classent loin derrière. Un grand nombre sont en outre d'opinion que le rôle du gouvernement fédéral s'étend au-delà de la mise en place d'un régime d'assurance médicaments, pour inclure l'établissement et la protection d'objectifs nationaux pour le système public d'assurance maladie. La population préférerait, par une large majorité, que la hausse du financement serve à améliorer le système existant, p. ex., par une réduction des temps d'attente, plutôt qu'à ajouter de nouveaux programmes.

Les attentes en termes de responsabilisation varient grandement. Tout d'abord, les deux tiers de la population préférerait que les gouvernements provinciaux

soient tenus de rendre compte au gouvernement fédéral ou à un organisme indépendant plutôt que simplement à leur électorat. Cependant, une grande proportion des répondants s'entend pour dire qu'une certaine souplesse doit être accordée aux provinces pour la gestion des fonds du système de santé afin de répondre aux besoins particuliers de chaque province. En fait, les données révèlent que le public demeure circonspect sur la question des cadres de responsabilisation fédéraux-provinciaux dans ce secteur de compétence principalement provinciale, tout en comptant largement sur le financement du fédéral tel que défini dans la *Loi canadienne sur la santé*. Bien que non opposées en pratique ou dans les faits, les données semblent indiquer une prédisposition à s'aligner uniquement sur les positions fédérales ou provinciales. Cela s'applique à la responsabilité perçue, aux bénéfices relatifs des positions présumées, aux cadres de responsabilisation et aux formes de financement.

Une majorité des Canadiens et des Canadiennes (54 %) était au courant de la tenue de la RPM, donnée qui a augmenté durant la période où a eu lieu la rencontre. Il y avait un large appui à une retransmission télévisée de la rencontre, et l'espérance que sa diffusion publique augmenterait les chances d'en arriver à un accord. Tout au long de la tenue de la RPM, les espérances du public relativement à la conclusion d'un accord entre le fédéral et les provinces/territoires ont augmenté. Les préoccupations relatives à l'incapacité d'en arriver à un accord étaient élevées. Plus de 80 pour cent des Canadiens et des Canadiennes ont affirmé croire que le système de soins de santé allait se détériorer si les gouvernements étaient incapables d'en arriver à un accord. Si aucun accord n'avait été conclu, la population aurait fait porter le blâme au gouvernement fédéral plutôt qu'aux gouvernements provinciaux (dans une proportion de 2 pour 1).

La plupart des attitudes du public sont demeurées très stables tout au long de la tenue de la RPM. On a observé une tendance à s'identifier à la position provinciale durant les pourparlers. Cependant, bien que le public s'identifie au gouvernement provincial, lorsque les répondants sont appelés à choisir entre les positions provinciale et fédérale, l'appui au gouvernement fédéral s'avère plus élevé dans certains domaines.

Au début de la RPM, qui a eu lieu du 8 au 10 septembre, 49 pour cent des Canadiens et des Canadiennes étaient par exemple d'accord pour dire que l'assurance maladie est un programme national, que le rôle du gouvernement fédéral s'étend au-delà d'une participation à un régime d'assurance médicaments, et qu'il est entre autres responsable d'assurer le respect des normes nationales et la conformité à la *Loi canadienne sur la santé*. L'appui à cette position fédérale s'est exprimé lorsque confrontée à la position provinciale, selon laquelle le rôle du gouvernement fédéral se limite à la mise en œuvre d'un régime d'assurance médicaments, qui réduirait le fardeau financier des provinces et leur permettrait de consacrer davantage de fonds à d'autres priorités, telles

que la réduction des temps d'attente. À la fin de la semaine, l'appui à un rôle plus important du fédéral dans un programme national d'assurance maladie atteignait 57 pour cent – soit une hausse de 8 points.

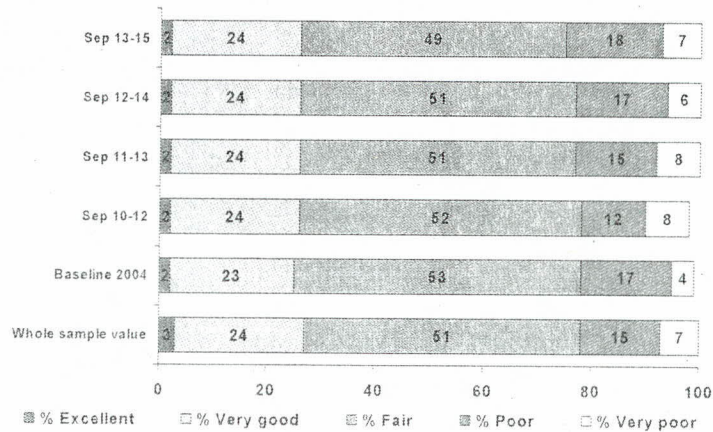
State of the Health Care System

Public evaluations of the state of the health care system follow the bell curve of distribution. Just over one-quarter of Canadians (27%) rate the system as 'excellent' or 'very good', 51 percent of Canadians rate the system as 'fair' and the remaining 22 percent Canadians rate the system as 'poor' or 'very poor'.¹ Public assessments of the state of the health care system have not changed significantly since the February 2003 FMM nor did assessments change through the duration of the 2004 FMM.



Q1

Overall, how would you rate the state of the health care system in Canada today? Is it excellent, very good, fair, poor or very poor?



Ontarians are the most likely to rate the system as excellent or good while residents of the Prairies, and British Columbia are the most likely to rate it poorly.

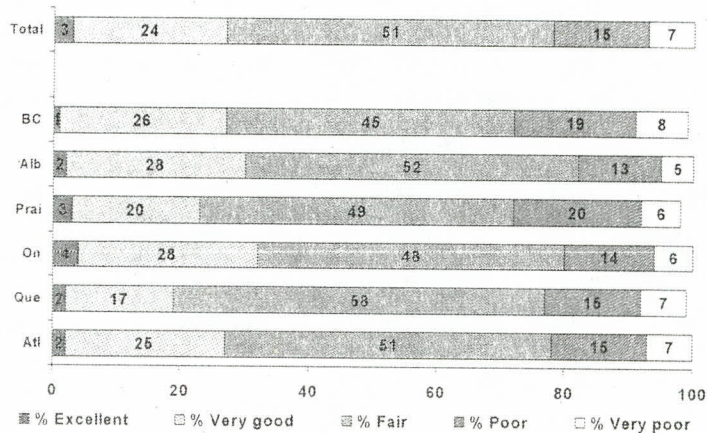
¹ As discussed in the methodology section, unless otherwise stated, these numbers are based on the cross-sectional treatment of the data which means that the value is arrived at using all seven days worth of observations.



State of the Health Care System: Regions



Overall, how would you rate the state of the health care system in Canada today? Is it excellent, very good, fair, poor or very poor?



Persons 35 years of age and older are significantly more likely to rate the system poorly than are younger respondents: Of those aged under 35, 17 percent rated it as poor; 23 percent of those aged 35-55 and 25 percent of those aged 55 and older said the same. Persons making less than \$30,000 per year evaluate the health care system more poorly: 25 percent of this group says it is in a poor state, compared to 19 percent for those earning between \$30,000 and \$70,000 and 21 percent of those earning more than that. However, even though significant, that is we can expect it is an actual difference and not a sample error, it is not substantial. For instance, while 25 percent of those making less than \$30,000 rate the health care system as poor or very poor, 20 percent of those making more than \$30,000 also rate it as poor. There are no differences in perceptions of the state of the health care system based on gender or whether a respondent has recently used the system.

Interestingly, evaluations of the state of the health care system generally do not differ based on attitudinal differences such as awareness of health care issues. Those who rate the system more poorly, however, are more likely to say that the system needs more money to reduce wait times even in the absence of a federal-provincial agreement.

Health care as a priority

Given the moderate rating of the system, it is not surprising that health care reform is systematically the most important issue to Canadians. Self reported attention to health care issues was high. One-quarter of Canadians (24%) reported they followed issues related to health care 'very closely' and another 50 percent said they follow health care issues 'somewhat closely'. Eighteen percent say they do "not follow it very closely" and only 7 percent of Canadians said they "do not follow this issue at all".

The FMM did not increase public attention to issues surrounding health care. As the FMM drew to a close, 72 percent of Canadians were following health care very or somewhat closely. Interestingly, while high, public attention to health care issues in 2004 is almost 10 percentage points less than it was immediately post-2003 FFM.

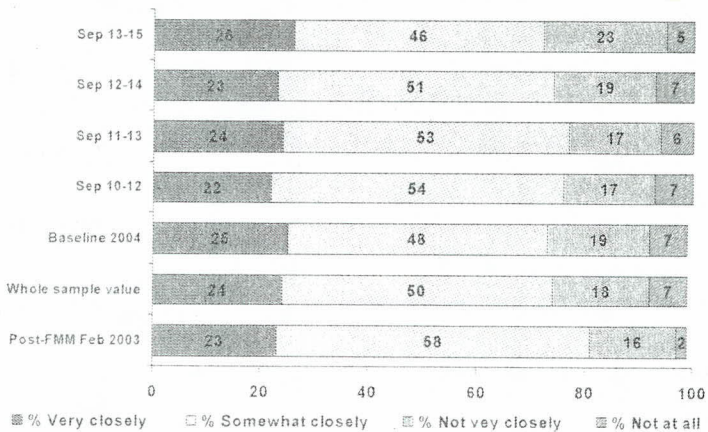


Awareness of Health Care Issues

Health Canada Santé Canada

Q2

How closely would you say you follow issues related to health care in Canada? Would you say you follow them very closely, somewhat closely, not very closely or not at all?



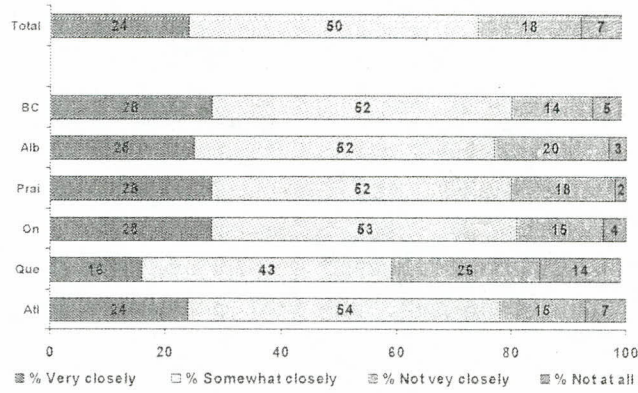
Residents of Quebec are less likely than other Canadians to follow health care issues even though they are less satisfied with the state of the health care system.



Awareness of Health Care Issues: Regions



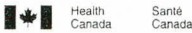
How closely would you say you follow issues related to health care in Canada? Would you say you follow them very closely, somewhat closely, not very closely or not at all?



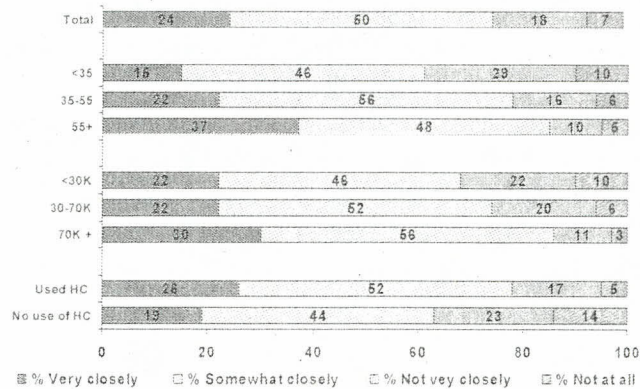
There are significant differences in the attention paid to health care issues by income, by age, and by use of the health care system. Older respondents are more likely to pay close attention to these issues. This is a linear relationship with attention increasing as age increases. Higher income respondents also pay greater attention to these issues. And recent users of the system (within the last 12 months) are significantly more likely to be following health care issues than those who have not used the system.



Awareness of Health Care Issues: Demographics



How closely would you say you follow issues related to health care in Canada? Would you say you follow them very closely, somewhat closely, not very closely or not at all?



Quality of the Health Care System

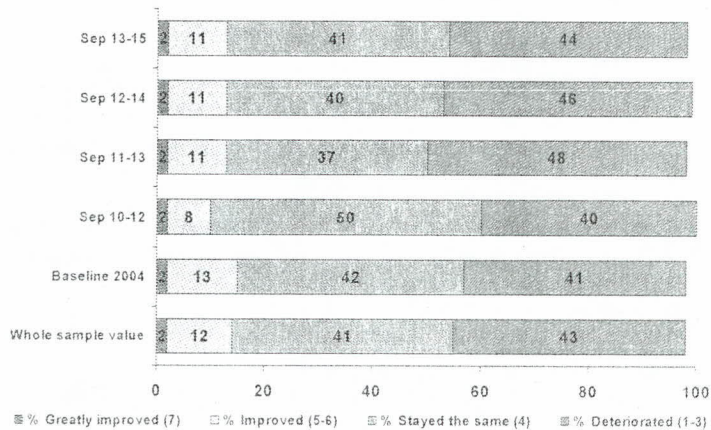
While evaluations of the state of health care are moderate, concern over deteriorating quality is widely felt among the public. Forty-three percent of Canadians feel that health care has deteriorated in the past two years compared to just 14 percent who believe that it has improved. Forty-one percent of Canadians believe that there has been no change for better or worse in the past two years.



Quality of Health Care

Q3

In your opinion, has the quality of health care in Canada over the past two years deteriorated, improved, or stayed the same? Please respond using a 7-point scale where 1 means greatly deteriorated, 7 means greatly improved, and the mid-point 4 means stayed the same.



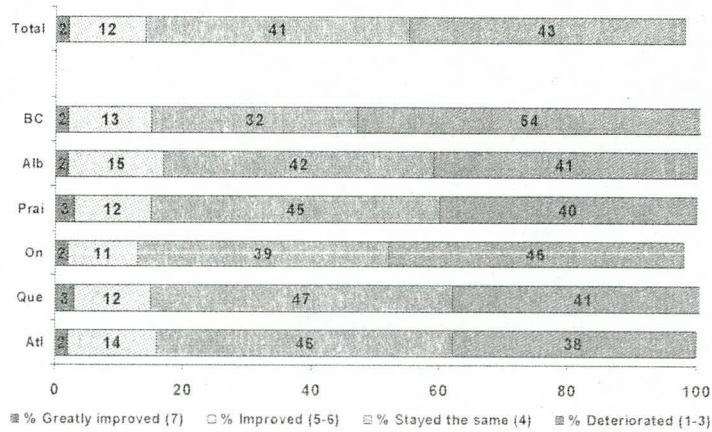
This assessment is not associated with other attitudes such as support for either the federal or provincial positions or views on funding and wait times. It is however, associated with differences in region of the country. Residents of British Columbia (54%) are the most likely to believe the health care system has deteriorated in the last two years. Quebecers (47%) are the most likely to contend that the quality of the health care system has remained static.



Quality of Health Care : Regions



In your opinion, has the quality of health care in Canada over the past two years deteriorated, improved, or stayed the same? Please respond using a 7-point scale where 1 means greatly deteriorated, 7 means greatly improved, and the mid-point 4 means stayed the same



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There are no significant differences in perceived changes in the health care system by demographics or psychographics.

Who is Responsible for Improvements to the System?

Canadians see the provincial government particularly as responsible for improvements to the health care system. Fifty percent of Canadians see the provincial government as responsible for improvement compared to just under one-third (31%) who see the federal government as primarily responsible for improvements. Nineteen percent of Canadians said they 'didn't know' or failed to offer a response. Those who agree with the provincial position in the FMM were significantly more likely (67%) to believe the responsibility for improvement rests with the provinces.

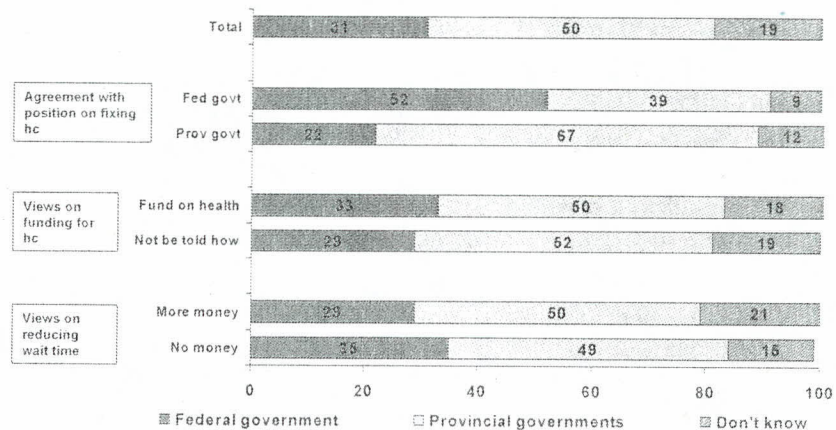


Responsibility for the Quality of Health Care : Issues

Health Canada Santé Canada

Q4

Which level of government, federal or provincial, would you say is most responsible for the improvement?



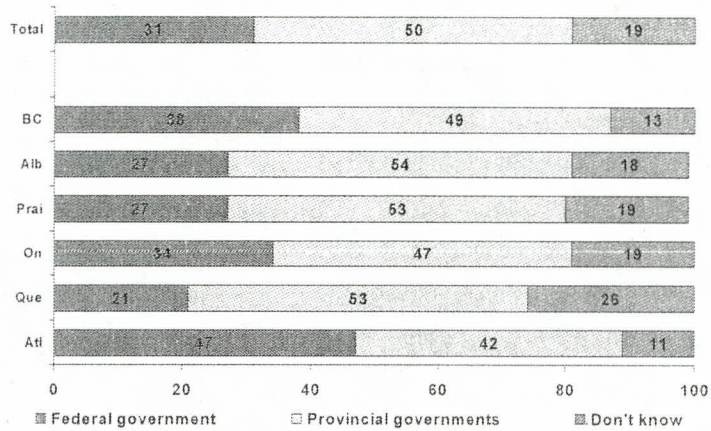
Residents of the Atlantic region (47%) and British Columbia (38%) are significantly more likely than other Canadians to believe that the federal government is responsible for improvements to health care.



Responsibility for the Quality of Health Care : Regions



Which level of government, federal or provincial, would you say is most responsible for the improvement?



17

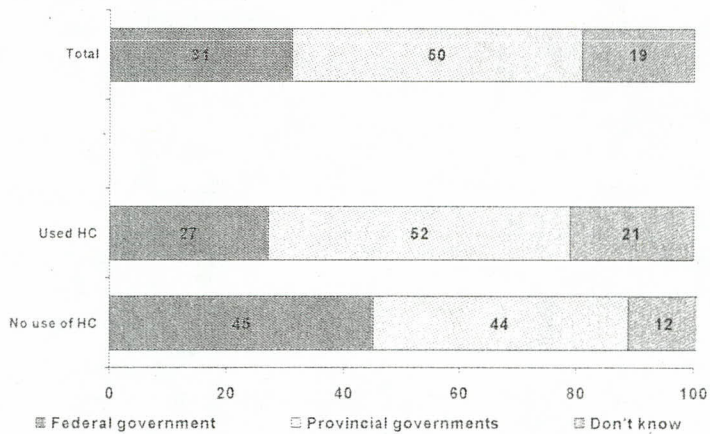
There are no significant differences based on gender, age, or income. Respondents who have used the health care system in the last 12 months are substantially less likely to believe it was the federal government (27%) who was responsible for improved health care than are non-users (45%).



Responsibility for the Quality of Health Care : Use of HC



Which level of government, federal or provincial, would you say is most responsible for the improvement?



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Who is Responsible for Deterioration in the System?

While the provincial government is seen to be primarily responsible for improvements to the system, the blame for the widely perceived deterioration of the system is seen to rest with the federal government. Forty-seven percent of Canadians believe the federal government is most responsible for the deterioration while 34 percent believe the provinces are. Nineteen percent said they didn't know.

Interestingly, assessments of who is to blame are strongly associated with awareness of the FMM meeting and with policy preferences for fixing the system. For instance, the more aware of the upcoming FMM a respondent was, the more likely they were to place the blame for the deterioration at the feet of the federal government.

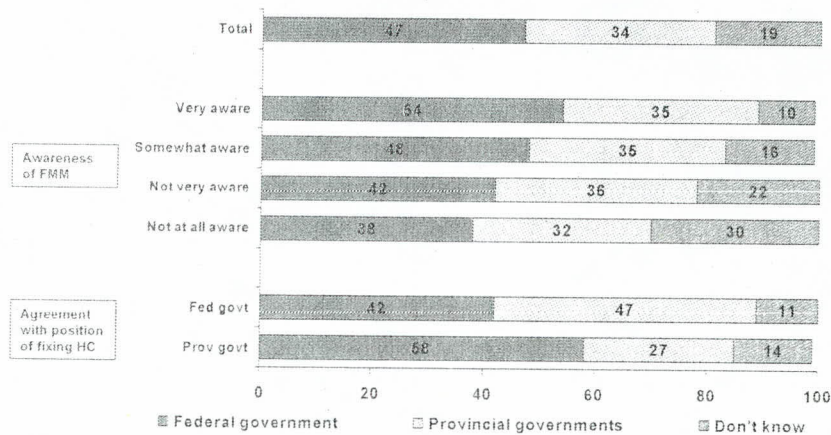
Those who agree with the provincial position (58%) on fixing health care are significantly more likely than those who agree with the federal position (42%) to blame the federal government for the deterioration.



Responsibility for the Quality of Health Care : Issues


Q5

Which level of government, federal or provincial, would you say is most responsible for the deterioration?





Additionally, the decision to blame either the federal or the provincial governments for deterioration in the health care is associated with respondent attitudes on other federal-provincial positions. For instance, whether or not wait times are a solely provincial jurisdiction, whether federal monies should be

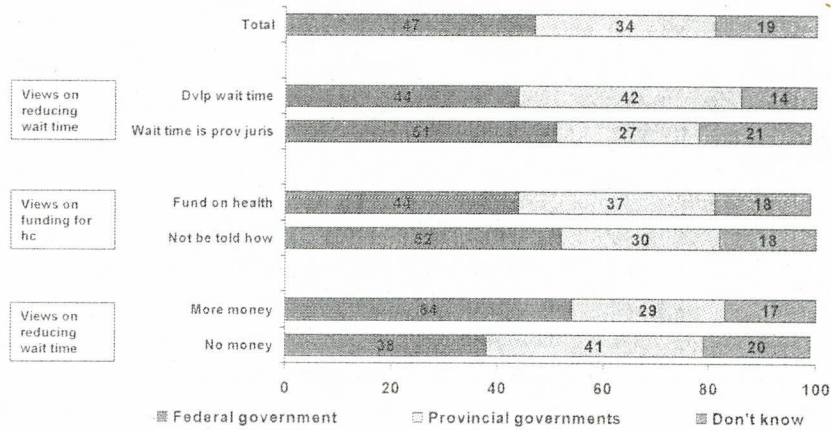
transferred even in the absence of a federal-provincial agreement and whether or not the federal government should oversee and monitor provincial strategies for the reduction of wait times are all associated with a respondent's notion of who is to blame for deterioration to the system. As seen in the graph, those who want additional funding for the provinces even in the absence of a federal-provincial agreement are more likely than those who believe more federal funds should be transferred only with an agreement in place to blame the federal government for deterioration to the health care system.



Responsibility for the Quality of Health Care : Issues

Which level of government, federal or provincial, would you say is most responsible for the deterioration?



Public attitudes about who is to blame for the deterioration in the health care system, the provincial or the federal government, also differ by region of the country. For instance, British Columbians (44%) are significantly more likely than residents of other regions of the country to blame the provincial government while residents of the Prairies (65%) and Atlantic Canada (59%) are most likely to blame the federal government.

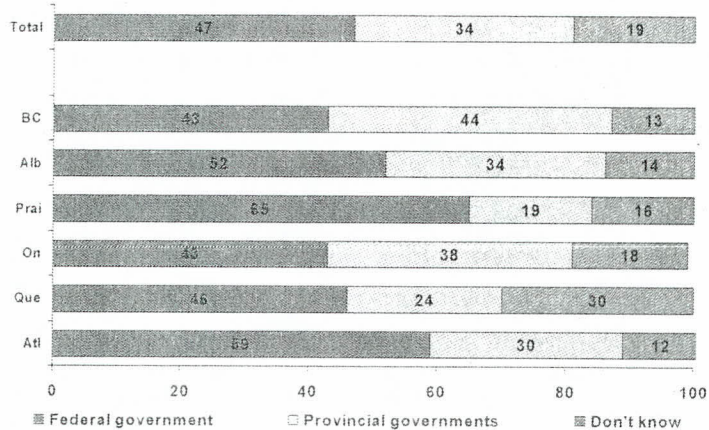
Men and upper income Canadians are more likely to blame the federal government than are women and lower income Canadians (under \$70,000). For instance, 54 percent of men believe that the federal government is primarily responsible for deterioration to the system compared to 41 percent of women, and 54 percent of those making over \$70,000 believe the federal government is primarily responsible compared to just 45 percent of those making less than \$70,000.



Responsibility for the Quality of Health Care : Regions

Health Canada Santé Canada

Which level of government, federal or provincial, would you say is most responsible for the deterioration?



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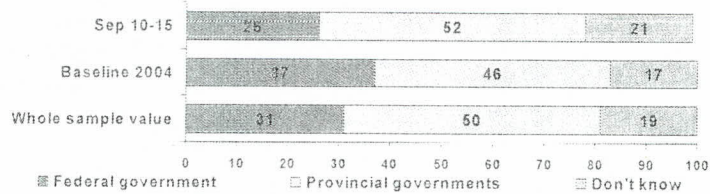
At the outset of the FMM, the provincial government was seen as primarily responsible for improvements to the system while the federal government was seen as the most responsible for deterioration to the health care system. As the FMM proceeded, the public was even more likely to attribute improvements to the provincial rather than the federal government. Perceived onus of responsibility for deterioration remained unchanged through the FMM.



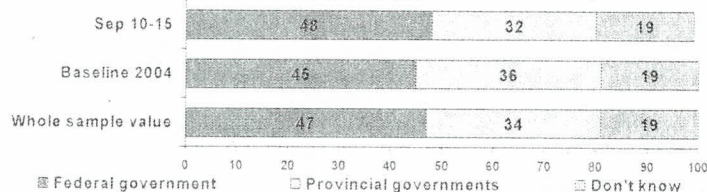
Responsibility for the Quality of Health Care

Health Canada Santé Canada

Which level of government, federal or provincial, would you say is most responsible for the improvement?



Which level of government, federal or provincial, would you say is most responsible for the deterioration?



7

What Does the Health Care System Need?

Canadians see the reform of the health care system as requiring both more funding and more efficient management of existing resources. Statements testing relative culpability of federal funding insufficiencies versus mismanagement of current funds reveal that the public is most likely to believe it is a combination of the two that has led to the need for health care reform. Each potential problem (a lack of federal funding and mismanagement of existing resources) was tested on its own, and then respondents were asked to choose among either problem or a combination of the two problems. Both arguments have resonance with the public, yet the public is most likely to see the problems with the health care system as a combination of insufficient federal funding and poor management of resources.

More Federal Funding

For instance, fifty percent of Canadians agree that the biggest problem with the health care system is that the federal government is not paying its fair share. This number declined over the week of the FMM by about 5 points. At the outset of the meeting, it was at post-FMM 2003 levels, with 56 percent agreeing, but by the end of the week it was down to 51 percent.



Problems With the Health Care System

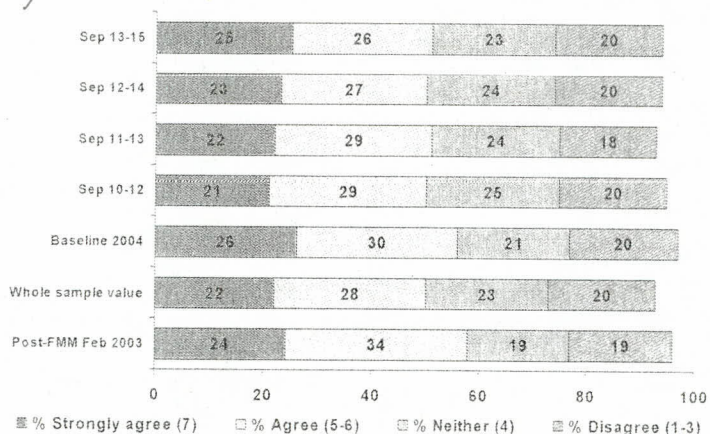


Using a scale of 1 to 7, where 7 means you strongly agree, 1 means you strongly disagree and the mid-point 4 means you neither agree nor disagree, please tell me if you agree or disagree with the following statements about health care in Canada.

Q6
(a-b)

a)

The biggest problem with the health care system is...
The federal government is not paying its fair share

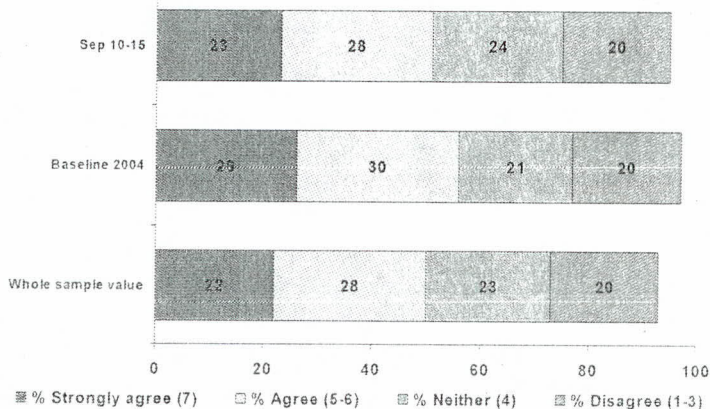




Problems With the Health Care System

Using a scale of 1 to 7, where 7 means you strongly agree, 1 means you strongly disagree and the mid-point 4 means you neither agree nor disagree, please tell me if you agree or disagree with the following statements about health care in Canada.

The biggest problem with the health care system is ...
The federal government is not paying its fair share

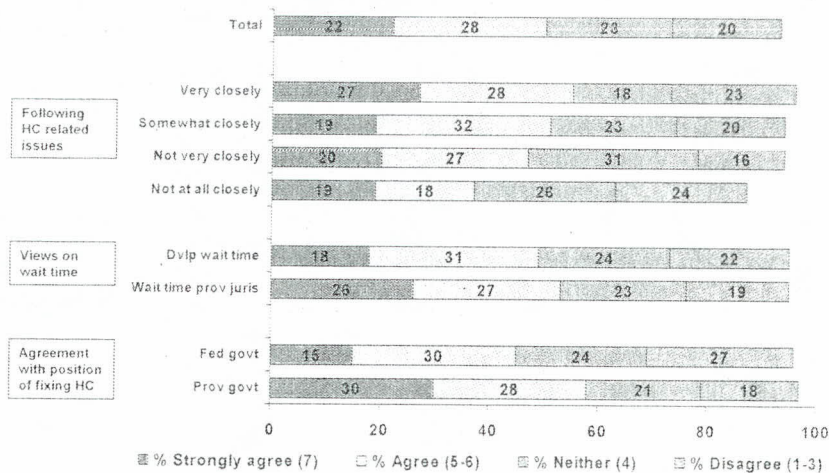


The closer one follows health care related issues, the more likely one is to agree that the federal government is not paying its fair share. Also, those who agree with the provincial position on fixing the health care system (58%, compared to 45% for those who agree with the federal position) are more likely to agree with this statement as well.



Problems With the Health Care System : Issues

The biggest problem with the health care system is ...
The federal government is not paying its fair share




There are no differences in this belief based on region gender, income, age or use of the health care system.

Yet when asked to choose among three options: 1) better management of existing resources, 2) more federal money or 3) a combination of both, less than ten percent of Canadians believe that the system only needs more money.

Better Management of Existing Resources

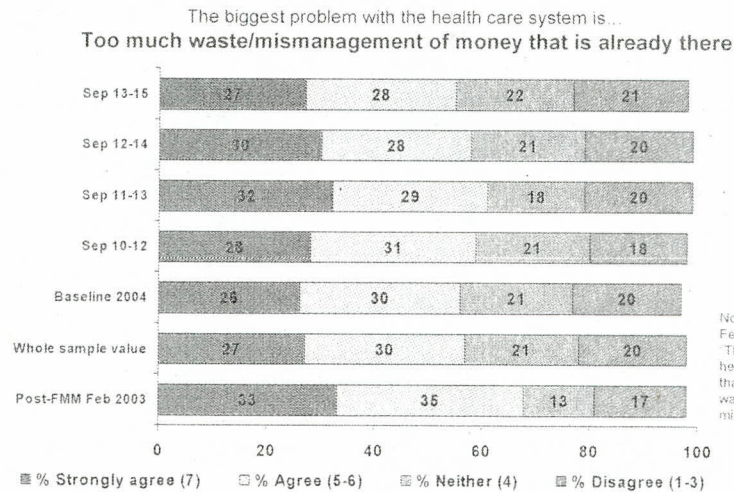
While half of Canadians agree that the biggest problem with the system is a lack of federal money, even more Canadians believe that the greatest problem with this system is mismanagement and waste of existing health care resources. The notion that the biggest problem facing the health care system is waste and mismanagement of existing monies, resonates with 57 percent of Canadians, yet just one-quarter of Canadians (25%) believe that the system doesn't need more money but simply better management. The belief that mismanagement is the major culprit in deteriorating health care has declined by 11 points since the 2003 FFM.



Problems With the Health Care System

Using a scale of 1 to 7, where 7 means you strongly agree, 1 means you strongly disagree and the mid-point 4 means you neither agree nor disagree, please tell me if you agree or disagree with the following statements about health care in Canada

(b)



Not surprisingly, those who believe that the federal government should not transfer more monies (61%) in order to reduce wait times without a federal-provincial agreement are more likely to believe mismanagement is the greatest problem with the health care system than are those who believe more money is needed (54%).

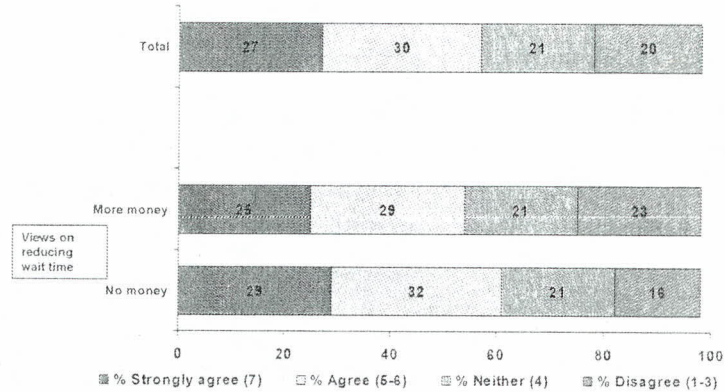


Problems With the Health Care System

Using a scale of 1 to 7, where 7 means you strongly agree, 1 means you strongly disagree and the mid-point 4 means you neither agree nor disagree, please tell me if you agree or disagree with the following statements about health care in Canada.

The biggest problem with the health care system is...

Too much waste/mismanagement of money that is already there



In every province except Quebec, more people think mismanagement of existing money is the biggest problem than think that lack of federal funding is the biggest problem. In fact, Quebec residents (52%) are significantly less likely to agree that the biggest problem is too much waste and mismanagement of money that is already there than are residents of other provinces.

There are no other demographic differences.

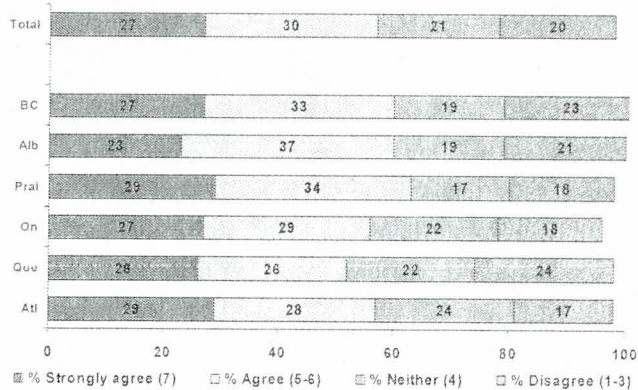


Problems With the Health Care System: Regions

Using a scale of 1 to 7, where 7 means you strongly agree, 1 means you strongly disagree and the mid-point 4 means you neither agree nor disagree, please tell me if you agree or disagree with the following statements about health care in Canada.

The biggest problem with the health care system is...

Too much waste/mismanagement of money that is already there



A Combination of Better Management and More Funding

When asked to choose among three options: 1) the system needs more money and fundamental change; 2) the system doesn't need more money, just better management; or 3) the system only needs more money, two-thirds of the public (65%) think the systems needs more money and fundamental changes to management. A quarter (25%) believes it just needs to be better managed, while a small group (9%) believes what is needed is just more money.

The public preference for both more money and better management remained relatively constant from baseline (65%) to the end of the FMM (67%). Additionally, this is an enduring opinion and has remained constant from the 2003 FFM. In fact, opinion on these three choices stayed quite constant from last year as well as throughout this year's FMM.

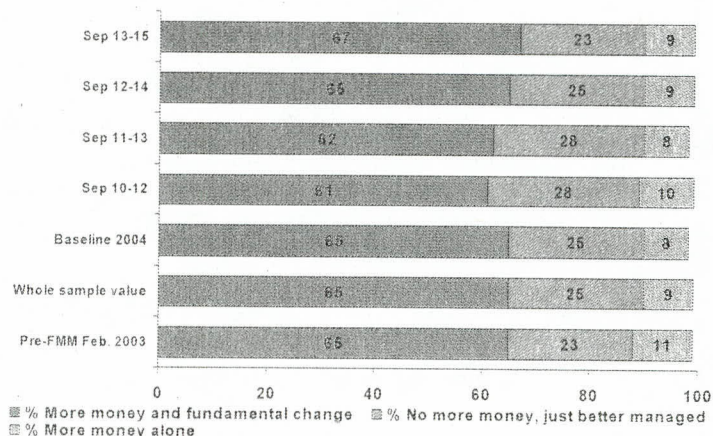


What Does the Health Care System Need?



Q7

Some people say that the health care system doesn't need more money, it just needs to be better managed. Other people say that more money alone would go a long way to fixing what is wrong with health care. Still other people say that more money is required but that's not enough, the health care system needs to be fundamentally changed. Which one of these THREE points of view is closest to your own?

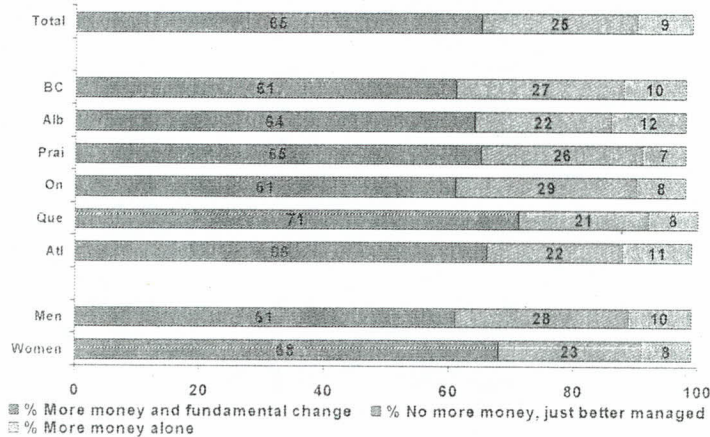


Quebec residents (71%) are the most likely to agree that the health care system needs a combination of more money and better management. Women (68%) are also more likely than men (61%) to believe the system needs both more money and fundamental management changes. Conversely, more men than women are of the view that the system doesn't need more money, just fundamental changes. Income, age nor recent use of the system is significantly associated with these evaluations.



What Does the Health Care System Need: Regions and gender

Some people say that the health care system doesn't need more money, it just needs to be better managed. Other people say that more money alone would go a long way to fixing what is wrong with health care. Still other people say that more money is required but that's not enough, the health care system needs to be fundamentally changed. Which one of these THREE points of view is closest to your own?



Preferences that Matter

We learned that there is a significant difference between those people who believe that only more money is required and those that believe that both more money and fundamental management changes are required. These two segments of the public have significantly different attitudes regarding other aspects of the health care system.

Those who believe that fundamental change is required give poorer assessments of the current state of the health care system. Reducing waiting times is more strongly associated with fundamental change than are pharmacare or homecare programs. Furthermore, people who believe the system needs both more money and better management of existing resources are more committed than the 'just money' segment to the idea of fixing the existing system (i.e. wait times) before adding new programs to the system.

Those who believe fundamental change to the system is required are more likely to blame provincial governments for deterioration in the health care system than are those who think the only requirement is money. Fundamental change is also clearly seen as a provincial responsibility. This does not mean that these people do not see a federal role – they do. However, as a matter of competence and responsibility, these people think the responsibility for change rests primarily on the shoulders of provincial governments.

As a consequence, those who think this is only about money are much more likely to fault the federal government if the meeting would have ended in failure than are those who think fundamental change is required.

People who think fundamental change is required – at least two-thirds of the public - have higher hopes for the success of the FMM than other Canadians.

Government Leadership

All data collected to measure public opinion regarding federal and provincial leadership in fixing the health care system was prior to an agreement being reached. Toward the end of the FMM, neither level of government had made any headway in convincing Canadians they were showing leadership on health care. In fact, public perceptions of leadership did not increase for either the federal or the provincial governments during the FMM nor have they improved since 2003. In fact, fewer of the public believe that their provincial government is taking a leadership role in fixing health care now than believed this in 2003.

The Federal Government

Forty-two percent of Canadians do not believe the federal government has shown leadership in fixing the health care system and just 29 percent believe that it has.

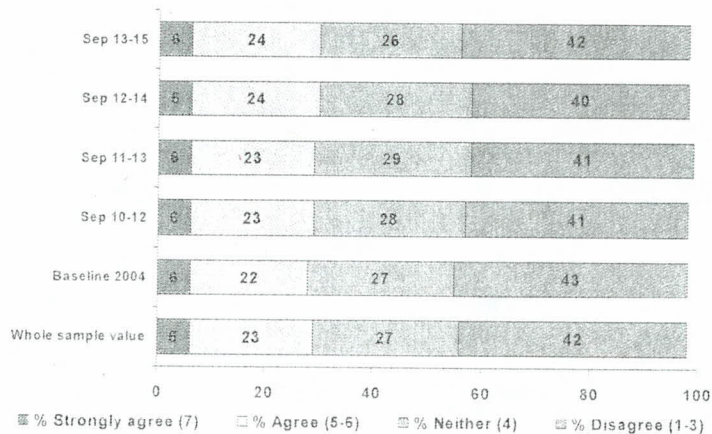


Leadership: Federal Government

Q 8

Agree/Disagree:

Lately, the FEDERAL government has been showing some real leadership on fixing the health care system



Perceptions of federal leadership are strongest in Atlantic Canada, with only 34 percent disagreeing with the statement that the federal government has been showing real leadership.

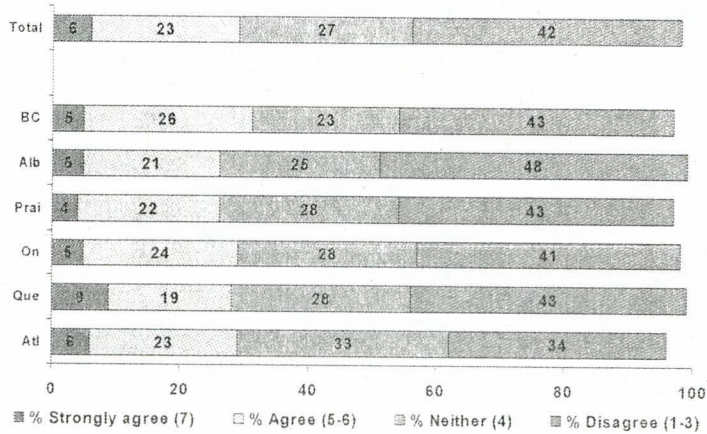


Leadership: Federal Government, Regions



Agree/Disagree:

Lately, the FEDERAL government has been showing some real leadership on fixing the health care system.



29

Older Canadians (33%, compared to 28% for the youngest category) and lower income Canadians (32%, compared to 27% for higher income earners) also rate the federal leadership more highly.

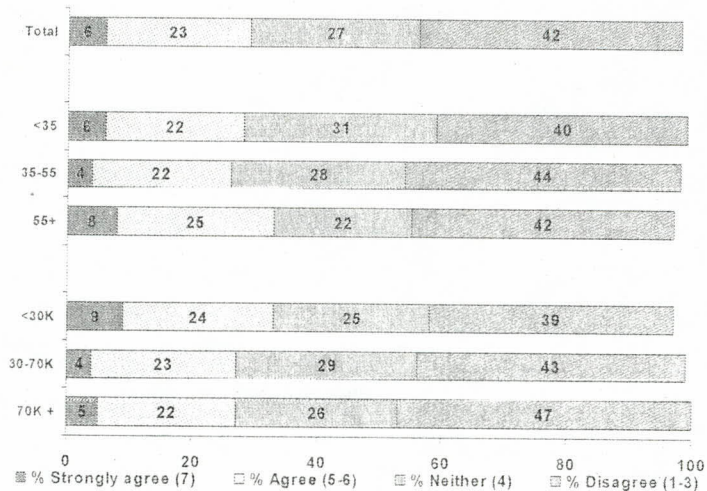


Leadership: Federal Government, Demographics



Agree/Disagree:

Lately, the FEDERAL government has been showing some real leadership on fixing the health care system.



30

The Provincial Leadership

The provincial governments do not fare any better. Thirty-two percent of Canadians believe their provincial government has shown leadership on fixing health care while forty percent do not.

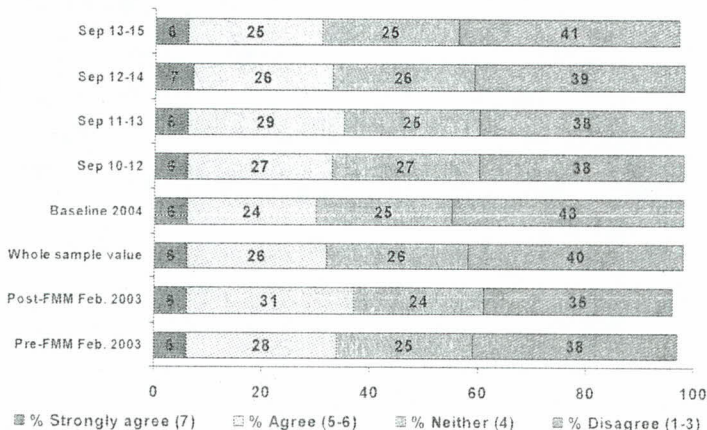


Leadership: Provincial Government



Agree/Disagree

Lately, the PROVINCIAL government has been showing some real leadership on fixing the health care system.



33

Perceptions of provincial leadership are strongest in Alberta (41%) and lowest in BC (29%) and Ontario (29%).

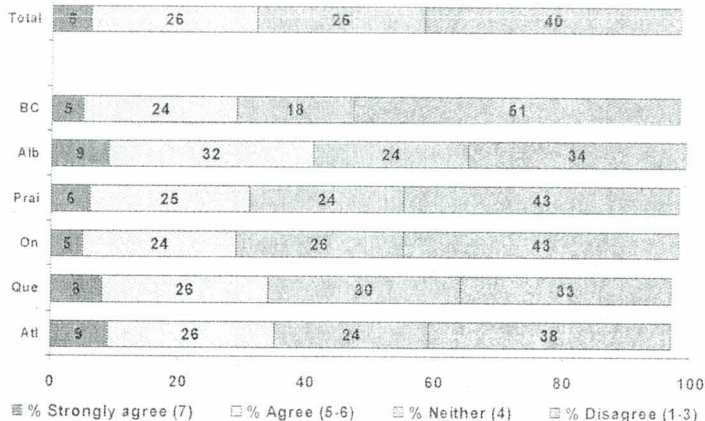


Leadership: Provincial Government, Regions



Agree/Disagree:


Lately, the PROVINCIAL government has been showing some real leadership on fixing the health care system.



34

As we saw in the discussion of perceptions of federal leadership, alliance with the provinces is strongly associated with perceived leadership. For instance, those who agree with the provincial position in the meeting, those who believe the provinces should have more money without federal accountability regimes and those who believe the system needs more money even in the absence of a federal-provincial agreement are more likely to believe the provinces have shown leadership on fixing health care.

There are no differences based on gender, age or income associated with perceptions of provincial leadership.

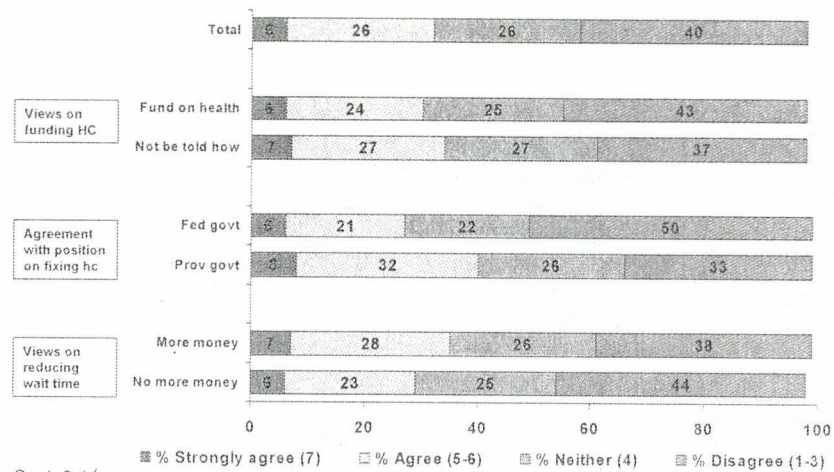


Leadership: Provincial Government, Issues

Health Canada Santé Canada

Agree/Disagree.

Lately, the PROVINCIAL government has been showing some real leadership on fixing the health care system.



Measures to Improve Health Care

Public views on the substance of a reform package stayed constant from the baseline survey through the First Ministers' Meeting. When people think about fundamental change, the outcome they are clearly looking for is shorter waiting times; most Canadians also want some form of provincial accountability for their health care spending; and the public wants a focus on fixing the existing system before creating new elements of the system.

We tested a number of reforms of the system and "providing funding to reduce wait times" was the measure that was seen to make the most difference to the health care system.



Measure to Improve Health Care

Q10 a-i

Various proposals have been put forward to improve the quality of health care. Please use a scale of 1 to 7, where 7 means it will make a significant difference, 1 means it will make no difference at all and the mid-point 4 means it will make some difference. How about ...

% Saying "Significant Difference"(7)

	Baseline	Sept 10-12	Sept 11-13	Sept 12-14	Sept 13-15	Total
a) Reduce wait times	52	51	55	55	54	52
b) Focus on healthy life	51	49	51	51	48	50
c) More med school space	42	41	43	42	39	41
d) Funding for 10 yrs	43	39	39	38	39	40
e) Catastr. Drug coverage	41	39	42	40	39	40
f) Home care funding	39	40	43	44	41	40
g) National pharmacare	39	35	37	37	38	37
h) 24/7 care providers	36	34	36	36	37	36
i) Accelerate foreign accr.	30	27	27	26	25	28

The relative ranking of proposed reforms clearly illustrates the focus on reducing wait times for health care (52% saying it would make a significant difference to the quality of health care) and reducing the need, through healthier lifestyles (50%²), for health care. At a distance but still highly salient is more spaces in medical school to increase medical professionals (41%), stable funding for the system for the next decade (40%), and catastrophic drug coverage (40%) and home care funding (40%). A national pharmacare program (37%) and 24/7 care providers (36%) are next in salience. Lastly is the option of accelerating foreign accreditation (28%).

² All percentages in brackets in this section, unless otherwise specified, represent the number of people indicating "7" on the 7-point scale)

When federal and provincial positions are compared, not as a dichotomy but allowing for equal value, reducing wait times still clearly emerges as the most salient proposal. Compared to 52 percent of Canadians who say that "providing funding to reduce wait times" would significantly improve the system, only 37 percent of Canadians said that a national pharmacare program would make a significant difference to the health care system.

Reducing Wait Times

More than four in five Canadians (81%) chose the higher end of the scale to indicate that increasing funding for the reduction of wait times will make a significant improvement to the health care system. Just 7 percent believe that it will make little or no difference. There was no increase in the salience of this proposed reform through the course of the FMM.

Women (58%) and recent users of the health care system (55%) are more likely to believe that increasing funding to reduce wait times will make a significant difference than are men (46%) and those who have not used the system in the last year (44%).

Interestingly, those who believe that the federal government should develop waiting time standards and monitor provincial progress are also more likely to believe increased funding for wait times will have a significant affect on the health care system.

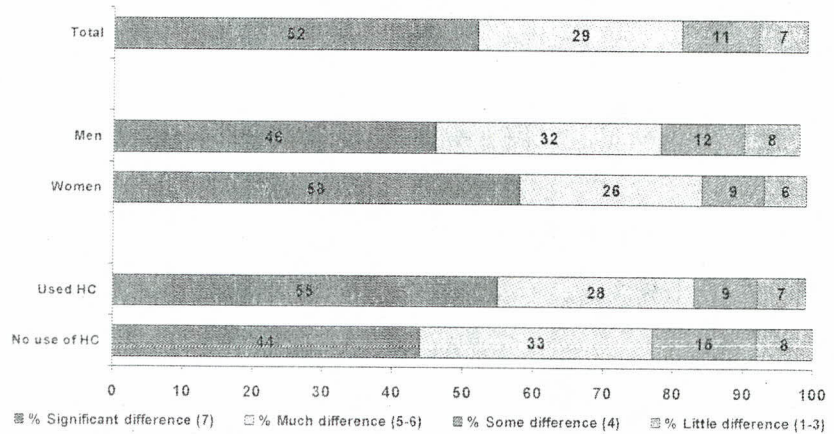


More Funding to Reduce Wait Times

Various proposals have been put forward to improve the quality of health care. Please use a scale of 1 to 7, where 7 means it will make a significant difference, 1 means it will make no difference at all and the mid-point 4 means it will make some difference. How about ...

More funding to reduce waiting times for key surgeries and diagnostics?

(10a)



National Pharmacare Program

Sixty-eight percent of Canadians believe that a national pharmacare plan would have a high impact (5-7 on a 7-point scale) on the health care system. Just 6 percent say that it would make no difference to the system and 5 percent say it would make little difference. Among Canadians over the age of 55, pharmacare is close to wait times in importance but for Canadians under 35, wait times are more important by a factor of 2. There was no increase in the salience of a national pharmacare program through the course of the meeting.



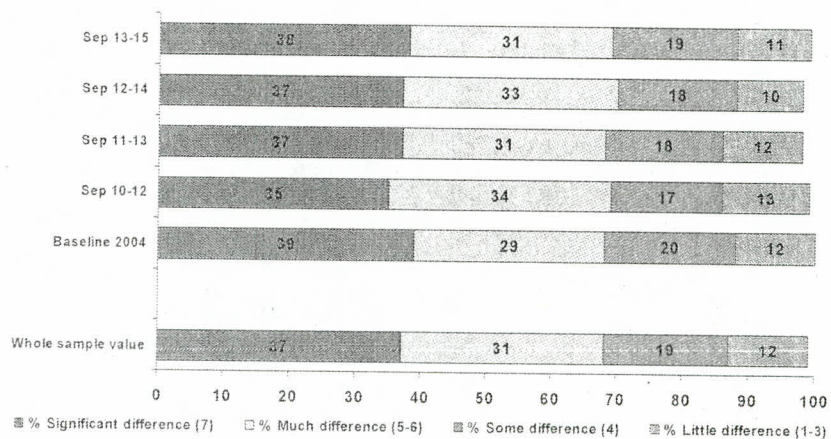
National Pharmacare Program



Various proposals have been put forward to improve the quality of health care. Please use a scale of 1 to 7, where 7 means it will make a significant difference, 1 means it will make no difference at all and the mid-point 4 means it will make some difference. How about ...

(10g)

Creating a national pharmacare program which ensures a basic level of drug coverage for all Canadians?



Pharmacare has the biggest constituency in British Columbia (43%) where it is close to wait times in importance. British Columbians also have the greatest level of awareness of the proposed plan. Interestingly, British Columbians report the lowest rate of drug plan coverage. In the rest of the country, the pharmacare proposal is not comparable in importance to the reduction of wait times.

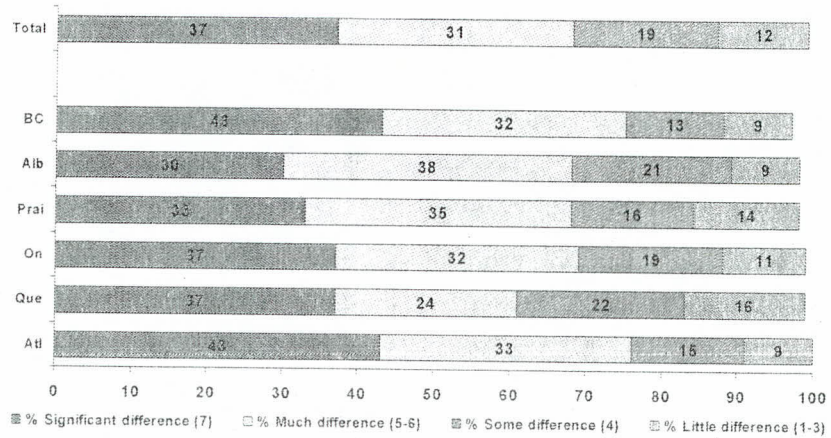
A national pharmacare program is also significantly more important to older Canadians over age 55 (44%), lower income Canadians (44%) and those who do not currently have a drug coverage plan (41%, compared to 35% for those who do).



National Pharmacare Program

Various proposals have been put forward to improve the quality of health care. Please use a scale of 1 to 7, where 7 means it will make a significant difference, 1 means it will make no difference at all and the mid-point 4 means it will make some difference. How about ...

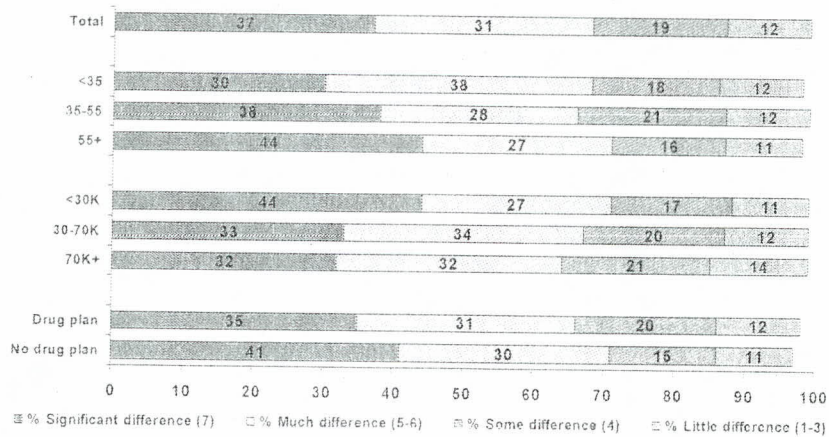
Creating a national pharmacare program which ensures a basic level of drug coverage for all Canadians?



National Pharmacare Program

Various proposals have been put forward to improve the quality of health care. Please use a scale of 1 to 7, where 7 means it will make a significant difference, 1 means it will make no difference at all and the mid-point 4 means it will make some difference. How about ...

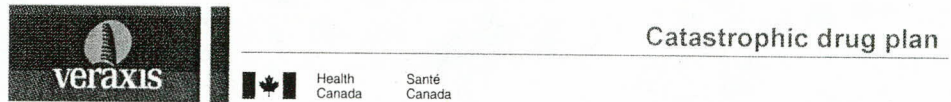
Creating a national pharmacare program which ensures a basic level of drug coverage for all Canadians?



Catastrophic Drug Plan

A catastrophic drug plan is of somewhat more interest than a basic coverage plan but still a lower priority than reducing wait times. Almost three quarters of Canadians (74%) chose the upper end of the scale when evaluating the impact on the health care system of a catastrophic drug plan. Just 3 percent said they thought such a plan would have no impact and 5 percent said it would have little impact on the health care system. Salience of this proposed reform did not increase over the duration of the FMM.

This reform proposal is significantly more salient to residents of the Atlantic region (48%) than residents of other regions of the country.

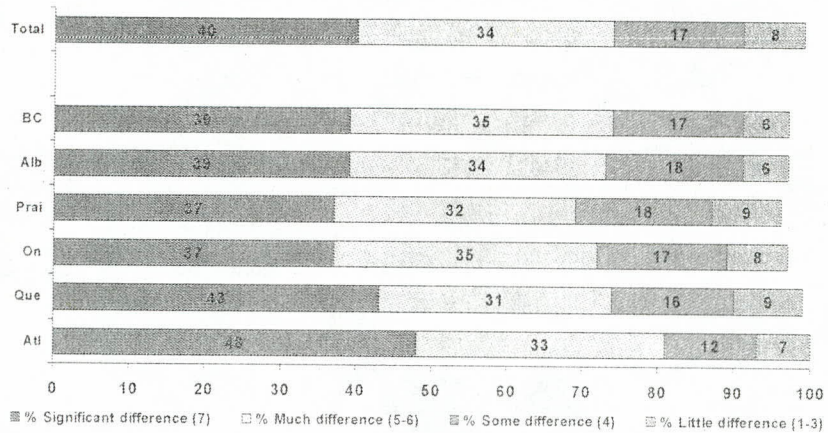


Catastrophic drug plan

Various proposals have been put forward to improve the quality of health care. Please use a scale of 1 to 7, where 7 means it will make a significant difference, 1 means it will make no difference at all and the mid-point 4 means it will make some difference. How about ...

(10e)

Creating a drug plan that covers catastrophic situations, where drug costs simply get unaffordable for people?



The rating of importance of a catastrophic drug plan goes up by age and down by income level.

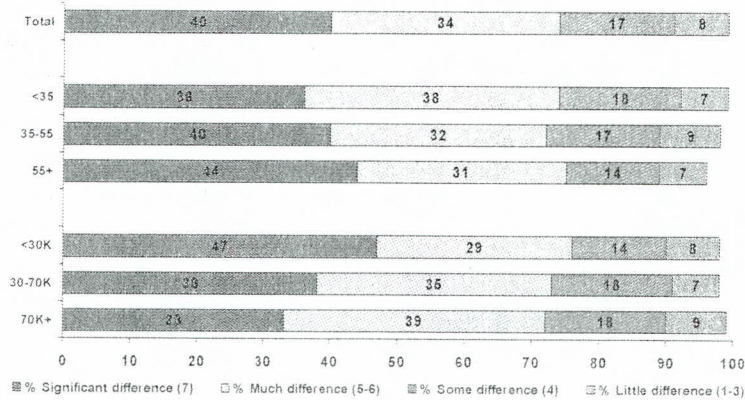


Catastrophic drug plan



Various proposals have been put forward to improve the quality of health care. Please use a scale of 1 to 7, where 7 means it will make a significant difference, 1 means it will make no difference at all and the mid-point 4 means it will make some difference. How about

Creating a drug plan that covers catastrophic situations, where drug costs simply get unaffordable for people?



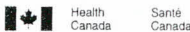
Home Care

Seventy-seven percent of Canadians believe that a homecare program would make a much or significant difference (5-7 on a 7-point scale) to our health care system. Just 8 percent believe that it would make little or no difference to the system. There was no change in the perceived value of this program through the duration of the FMM.

Home care is especially salient to residents of Quebec (48%) and least effective to Albertans (31%).



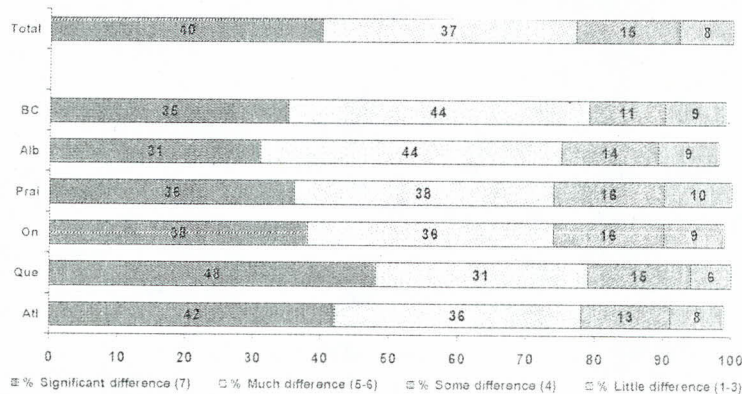
Home Care



Various proposals have been put forward to improve the quality of health care. Please use a scale of 1 to 7, where 7 means it will make a significant difference, 1 means it will make no difference at all and the mid-point 4 means it will make some difference. How about

More funding for home care so that services typically found in hospitals could now be provided in people's homes?

(10f)



Women (45%), those older than 55 (49%) and lower income respondents (47%) are also more likely than their counterparts to believe that homecare will have a great impact on the health care system.

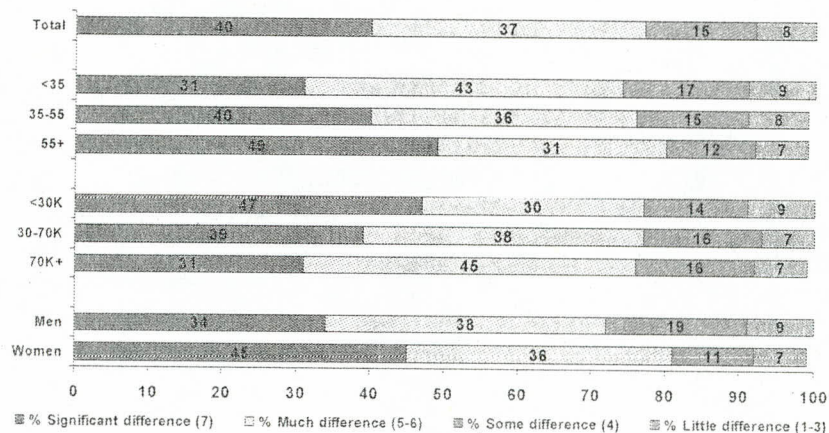


Home Care



Various proposals have been put forward to improve the quality of health care. Please use a scale of 1 to 7, where 7 means it will make a significant difference, 1 means it will make no difference at all and the mid-point 4 means it will make some difference. How about ...

More funding for home care so that services typically found in hospitals could now be provided in people's homes?



50

24/7 Care

Seventy-two percent of Canadians believe that establishing 24/7 teams of health care providers to be the point of contact to relieve pressure on hospitals would greatly impact the health care system (5-7 on a 7-point scale). Only 10 percent of Canadians believe it would have little or no impact. The salience of this option remained constant through the course of the meeting.

This proposed reform is valued the most highly by residents of Quebec (45%) and least valued by those on the Prairies (29%).

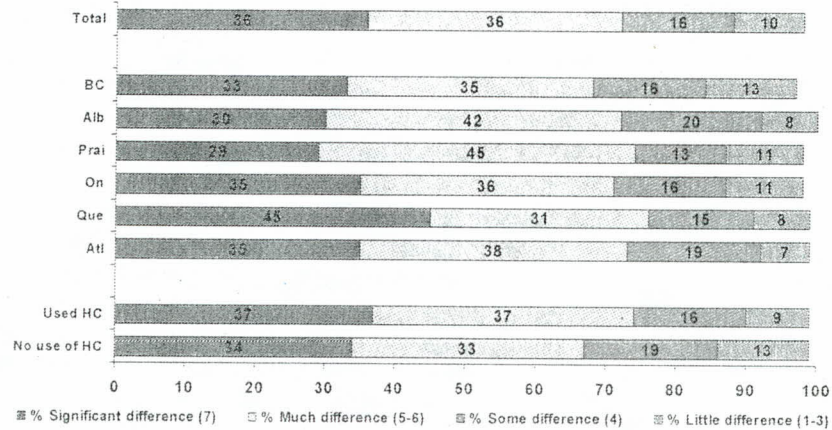


24/7 Health Care Teams

Various proposals have been put forward to improve the quality of health care. Please use a scale of 1 to 7, where 7 means it will make a significant difference, 1 means it will make no difference at all and the mid-point 4 means it will make some difference. How about...

(10h)

Establishing 24/7 teams of health care providers, who would be the point of contact/relieve the pressure on hospitals?



Healthy Living

The prevention of health problems is another method of improving the efficiency of the system. Seventy-seven percent of Canadians believe that a focus on healthy living, physical activity and good eating habits to keep people out of hospitals would have a great impact on the health care system (5-7 on a 7-point scale). Only 4 percent Canadians believe this approach would have no impact. Once again, the importance of this option remained constant through the duration of the FMM.

There were no differences in the salience of this option based on gender, age, income, or use of the health care system.



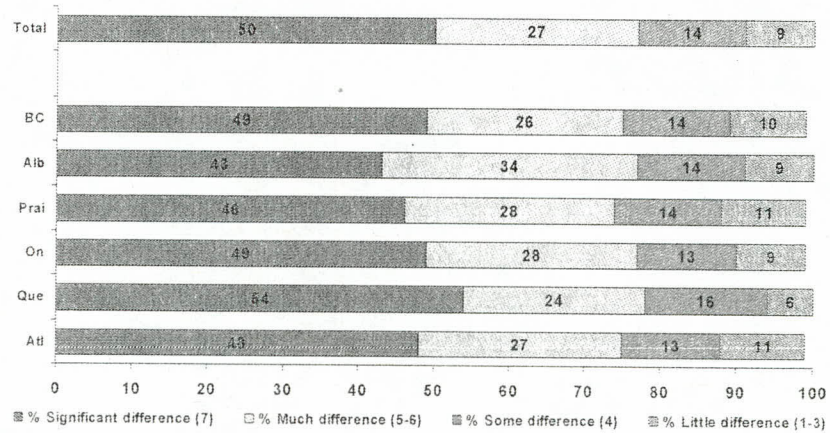
Healthy Living



Various proposals have been put forward to improve the quality of health care. Please use a scale of 1 to 7, where 7 means it will make a significant difference, 1 means it will make no difference at all and the mid-point 4 means it will make some difference. How about ...

(106)

Increasing the focus on healthy living, physical activity and improved eating habits to keep people out of hospitals?



Stable Funding for a Decade

Three-quarters of Canadians (75%) believe that providing reliable and stable funding for the next decade would have a significant impact on the state of the health care system. Only seven percent believe it would make little or no difference. There was no change in the salience of this option through the course of the meeting.

This option is seen as most effective to British Columbians (46%) and the least effective to residents of Quebec (37%).

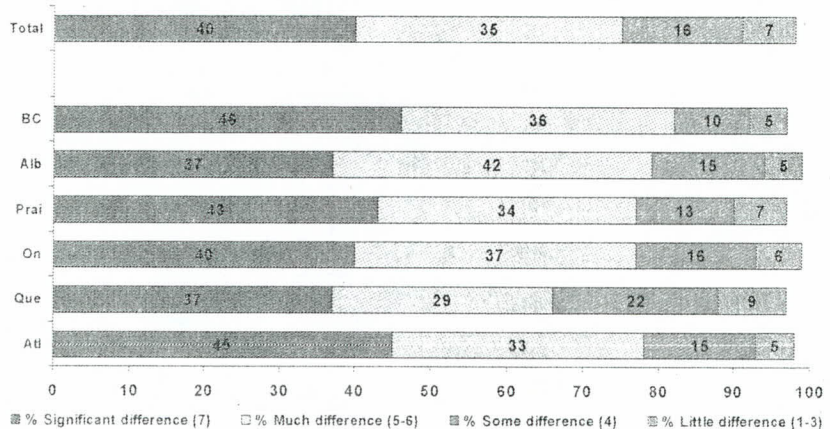


Stable Funding

Various proposals have been put forward to improve the quality of health care. Please use a scale of 1 to 7, where 7 means it will make a significant difference, 1 means it will make no difference at all and the mid-point 4 means it will make some difference. How about...

(10d)

Providing reliable and stable funding from the federal government to the provinces for the next 10 years?



Increase Medical School Spaces

Seventy-two percent of Canadians clearly see failures in the current system as a function of a lack of qualified medical staff and believe that increasing the number of medical spaces at universities would have a significant or great impact on the system (5-7 on a 7-point scale). Just eight percent of Canadians believe it would make little or no difference. There was no change in the importance of this reform through the course of the FMM.

As we have come to expect women (44%) and older Canadians aged 55 and over (47%) rate this option more highly than do men (39%) and younger Canadians (37% of those 35 years and younger).



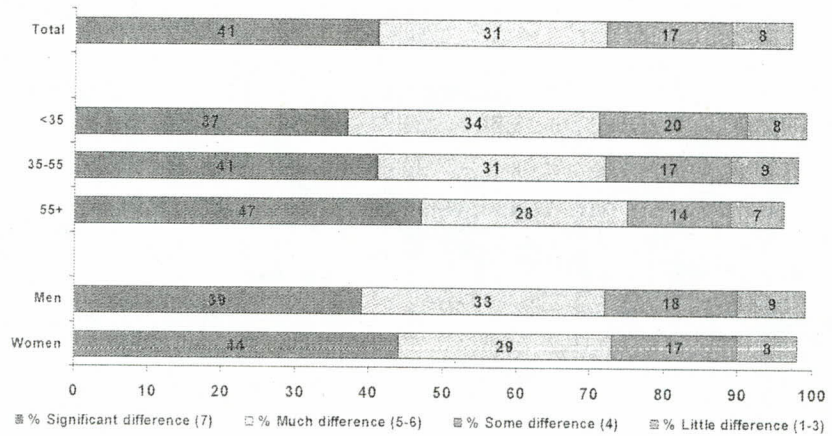
More Spaces for Med Students



Various proposals have been put forward to improve the quality of health care. Please use a scale of 1 to 7, where 7 means it will make a significant difference, 1 means it will make no difference at all and the mid-point 4 means it will make some difference. How about...

(10c)

Addressing the shortage of health care professionals by increasing the number of medical spaces in universities?



This option has the most salience in Quebec (48%) and least in Alberta (34%) and the Prairies (34%).

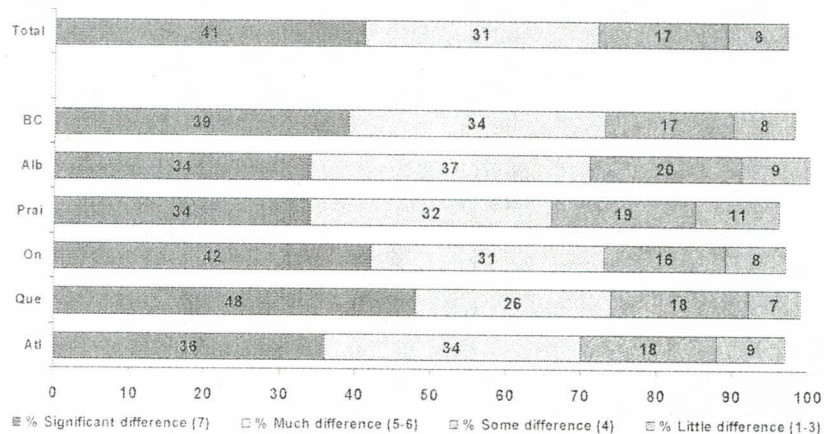


More Spaces for Med Students



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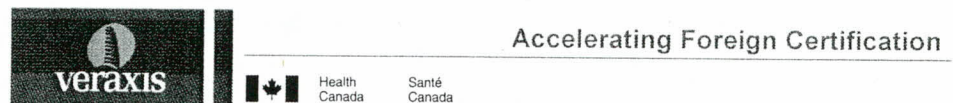
Addressing the shortage of health care professionals by increasing the number of medical spaces in universities?



Foreign trained credentials

The proposed reform that was seen to have the least impact on the health care system was accelerating the accreditation of foreign trained physicians. Still sixty percent of Canadians believe that it will have a significant or great impact on the system (5-7 on a 7-point scale). Seventeen percent believe that it will have little or no impact on the system. There was no change in the perceived importance of this measure through the duration of the FMM.

Once again, women (31%) and older Canadians (34%) value this option more highly than men (24%) and younger Canadians (24%).

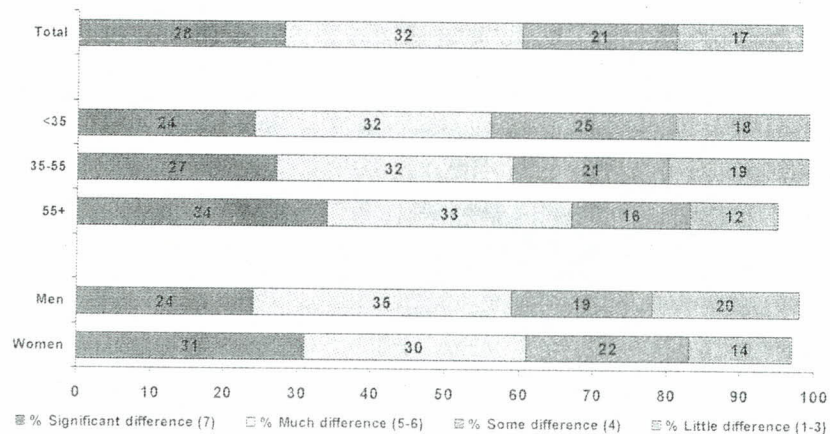


Accelerating Foreign Certification

Various proposals have been put forward to improve the quality of health care. Please use a scale of 1 to 7, where 7 means it will make a significant difference, 1 means it will make no difference at all and the mid-point 4 means it will make some difference. How about ...

(10i)

Addressing the shortage of health care professionals by accelerating the certification of foreign-trained professionals?



Residents in those regions of the country with a large immigrant population – Ontario and British Columbia – are slightly more likely to see this proposed reform as making a significant difference on improving the quality of health care. It is least supported in the Prairie provinces.

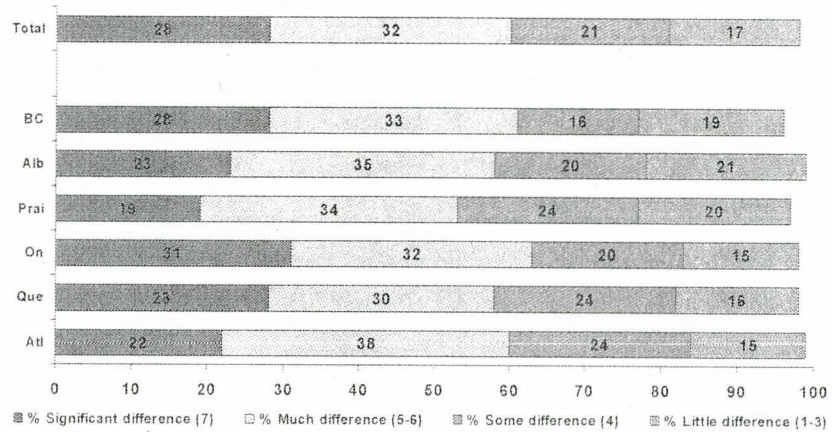


Accelerating Foreign Certification



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Addressing the shortage of health care professionals by accelerating the certification of foreign-trained professionals?



Investing in Existing versus New Programs

Not surprisingly, given the previous findings regarding the state of the system and perceptions of deterioration, most Canadians (58%) think that we must ensure there is adequate funding for the existing system before investments are made in new areas. Thirty-seven percent prefer funding in new programs. This is true in every region and province in the country. Residents of Ontario are relatively more likely (43%) to suggest additional investments should be made into new programs, while Quebecers are most likely to choose more funding in existing programs (65%).

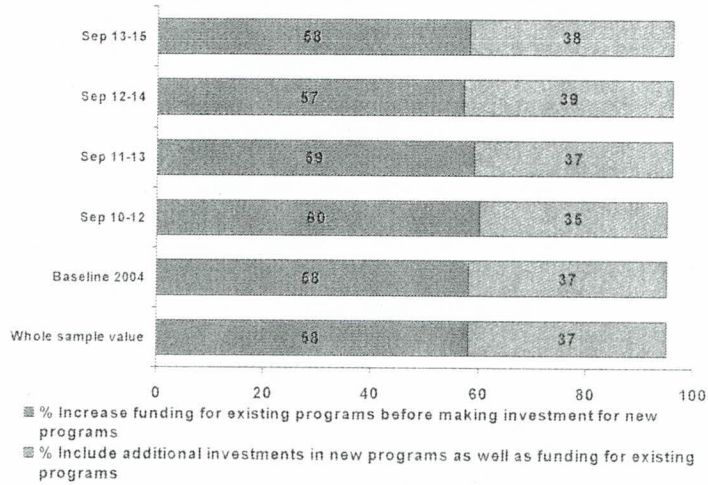
There are no differences in this attitude based on whether a respondent agree with the federal or provincial position, preference for accountability regimes or gender, age, income or use of the system.



Funding: New or Existing Programs?

Q11

Some people say that any agreement on health care between governments must include additional investments in new areas such as pharmacare as well as funding for existing programs. Other people say increased funding to existing areas to reduce such things as waiting times must be provided before investments are made in new areas. Which view is closer to your own?

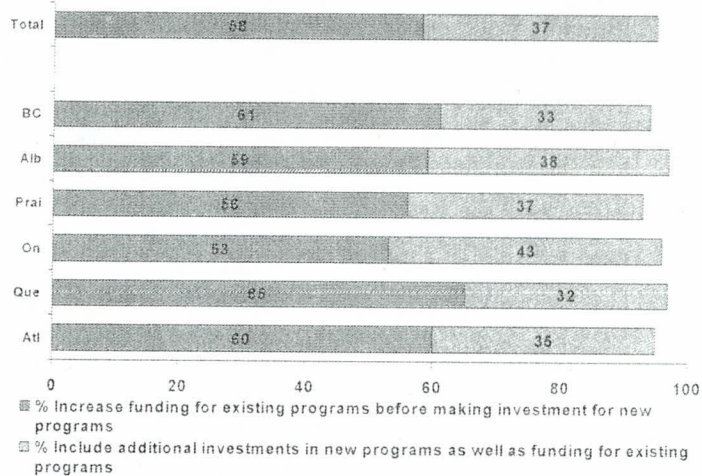


54



Funding: New or Existing Programs, Regions

Some people say that any agreement on health care between governments must include additional investments in new areas such as pharmacare as well as funding for existing programs. Other people say increased funding to existing areas to reduce such things as waiting times must be provided before investments are made in new areas. Which view is closer to your own?



54

Provincial Accountability

Accountability is a complex concept with people having to sort through issues of national standards, jurisdiction, and competence. When asked to whom the provincial governments should be accountable regarding health care spending, most people think provincial governments should be responsible to someone other than simply their electorates. Twenty-eight percent of Canadians believe that electoral accountability is enough. Thirty-two percent support the idea of having provincial governments accountable to the federal government and 37 percent believe that provincial governments should be accountable to a third party such as the National Health Council.

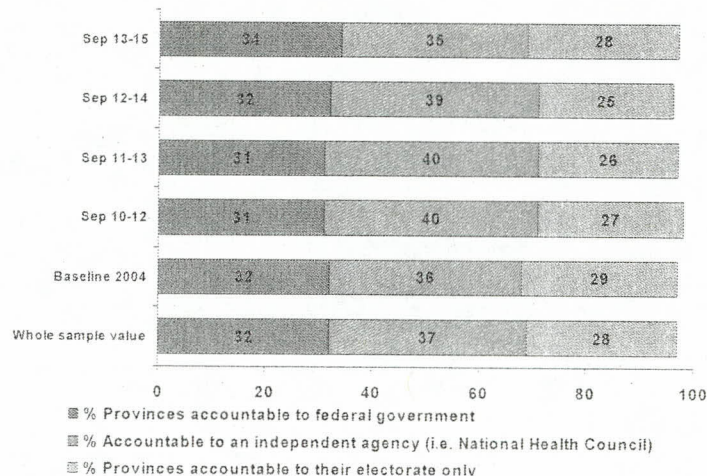


Provincial Accountability

Health Canada Santé Canada

Q12

There are various views on who the provinces should be accountable to, with regards to healthcare spending. Of the three following options which is closest to your view?



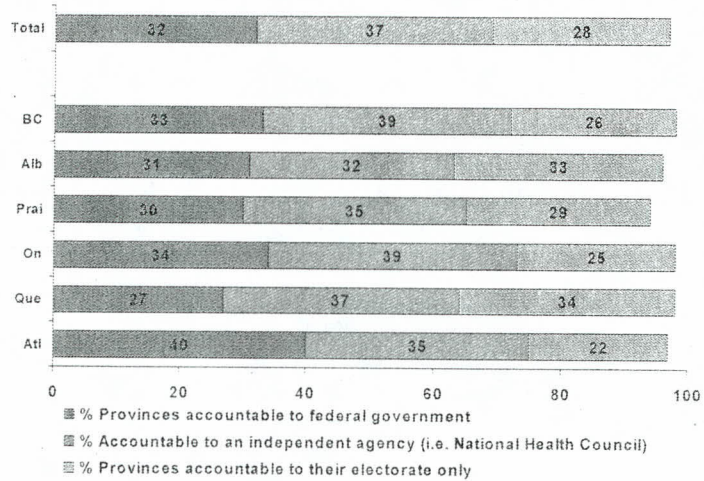
There are significant regional differences in the preferred accountability regime for provinces. For instance, Alberta (33%) and Quebec (34%) residents are the most likely to support electoral accountability only. Quebec (27%) residents are the least likely to want the provincial government to be responsible to the federal government while Atlantic Canadians (40%) are the most likely to prefer this accountability structure. Support for provincial accountability to an outside agency such as the National Health Council is solid across the country, but lowest in Alberta (32%).



Provincial Accountability: Regions



There are various views on who the provinces should be accountable to, with regards to healthcare spending. Of the three following options which is closest to your view?



56

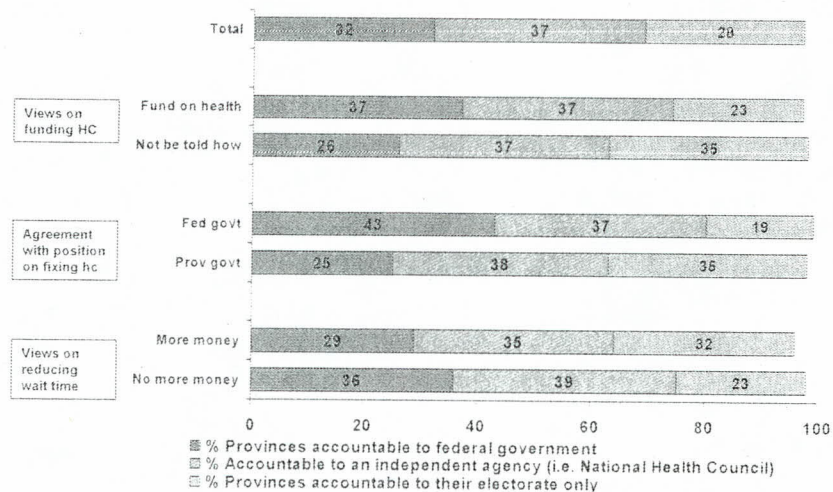
As we've seen in other data, alliance with the federal government – with its health care reform position, with the notion that it should set standards and monitor provincial progress – are associated with preferring the federal government as the body to whom provinces must report.



Provincial Accountability: Issues



There are various views on who the provinces should be accountable to, with regards to healthcare spending. Of the three following options which is closest to your view?



57

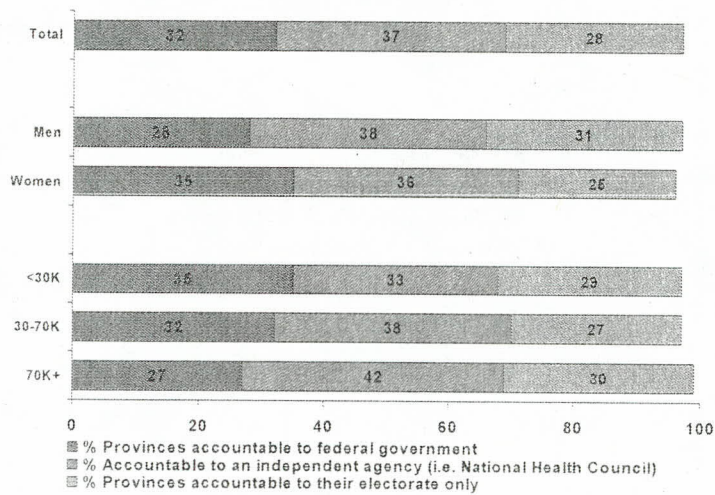
Women (35%) and those with lower incomes (35%) are more disposed to wanting the provinces to report to the federal government, compared to men (28%) and higher income earners (27%). In addition, preference for reporting to an independent agency such as the National Health Council increases as income increases, from 33 percent for those earning 30K per year or less, to 42 percent for those in the highest income bracket. Men (31%) are more likely than women (25%) to believe the provinces are accountable to their electorate only.



Provincial Accountability: Demographics



There are various views on who the provinces should be accountable to, with regards to healthcare spending. Of the three following options which is closest to your view?



The First Ministers' Meeting Process

Awareness of the FMM among the public was high - 54 percent at the start - and rose throughout the meeting - 60 percent at finish. Whole sample (combining the seven days) values indicate that 56 percent of Canadians were 'very aware' (26%) or 'somewhat aware' (30%) of the meeting.

Not surprisingly, those Canadians who say they follow health care issues more closely are also more aware of the meeting. Alberta (69%) residents reported higher awareness of the meeting.

Men (62%) and older respondents (75%) were also more likely to be aware of the FMM than were women (52%) and younger respondents (37%).

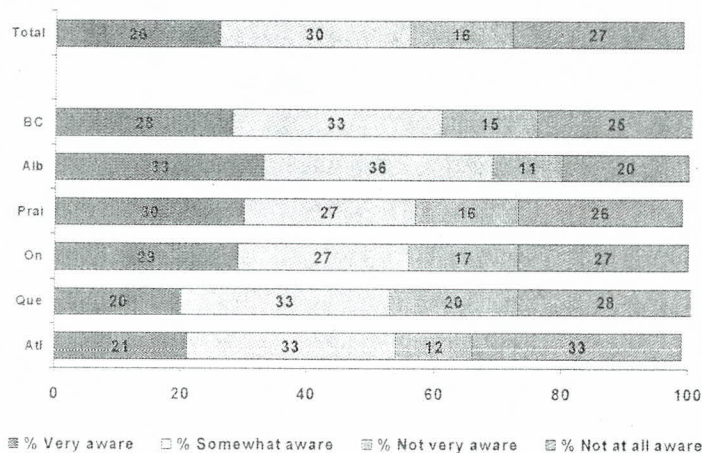


Awareness of the FMM: Regions



Q13

Are you very, somewhat aware, not very, or not at all aware of the upcoming meeting between the federal and provincial/territorial governments to discuss health care starting on September 13?

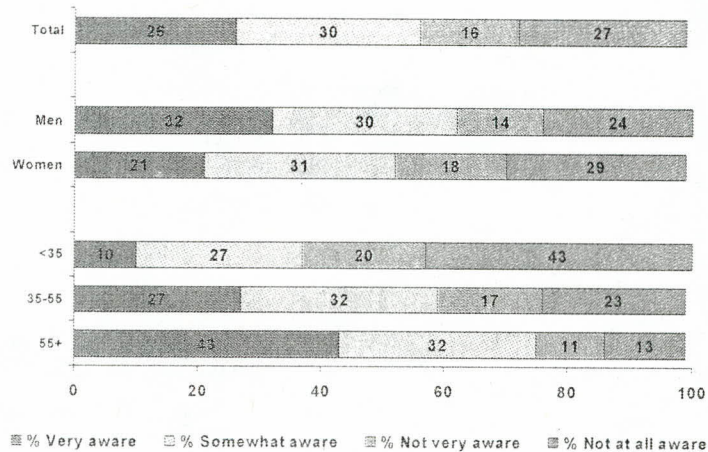




Awareness of the FMM: Demographics



Are you very, somewhat aware, not very, or not at all aware of the upcoming meeting between the federal and provincial/territorial governments to discuss health care starting on September 13?



24

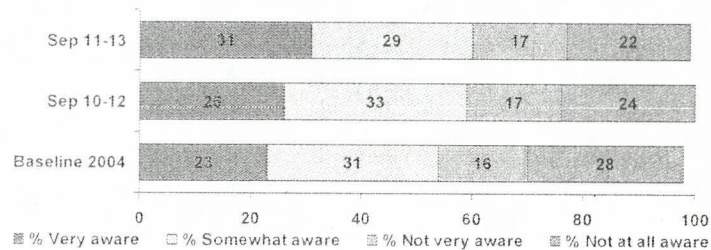
Tracking how closely the public was following the meeting began mid-meeting (September 14). By the end, slightly more than half of Canadians (54%) said they were following the meeting 'very closely' (13%) or 'somewhat closely' (41%). This was up from the first night of tracking this question (Sep 14), when 10 percent said they were following it very closely and 41 percent somewhat.



Awareness of the FMM

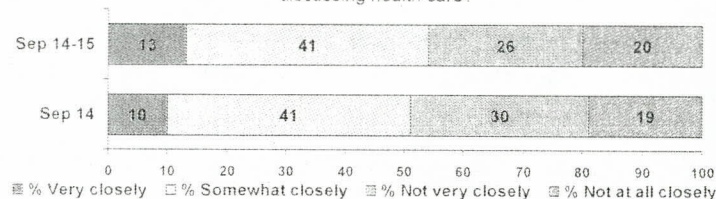


Are you very, somewhat aware, not very, or not at all aware of the upcoming meeting between the federal and provincial/territorial governments to discuss health care starting on September 13?



Q14

How closely are you following the meeting between the Prime Minister and the Premiers where they are discussing health care?



24

Making the meeting public through television was strongly believed to increase the likelihood that an agreement would be reached. More than three-quarters of the public (78%) believed that having the meeting televised rather than behind closed doors made it more likely that results would be achieved. Only 17 percent thought that holding a traditional meeting behind closed doors was the method most likely to lend itself to successful results. There are no demographic differences to note.

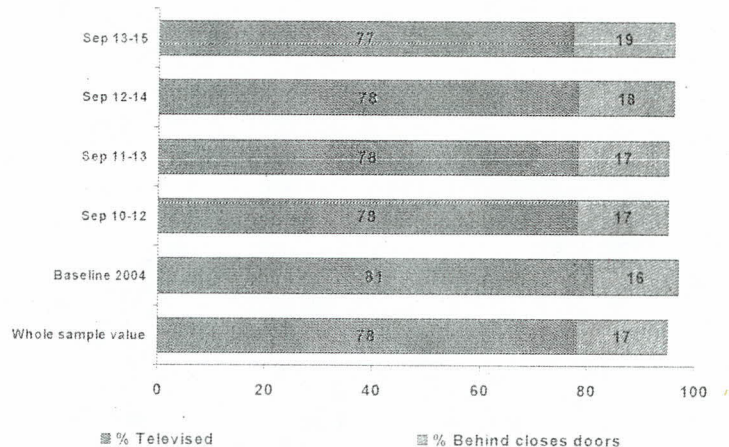


FMM: Closed Doors or Televised?

Health Canada Santé Canada

Q15

Which is a more appropriate approach to achieving results on health care?
Would you say it is more appropriate to...



Intention to Watch the FMM

Self-reported intention to watch the televised event was high with 55 percent of Canadians reporting that they intended to watch the meeting. Twenty-one percent said they were 'very likely to' and an additional 34 percent said they were 'somewhat likely to' watch the meeting. Only 23 percent said they were 'not at all likely to'.

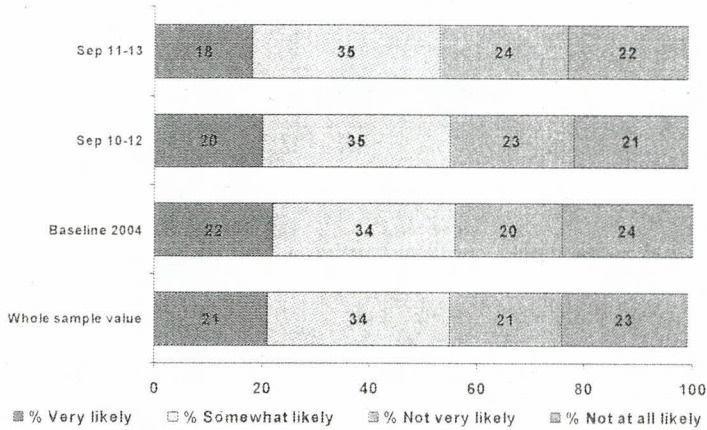
Not surprisingly, those who report they follow health care issues closely were more likely to intend to watch the meeting as were those who were aware of the meeting.



Will Watch FMM?

Q16

As you may already know, the upcoming First Ministers' meeting will be televised.
How likely is it that you will watch?

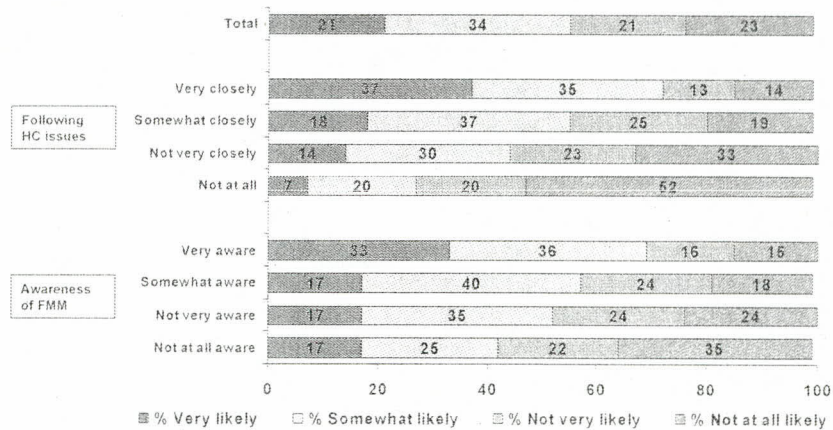


66



Will Watch FMM?

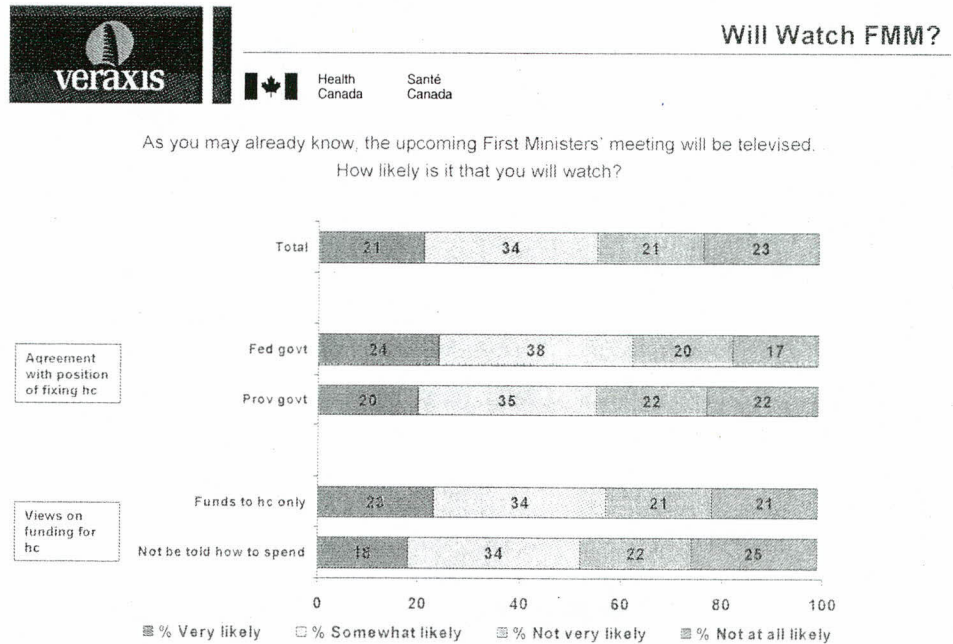
As you may already know, the upcoming First Ministers' meeting will be televised.
How likely is it that you will watch?



67

Additionally, those more allied with the federal government's position on health care reform and who are more interested in federal standards governing provincial implementation were more likely to report an intention to watch the meeting.

Regionally, the only difference in intention to watch the meeting was a lower interest in Alberta. For instance, while 57 percent of residents of Manitoba and Saskatchewan reported an intention to watch the meeting only 48 percent of Albertans intended to watch the meeting.

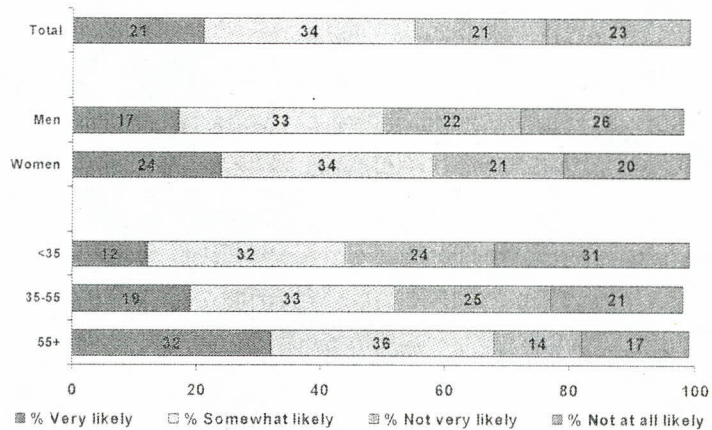


e8



Will Watch FMM: Demographics

As you may already know, the upcoming First Ministers' meeting will be televised.
How likely is it that you will watch?



69

As we have seen on most issues related to health both women (24% saying very likely, compared to 17% of men) and older Canadians (32% very likely, compared to 12% for the youngest demographic) are more likely to be following these issues and reported a higher intention to watch the meeting.

Actual Audience for the FMM

However, reported behaviour did not quite match reported intention. For instance, while 55 percent of Canadians intended to watch the meeting, thirty-nine percent of Canadians actually reported having watched some of the meeting on television.

Viewership was highest in the Atlantic region (50%) and, despite better intentions, lowest in the Prairies (31%).

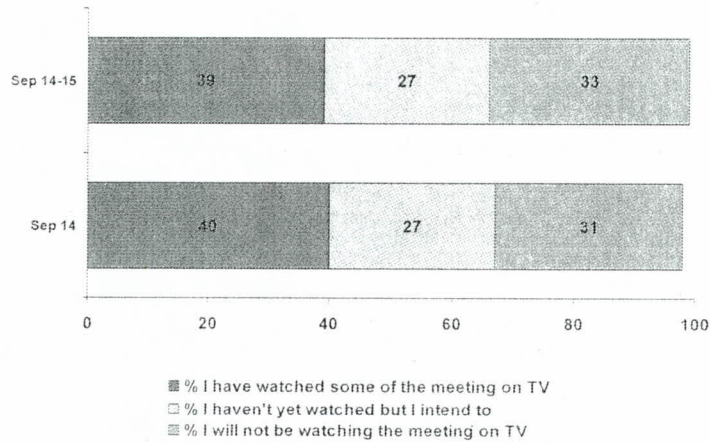


Watching FMM

Health Canada Santé Canada

Q17

Which of the following options best describes yourself?



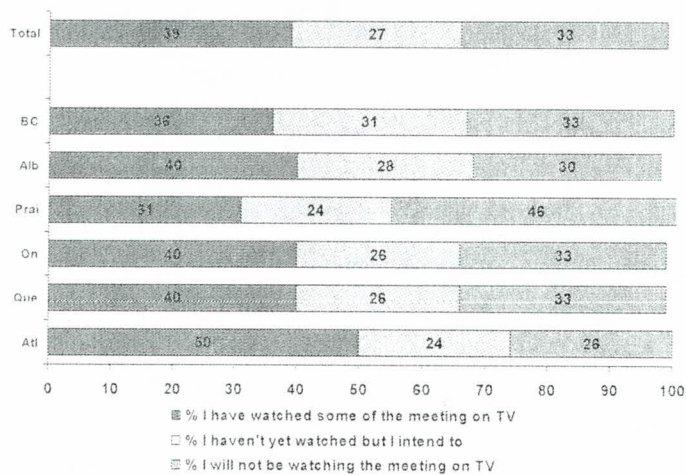
70



Watching FMM : Regions

Health Canada Santé Canada

Which of the following options best describes yourself?



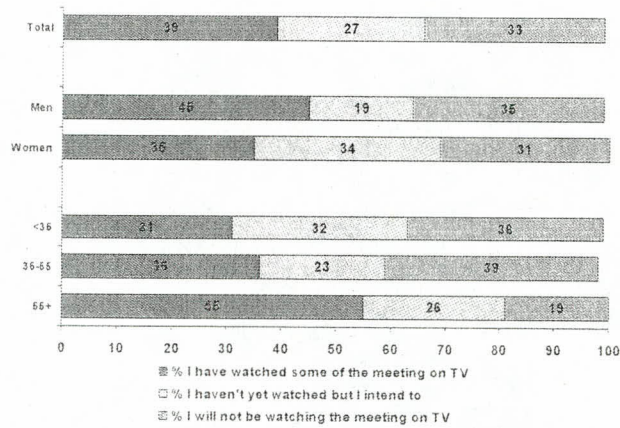
71

And in a reversal of the expected trend, more men (45%) reported having watched some of the meeting than women (35%). As expected, older Canadians (55%) were also significantly more likely to have watched the meeting than younger Canadians (31%).



Watching FMM: Demographics

Which of the following options best describes yourself?



72

Public Expectations of the FMM

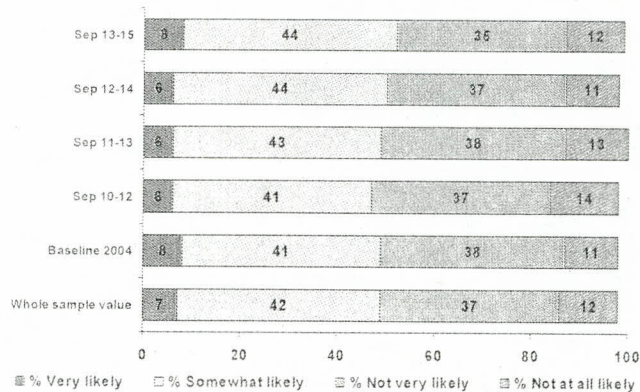
Public optimism about the outcome of the meeting could best be described as hopeful but cautious. All data was collected prior to an agreement being reached. However, the public was equally split among those who thought an agreement was likely (49%) versus those who did not (49%).



Will an Agreement be Reached?

Q 18

The federal, provincial and territorial governments will be meeting shortly to work toward an agreement on a plan to fix the health care system in Canada. How likely do you think it is that they will reach an agreement? Would you say it is ...




73


Those Canadians who have a poorer perception of the state of the health care system were less optimistic about an agreement being reached. For instance, just 36 percent of those who evaluate the state of the health care system as 'poor' believed that an agreement was likely compared to 57 percent of those who rate the system as good. The relationship is not entirely linear however, with 49 percent of those who rate the system as 'excellent' believing an agreement was likely.

Expectations that an agreement would be reached were highest in Quebec (56%) and the Atlantic provinces (58%) and lowest in Alberta (42%).

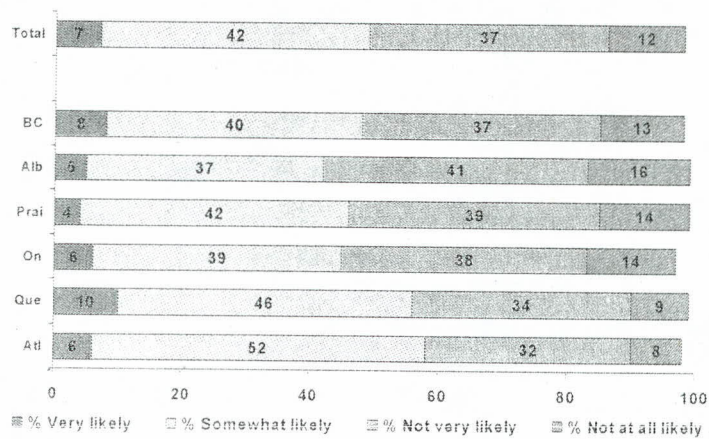
Additionally, higher income respondents (\$70,000 or more) were less optimistic (42%) that an agreement would be reached than lower income respondents (52%).



Will an Agreement be Reached: Regions



The federal, provincial and territorial governments will be meeting shortly to work toward an agreement on a plan to fix the health care system in Canada. How likely do you think it is that they will reach an agreement? Would you say it is ...

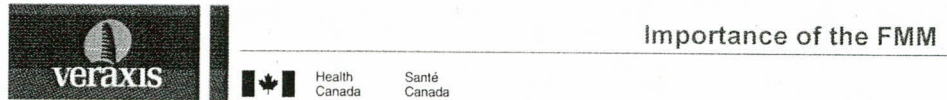


74

Perceived Importance of the FMM

Virtually all Canadians saw this as an important meeting with two-thirds of Canadians (66%) saying it was 'very important', and another 27 percent saying it was 'somewhat important' - just 3 percent of Canadians said that it was 'not at all' important.

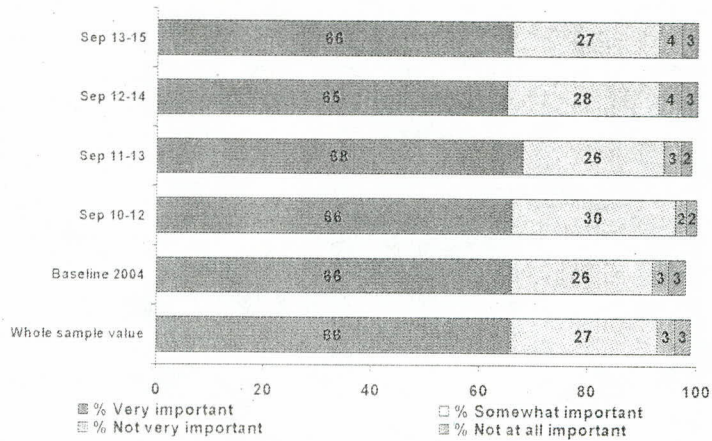
The perceived importance of the meeting was not associated with other attitudes to health care such as funding accountability, or agreement with provincial or federal positions. Regionally, residents of Atlantic Canada were significantly more likely to see the meeting as important (96% very or somewhat) while residents of Alberta were the least likely to see it as important (92% very or somewhat). Note however that while significant, these differences are not substantial.



Importance of the FMM

Q 19

Do you think this is a very important meeting, somewhat important, not an important meeting, or not important at all?



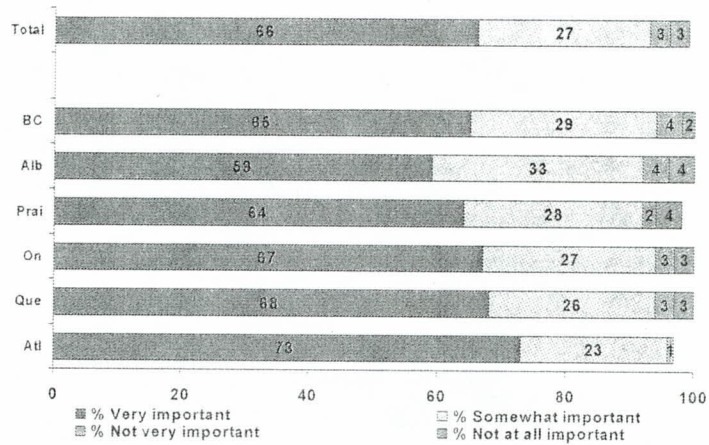
75



Importance of the FMM: Regions



Do you think this is a very important meeting, somewhat important, not an important meeting, or not important at all?



75

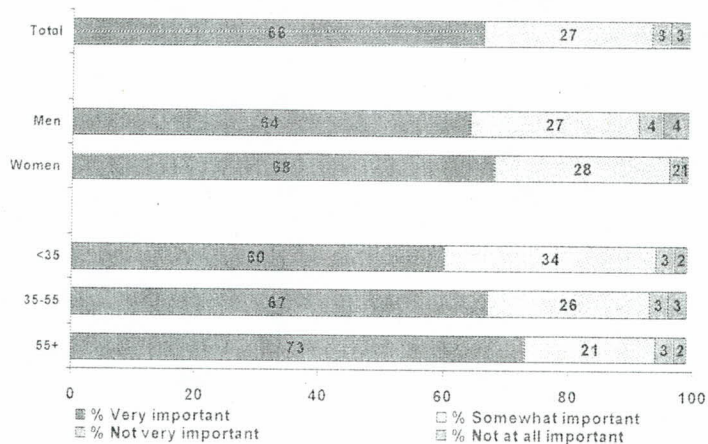
Once again, older Canadians (73%) were significantly more likely to see this meeting as very important than were younger (60%) Canadians. Only three percent of women indicate it is not very or not at all important, compared to 8 percent of men.



Importance of the FMM: Demographics



Do you think this is a very important meeting, somewhat important, not an important meeting, or not important at all?

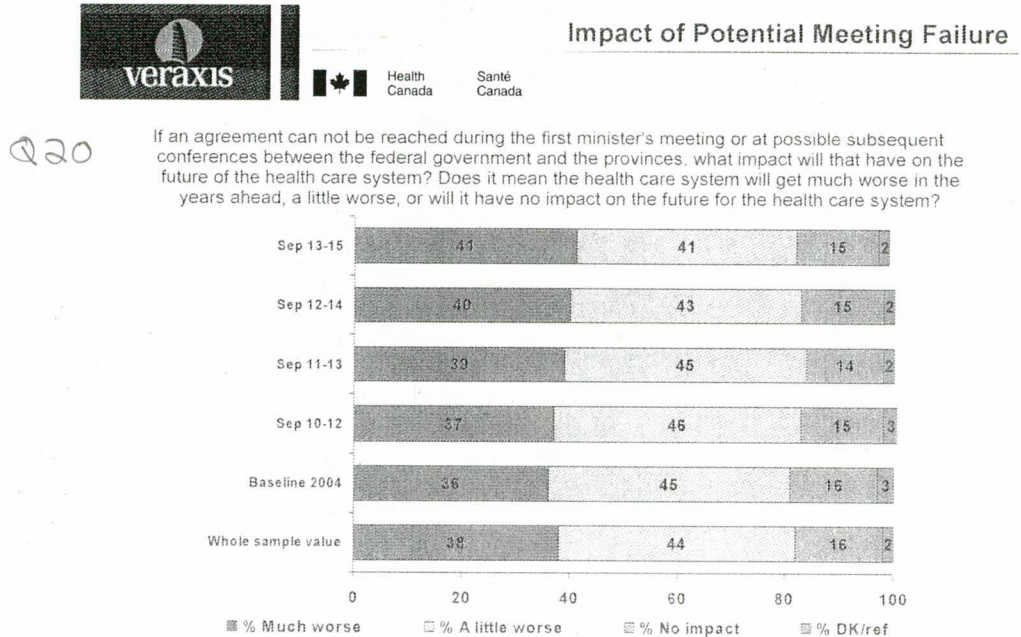


77

Potential Impacts of a Failed Meeting

Over eight in ten Canadians (82%) worry that the health care system would deteriorate if the meeting failed to reach an agreement. Thirty-eight percent think that it would become 'much worse' and 44 percent believe it would become a little worse – just 16 percent think it wouldn't have any impact on the future of health care.

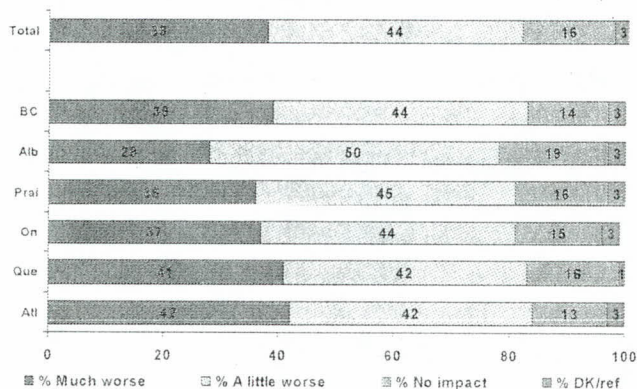
As indicated by the graph below, public worry over the consequences of a failed meeting increased in intensity but not in scope through the meeting.



As we have come to expect, worry was least intense in Alberta.

Impact of Potential Meeting Failure: Regions

If an agreement can not be reached during the first minister's meeting or at possible subsequent conferences between the federal government and the provinces, what impact will that have on the future of the health care system? Does it mean the health care system will get much worse in the years ahead, a little worse, or will it have no impact on the future for the health care system?

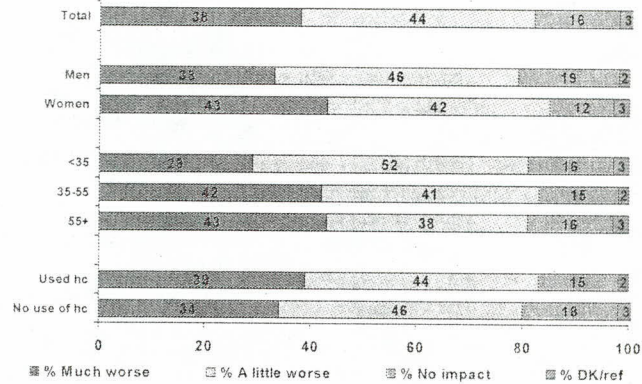


Women (43% saying much worse) were significantly and substantially more worried than men (33%) about the consequences for the health care system of a failed meeting. Canadians 35 and over were also more anxious about the consequences of a failed meeting. Current users of the system (39% saying it would be much worse) also expressed greater concern for the health care system if the meeting ended in failure than did non-users (34%).



Impact of Potential Meeting Failure: Demographics

If an agreement can not be reached during the first minister's meeting or at possible subsequent conferences between the federal government and the provinces, what impact will that have on the future of the health care system? Does it mean the health care system will get much worse in the years ahead, a little worse, or will it have no impact on the future for the health care system?



Who is to Blame for a Failed Meeting?

Blame for a failed meeting would have been shared among the provinces and the federal government but would have rested primarily on federal shoulders. While 24 percent of Canadians would have blamed both levels of government, 39 percent would have blamed the federal government compared to just 21 percent who would have blamed the provincial governments. As seen in the graph below, the notion that the federal government would be to blame increased as the meeting progressed. This increase came, not from the provincial or "both groups" categories but, from the DK/NR.

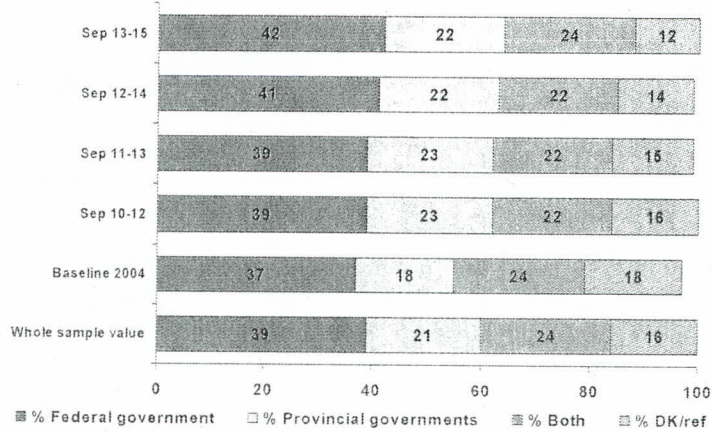


Who is Responsible for a Failed Meeting?

Health Canada Santé Canada

Q21

If an agreement is not met between the federal government and the provinces at the first ministers meeting who do you think will be to blame?



*Note: Both is a volunteered response

78

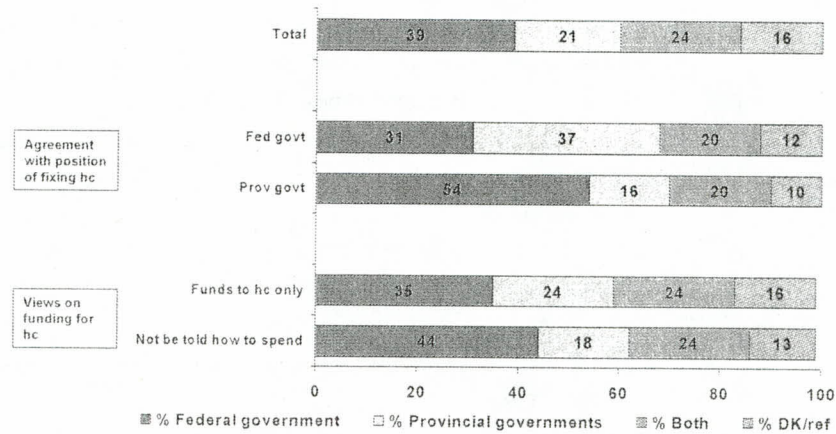
Quebec residents (35%) were the least likely to assign blame for failure to the federal government and the most likely to assign blame jointly to the federal and provincial governments (33%). Residents of the Atlantic region (49%), the Prairies (47%) and Alberta (47%) were the most likely to assign blame to the federal government.



Who is Responsible for a Failed Meeting?

Health Canada Santé Canada

If an agreement is not met between the federal government and the provinces at the first ministers meeting who do you think will be to blame?



*Note: Both is a volunteered response

79

Not surprisingly, persons allied with the provincial position (54%) were significantly more likely to blame the federal government while persons allied with the federal government's position (37%) were significantly more likely to blame the provincial governments for a failure of the meeting. This trend continues in accountability regimes for funding where "federalists" were more likely to blame the provinces, while those who support greater provincial flexibility were more likely to blame the federal government.

Identification with Governments

Despite holding positions on many issues that correspond with the federal government's agenda for this meeting, the Canadian public generally, in the abstract, allied themselves with the provincial position. For instance, 46 percent of Canadians said they most agreed with the provincial plan for fixing health care compared to 28 percent who said they primarily agreed with the federal plan. A full 25 percent of Canadians were unwilling or unable to identify with either position.

Over the course of the meeting there was a trend away from identifying with the federal position and toward identifying with the provincial position. It is important to note that the response to this question came in the absence of any explanation of the competing positions. And, in this measure, we see the continuing disparity among those we could term 'strong federalists' and those we could term 'strong provincialists'. Throughout the data, positions on two issues are strongly associated with differences on most other issues: 1) view on reducing wait times in the absence of an agreement; and 2) accountability regimes for federal funding. These views are associated with differences on other measures.

In fact, as we will see further in the report, if one of the debates coming into the FMM was between the provincial position that the best federal role was funding pharmacare on one hand, and the federal position that it had a broader role to play in Medicare on the other, the federal position prevailed decisively. Over the course of the FMM, the gap between those two positions grew in the federal government's favour from seven percentage points in the baseline survey to 28 points as of the last night in field – September 15th.

There is no significant gender difference on this measure except that women are more likely than men by nine points to not identify with either position.

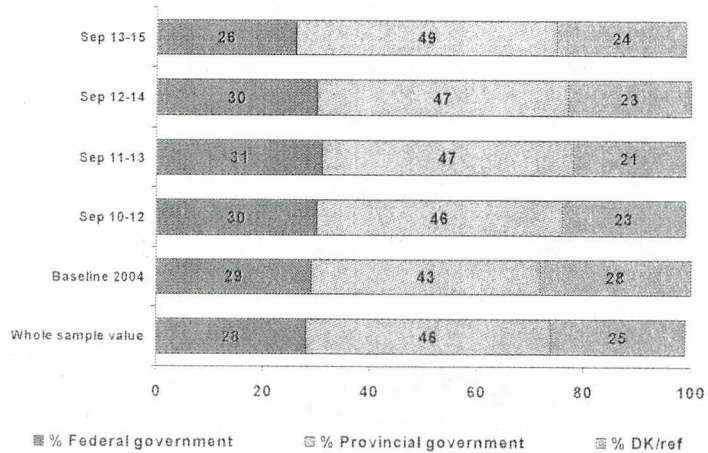


Agreement with Health Care Positions



Q22

Based on what you know so far, whose position of fixing/reforming the health care system do you most agree with...?



81

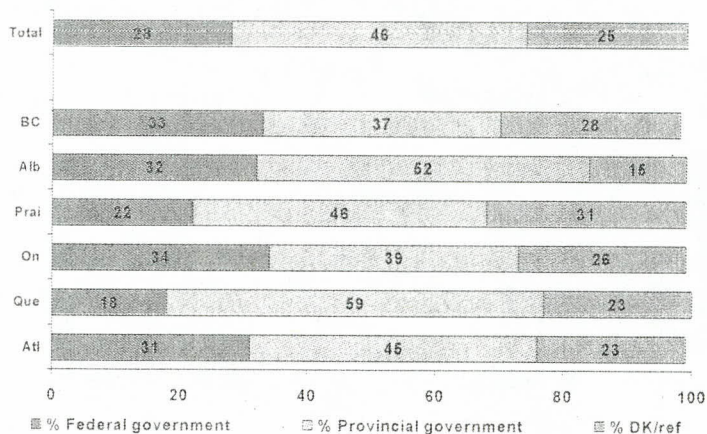
Identification with the provincial government's overall position was especially strong in Quebec (59%) and Alberta (52%). Ontarians (34%) and British Columbians (33%) were relatively more likely than other Canadians to agree with the federal government's position of fixing/reforming the health care system.



Agreement with Health Care Positions: Regions



Based on what you know so far, whose position of fixing/reforming the health care system do you most agree with...?



82

Funding with or without an Agreement

The public is clearly worried about the health care system. Although two-thirds of Canadians (69%) would like the provinces to account for health care spending to either the federal government or an independent agency, 55 percent say that even without an agreement, the federal government should provide additional monies. Forty-one percent of Canadians think that the federal government should provide additional monies only with an agreement in place. These attitudes remained constant through the course of the meeting.

As expected, the 'strong provincialists' are more likely to be of the view that money should flow without an agreement than are 'strong federalists'.

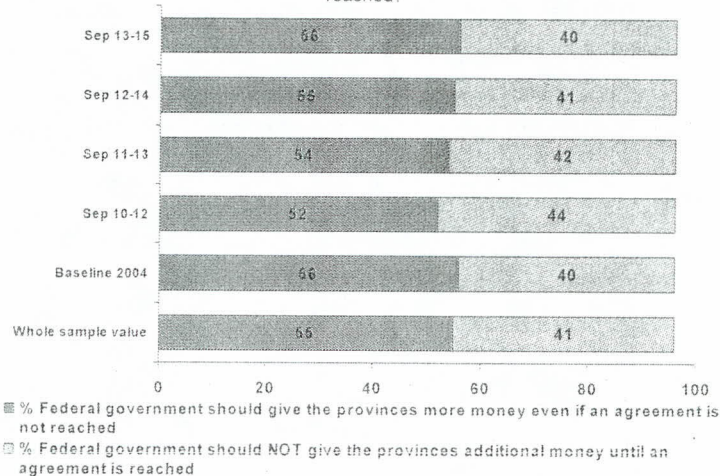


Funding: With or Without an Agreement?

Health Canada Santé Canada

Q23

If there is a failure to reach an agreement on such issues as reducing waiting times and expanding home care during the upcoming health meeting, do you think the federal government should agree to give the provinces more money anyway to be spent as they see fit even if an agreement is not met OR the federal government should provide no additional funding to the provinces until an agreement is reached?

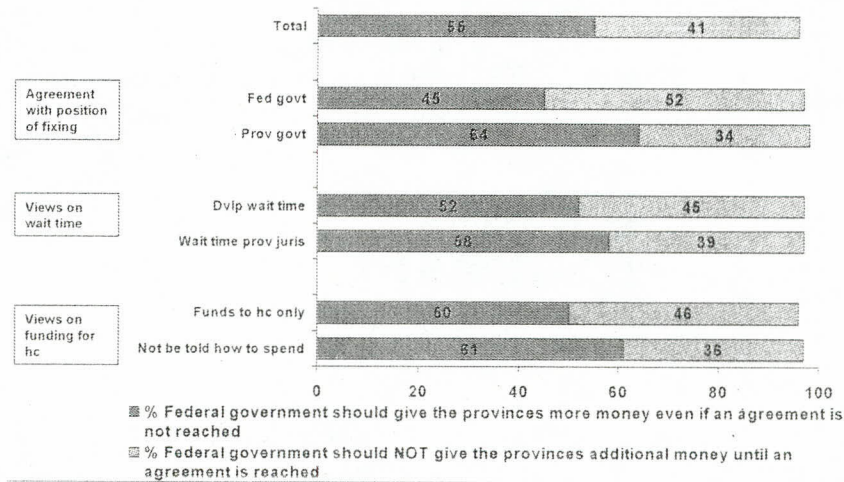




Funding: With or Without an Agreement: Issues



If there is a failure to reach an agreement on such issues as reducing waiting times and expanding home care during the upcoming health meeting, do you think the federal government should agree to give the provinces more money anyway to be spent as they see fit even if an agreement is not met OR the federal government should provide no additional funding to the provinces until an agreement is reached?



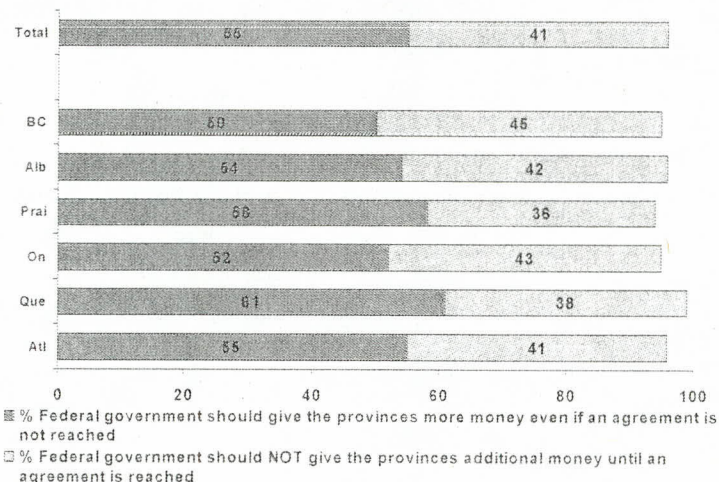
Residents of Quebec (61%) are the most likely to believe that the federal government should provide more funds to the provinces even without an agreement than are residents of other regions of the country. British Columbians (45%) are the most supportive of only releasing more monies with an agreement in place. There were no other significant demographic differences in the distribution of these positions.



Funding: With or Without an Agreement: Regions



If there is a failure to reach an agreement on such issues as reducing waiting times and expanding home care during the upcoming health meeting, do you think the federal government should agree to give the provinces more money anyway to be spent as they see fit even if an agreement is not met OR the federal government should provide no additional funding to the provinces until an agreement is reached?



Reform Package Proposals: Federal v. Provincial Positions

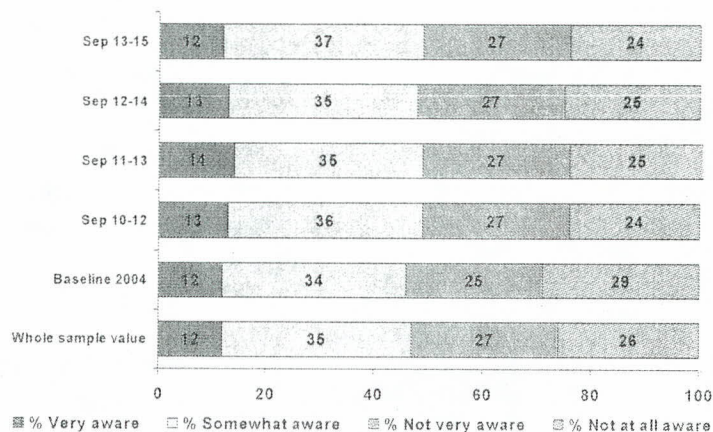
Twelve percent of Canadians said they were 'very aware' of the provinces' proposal on a national pharmacare plan, 35 percent said they were 'somewhat aware' and 27 percent said they were 'not very aware' while 26 percent said they were 'not at all aware' of the proposal.



Awareness of Pharmacare Proposal

Q24

Are you very, somewhat, not very, or not at all aware of the provinces' proposal on a national pharmacare plan?



89

Awareness of health care issues, in general, and of the meeting, in particular, was associated with awareness of the provinces' proposal.

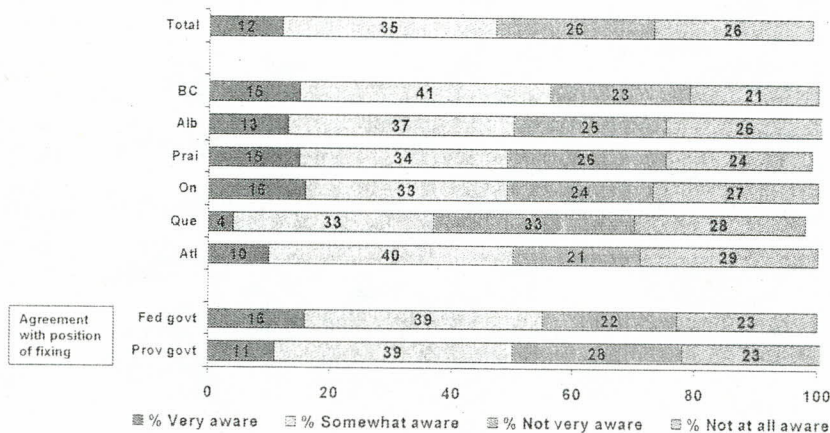
Interestingly, those who said they are in agreement with the provincial position rather than the federal position were less likely to report being aware of the specifics of the national pharmacare proposal. Again lending credence to the notion that alliance is at least as ideological as it is practical.

Self-reported awareness of the national pharmacare proposal was highest in British Columbia (56% aware) and lowest in Quebec (37%).



Awareness of Pharmacare Proposal: Regions

Are you very, somewhat, not very, or not at all aware of the provinces' proposal on a national pharmacare plan?



89

Despite the previously seen identification with the provincial government, public preferences are evenly split between the two positions. When presented with the two countervailing arguments – the provincial proposal that the federal government should create a national pharmacare plan to free up provincial monies and the federal position that a national pharmacare plan would be too expensive to allow for federal investment in other health care reforms, the public was evenly divided with 44 percent supporting each position and 12 percent did not chose either side or did not respond to the question.

Residents of Ontario (39%) were the least supportive of a national pharmacare plan when presented with these arguments. There were no significant differences in this attitude by age, gender or income.



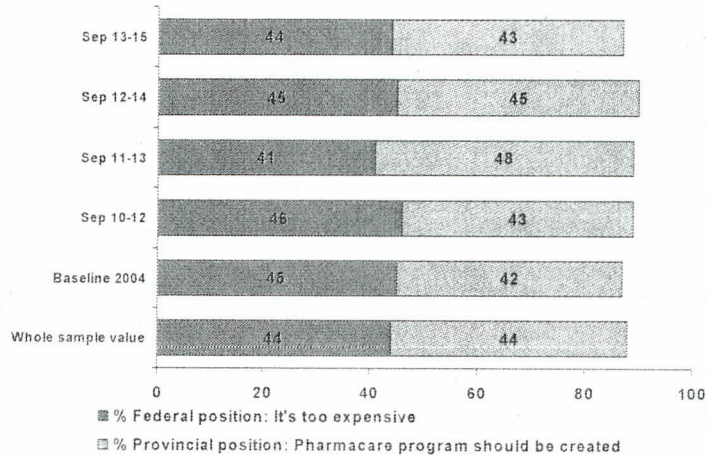
Federal and Provincial Roles in Health Care (1)



Q25

The provinces propose that the federal government's role in health care should be to create a national pharmacare program which would reduce the financial burden on the provinces and allow them to spend more money in other areas such as reducing waiting times. **However**, the federal government argues that a national pharmacare program would cost \$12 billion a year and is **too expensive** to allow for increased funding in other areas such as home care and reducing waiting times.

Which of these views do you agree with?



93

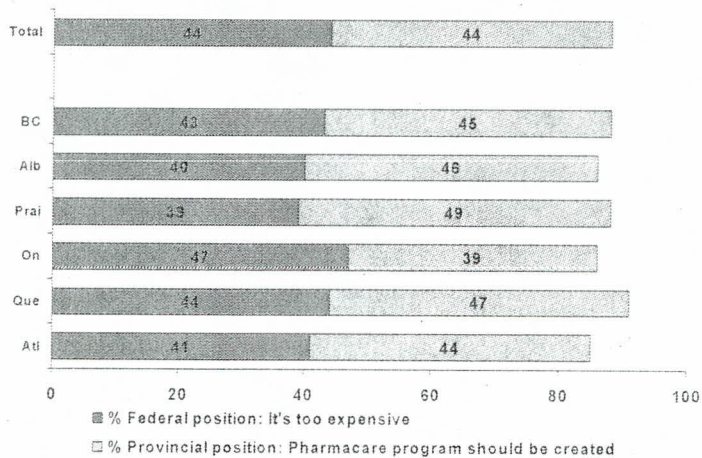


Federal and Provincial Roles in Health Care (1): Regions



The provinces propose that the federal government's role in health care should be to create a national pharmacare program which would reduce the financial burden on the provinces and allow them to spend more money in other areas such as reducing waiting times. **However**, the federal government argues that a national pharmacare program would cost \$12 billion a year and is **too expensive** to allow for increased funding in other areas such as home care and reducing waiting times.

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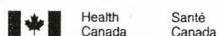


94

When asked to choose between the federal government undertaking a national pharmacare program and leaving the rest of health care to the provinces OR that the federal government had a much broader role to play in a national Medicare program beyond pharmacare including ensuring national standards, by a large margin, the public sided with the federal position. Nationally, 53 percent of Canadians support the position that the federal government has a broader role to play in ensuring a national Medicare system compared to 37 percent who support the national pharmacare alternative. Through the duration of the meeting, public support for the activist federal role to protect and support Medicare as a national program increased. Support for the provincial position fell by 13 points through the course of the meeting.

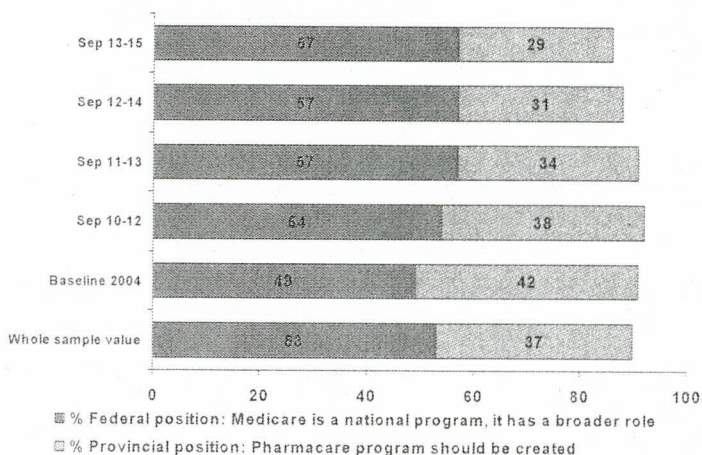


Federal and Provincial Roles in Health Care (2)



Q 26

The provinces propose that the federal government's role in health care should be to create a national pharmacare program which would reduce the financial burden on the provinces and allow them to spend more money in other areas such as reducing waiting times. However, the federal government argues that **Medicare is a national program** and it has a broad role beyond being only involved in pharmacare such as ensuring national standards are upheld and that there is compliance with the Canada Health Act



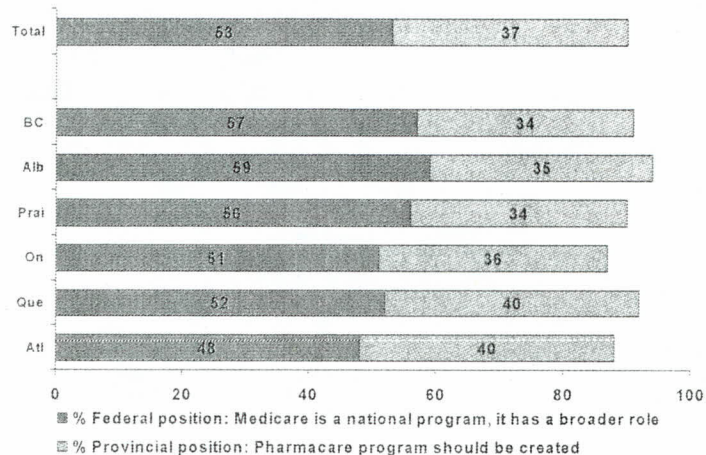
Atlantic Canada (48%) is the only region in the country in which the majority does not believe that Medicare is a national program and the federal government should have a broad role to protect the Canada Health Act rather than role that is limited to pharmacare. Even here, however, a plurality supports this view. Interestingly, Albertans (59%) are the most likely to agree to this position.

There were no gender or age differences associated with this policy preference. However, higher income respondents (those making more than \$70,000) are significantly more likely (61%) than others (50% for those who make 30K or less, 54% for those earning 30-70K) to support the federal position that Medicare is a national program.



Federal and Provincial Roles in Health Care (2): Regions

The provinces propose that the federal government's role in health care should be to create a national pharmacare program which would reduce the financial burden on the provinces and allow them to spend more money in other areas such as reducing waiting times. However, the federal government argues that Medicare is a national program and it has a broad role beyond being only involved in pharmacare such as ensuring national standards are upheld and that there is compliance with the Canada Health Act



Tied Funds

Public opinion is almost split on whether or not the federal government should attach directives to health transfers to the province. This belief is one of the measures that are most strongly associated with other policy preferences – the provincial freedom versus provincial accountability to the federal government dichotomy. Note that it is not necessarily dichotomous in practice but the question forced respondents to choose an either/or.

In September 2004, 54 percent of Canadians believed that federal funds transferred to the provinces should be spent by the provinces on health care in keeping with national objectives compared to 43 percent of Canadians who believe that the provinces should not be told how to spend transferred funds. The proportion of the public who desire federal direction of transferred funds fell, however, from 70 percent in 2003 to 54 percent this year. Support for tied-funding remained constant through the 2004 FMM.

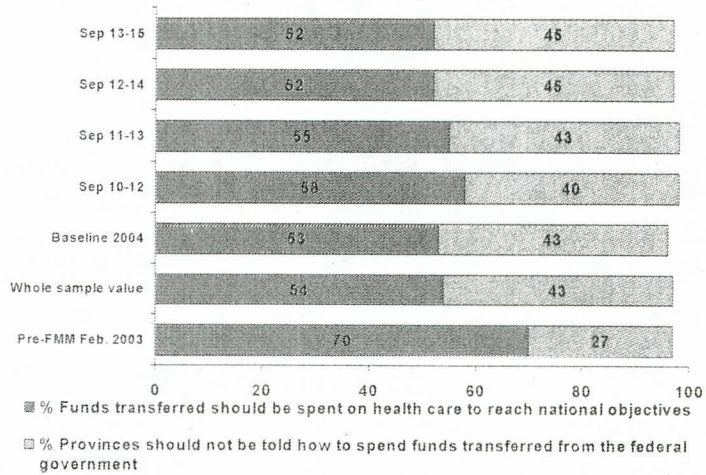


Tied Funding



Q27

Some people say that it is the federal government's job, on behalf of Canadian taxpayers, to make sure that funds transferred to the provinces for health care are spent on health care and that national objectives for health care quality are met by each of the provinces. Other people say that since the provinces fund a significant portion of the cost of health care and are responsible for delivering health care services, they should not be told how to spend funds transferred from the federal government. Which view is closer to your own?



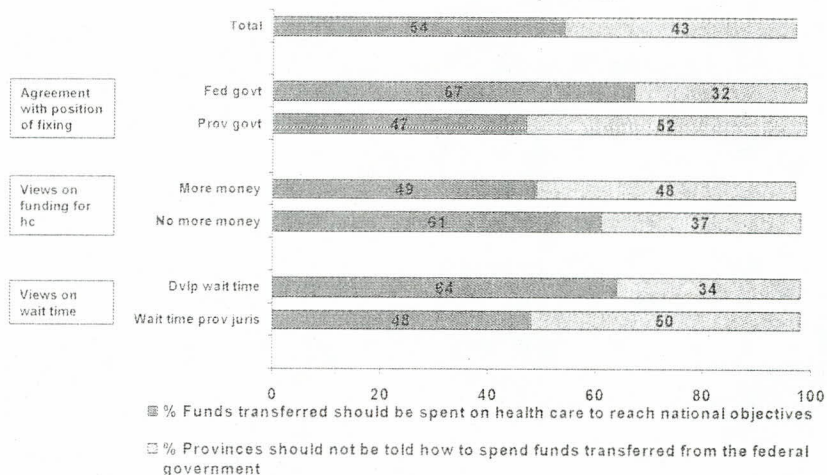
As expected and previously seen, a respondent's position on this policy is strongly associated with their position on other federal-provincial relationship measures.



Tied Funding: Issues



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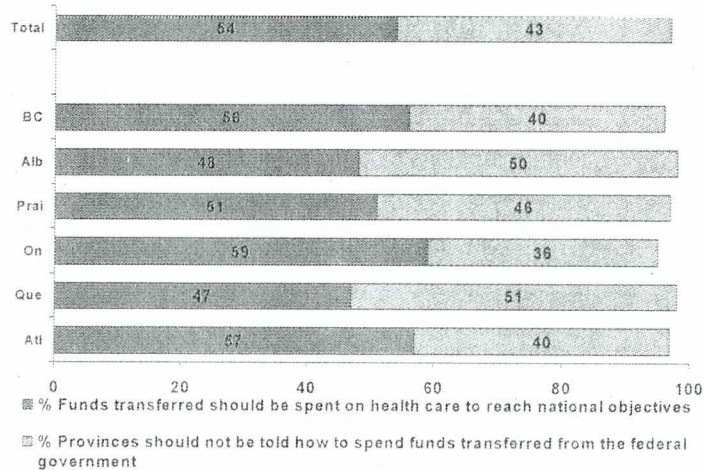
There was no significant gender, age, income or use of system differences associated with this measure.

Only in Quebec (51% vs. 47%) and Alberta (50% vs. 48%) is there greater support for provincial freedom in spending transferred funds than for federal directives on the funds. The preference for federal oversight was highest in Ontario (59%).

Tied Funding: Regions

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Which view is closer to your own?



Provincial Flexibility in Health Care Spending

Provincial Flexibility – Wait Time Strategies

The public is also relatively split on whether or not the provinces should be federally directed on how they implement particular health care objectives. However, provincial flexibility receives greater support than federal direction. For instance, 55 percent of Canadians believe that the reduction of waiting times is within a province's jurisdiction and that each province should be left to develop its own waiting time strategy compared to 42 percent of Canadians who believe that the federal government should be involved in developing national waiting time standards and monitoring the provinces progress.

Over the course of the conference, there was a six point increase in the number of Canadians who felt that each province should design its own strategy for dealing with wait times.

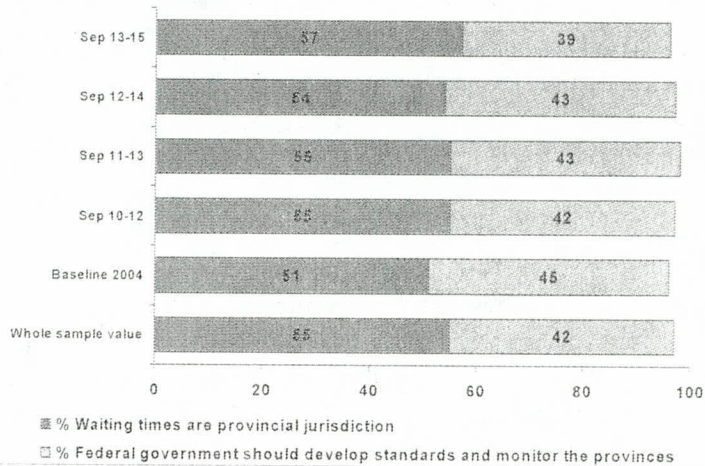


National Waiting Time Standards




Q28

Assuming the issue of waiting times is dealt with at the first minister's meeting, do you think the federal government should be responsible for creating national standards around waiting times and monitoring provincial performance, OR do you feel that waiting times are within provincial jurisdiction and each province should be left to create its own waiting time strategy?
Which view is closer to your own?




Again, not surprisingly, the preference for one or the other of these policies is strongly associated with whether a respondent is allied with the federal position (in the abstract), believes that more federal money is dependent on reaching an agreement and whether or not funds for health care should be federally directed.

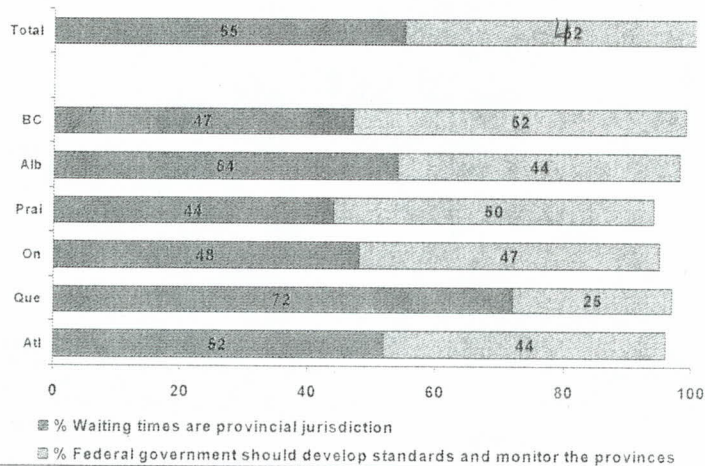
Residents of Quebec (72%) are substantially more likely to prefer the option that does not allow the federal government to monitor provincial efforts than are residents of the rest of Canada. In all regions, except Quebec, at least 44 percent of respondents prefer the federal government to develop national waiting time standards and monitor provincial progress. Conversely, in Quebec, just 25 percent of respondents support federal monitoring. The Prairies are the only region where people are more likely to agree to the development of federal standards and federal monitoring (50%) than they are to agree that waiting times are a provincial jurisdiction (44%).



National Waiting Time Standards



Assuming the issue of waiting times is dealt with at the first minister's meeting, do you think the federal government should be responsible for creating national standards around waiting times and monitoring provincial performance, OR do you feel that waiting times are within provincial jurisdiction and each province should be left to create its own waiting time strategy?
Which view is closer to your own?




There were no differences on this measure based on gender or recent use of the system. Older Canadians (59%) and lower income Canadians (58%) are more likely to support provincially designed strategies for wait times than are younger Canadians (51%) and those in the highest income bracket (47%).

Provincial Flexibility – Health System

There is clear majority support among Canadians for each province to decide where health care dollars should be spent. Seventy-nine percent of Canadians believe that provinces should spend funds in the health care areas in which they perceive there is the greatest need rather than being tasked with spending in federally-specified areas of health care (19% support). In every region of the country, at least 75 percent of residents support provincially directed health care spending.

From the baseline survey to the end of the FMM, there was, however, a five point increase in those who felt the provinces should be specifically directed on how to spend health care money within health care programs. However, this remains a minority opinion. Most think the provinces should have flexibility to address needs specific to their province within the health care field.

veraxis  **Health Canada** **Sante Canada** **Tied Funding (2)**

Q29

Some people say that the provinces/territories should be required to spend any new health care dollars on specific areas such as providing more coverage to care for people at home or purchasing more diagnostic equipment. Other people say that because each province or territory has different requirements, they should be able to spend the money wherever they perceive the greatest need to be. Which view is closer to your own?

