

Shifting Public Perceptions of Doctors and Health Care

FINAL REPORT

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The Association of Faculties of Medicine of Canada

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EXECUTIVE SUMMARY

Public Attitudes Towards Health Care in Canada

Results suggest a very high level of public confidence in Canada's health care system. Indeed, with more than eight in ten respondents (81 per cent) agreeing that they would receive the appropriate care if they were to become seriously ill, confidence is at its highest level in over a decade. By contrast, 14 per cent of respondents say they disagree that they would be able to access the appropriate services and five per cent say they neither agree nor disagree.

Despite record high levels of confidence in the health care system, most respondents feel that the health care system has not improved. A plurality of respondents (41 per cent) say that the quality of health care in Canada has stayed the same, while one-third (30 per cent) believe that it has deteriorated. Just 25 per cent say that the quality of health care has improved. While these findings may initially suggest a negative perception of Canada's health care system, it is important to note that these figures have improved dramatically over the last 14 years. Whereas in 1997, those who believed the system had deteriorated outnumbered those who believed it had improved by a margin of nearly ten to one (68 per cent versus 7 per cent), these numbers almost stand at parity today.

Responses show an overwhelming sense that there are too few physicians in Canada. Nine in ten respondents (91 per cent) say there are too few family doctors, compared to six per cent who say the number is right and just one per cent who say there are too many. Similarly, responses also suggest that the public feels there are too few specialists, but that the shortage is less severe. Three-quarters of respondents (78 per cent) say that there are too few specialists, compared to 13 per cent who say the number is sufficient and three per cent who say there are too many.

Public Priorities Regarding Health Care

A plurality of respondents (43 per cent) view the quality of health care services as the most important aspect of health care, followed closely by equal access for all Canadians (38 per cent). Health of the Canadian population was selected as a top priority by one in ten respondents (12 per cent) and six per cent selected costs of the health care system. Tracking data reveals that that public preferences are gradually shifting towards a system that focuses on quality, rather than on equality. Whereas in 1995, equal access was selected by a majority of Canadians (53 per cent), health care quality now ranks as the leading issue.

Roughly half of respondents (48 per cent) place a high degree of importance on the ability of foreign-trained doctors to understand the cultural needs of Canada. Meanwhile, four in ten respondents say it is important that patients are able to see a doctor of the same gender (43 per cent) and that all doctors (not just foreign-trained doctors) understand the cultural needs of Canadian patients (40 per cent). Responses suggest that Canadians place relatively low levels of importance on ensuring that the

composition of Canada's doctors reflect its socio-economic diversity (14 per cent) and its ethno-cultural diversity (13 per cent).

One-third of respondents (30 per cent) say that hiring more doctors and medical professionals should be the primary focus of government spending on health, while a similar proportion (29 per cent) say that hospitals and primary care should be the top priority. One in five respondents (19 per cent) would like to see funding go towards more promotional and preventative programs, while one in seven (13 per cent) place a high level of importance on increased home care. Six per cent say that increased home care should be the focus of government funding.

Respondents point to the daily activities of Canadians as the primary determinant of Canadian health (62 per cent). About one in five (18 per cent) say the health care system is the main driver while one in ten identify the quality of Canada's food and water (11 per cent). Just six per cent say the environmental factors such as air quality is the biggest factor.

Evaluation of Canada's Doctors

Results suggest very high levels of trust in Canada's medical professionals, with more than eight in ten respondents saying they have a high level of trust in nurses (84 per cent) and doctors (81 per cent). Respondents exhibit much less trust in public servants (34 per cent) and lawyers (26 per cent), and express little to no trust in politicians (9 per cent, compared to 73 per cent who say they have a low level of trust).

Nine in ten respondents (90 per cent) say they have seen a doctor in the last year, compared to just 10 per cent who have not. Of those who have seen a doctor, 72 per cent saw a family doctor during their last visit, while 26 per cent saw another specialist.

Results suggest that Canadians are generally satisfied with wait times. Three-quarters of those who have seen a doctor in the last year say they are satisfied with the amount of time it took to see them, compared to 17 per cent who are dissatisfied and 6 per cent who are neither satisfied nor dissatisfied. There are no significant differences between respondents who saw a family doctor and those who saw another specialist.

Respondents who had seen a doctor in the last year were asked to rate their level of satisfaction with their last visit with a doctor. Overall, responses suggest that Canadians are satisfied with their doctors, with 84 per cent of respondents rating the experience as good. Less than one in ten respondents rate the experience as poor (8 per cent) or as neither good nor poor (7 per cent). Again, there are no significant differences between respondents who saw a family doctor and those who saw another specialist.

There respondents were also asked to rate their doctor with regards to overall knowledge, communication skills, and amount of time spent with patients. Nine in ten respondents rate their doctors' overall knowledge and communications skills as good (90 per cent and 88 per cent, respectively), while roughly three-quarters (77 per cent) are satisfied with the amount of time they received with their doctor.

Again, there are no significant differences between respondents who saw a family doctor and those who saw another specialist.

Public Literacy on Canada's Health Care System

Literacy on Canada's health care system varies heavily by topic. For instance, most Canadians recognize that doctors are mostly private business people who are compensated for their services, rather than public servants. By contrast, less than a third of Canadians correctly identified provincial governments as the body responsible for determining the number of new doctors to be trained.

Canada's Medical Education System

Overall, responses show very high levels of confidence in Canada's medical education system. Fully 90 per cent of respondents say they agree that family doctors who receive training at Canadian Faculties of Medicine have the skills and expertise necessary to provide quality health care. Just five per cent disagree with this assessment and four per cent neither agree not disagree. Similarly, 91 per cent of respondents exhibit confidence in the system's ability to produce adequately trained specialists (compared to 4 per cent who disagree and 3 per cent who neither agree nor disagree).

Responses show that, despite their high levels of confidence in the medical education system, the vast majority of Canadians (78 per cent) feel that medical schools are producing too few graduates. One in ten respondents (12 per cent) say medical school are producing the right number of graduates and just one per cent believe that too are too many new doctors.

Canadian Health Care in the 21st Century

Respondents were provided with a list of emerging issues in the health care system and asked which one they believe will have the greatest impact on the future of health care in Canada. A clear majority of respondents (64 per cent) say that Canada's aging population and changing demographics will be the most influential factor. Meanwhile, one in five (22 per cent) believe that fiscal and financial pressures will be a key issue. The emergence of new e-health technologies (8 per cent) and environmental degradation (4 per cent) were not seen as dominant factors.

Results show that Canadians are generally comfortable with the idea of electronic health records (EHRs). The vast majority of respondents (88 per cent) say they support the development of EHRs, including 59 per cent who strongly support their development. Just one in ten respondents (11 per cent) say they are opposed to EHRs.

Results show that use of the internet for health information is widespread, with 64 per cent of respondents saying they have used the internet to search for health information at least once in the last month (including 15 per cent who have done so more than five times). By comparison, one third (34 per cent) have not searched for health information online.

Respondents were asked whether they would be comfortable receiving a medical exam in their own home. Results show high receptivity to the idea, with 82 per cent saying that they would be willing to see doctor in their own home (including 42 per cent who say they would definitely be open). Nevertheless, one in six respondents (17 per cent) appears to be uncomfortable with the idea.

Despite strong receptivity to receiving a home medical exam, respondents exhibit a clear preference for seeing a doctor in their office. Two-thirds of respondents (69 per cent) say they would prefer to see a doctor in a doctor's office, while one in six (16 per cent) would prefer to see a doctor in their own home. One in ten respondents would be more comfortable seeing a doctor in a community clinic, while just three per cent selected a hospital as their preferred venue for seeing a doctor.

This study also examined public attitudes regarding foreign credential recognition of health professionals. Survey results also indicate that nearly eight in ten Canadians support recognizing the credentials of foreign-trained health professionals (31 per cent strongly support, and 47 per cent somewhat support), while only 19 per cent oppose this idea. Support for this idea, however, is down three points since February 2008, and opposition is up six points over this same time period.

Results also suggest that most Canadians would be comfortable with having foreign-trained doctors provide medical services to themselves and their family. Three in four respondents (76 per cent) indicate they would be just as willing to choose a foreign-trained doctor as a Canadian-trained one, as long as Canadian authorities indicate that the doctor's credentials are consistent with those in Canada. Just 22 per cent are more inclined to choose a doctor who received their credentials in Canada. These results have remained unchanged over the last three years.

1. Introduction

Over the next few decades, the face of Canadian medicine will change dramatically and our health care system will need to adapt to new and emerging challenges as Canada heads into the 21st century. New and radical developments in medical technology are revolutionizing health care in Canada and physicians and facilities alike will need to adapt. Demographics of the Canadian population are also changing; Canadians are living longer while birth rates are falling. Furthermore, with the onset of the global financial crisis, governments in Canada are facing significant fiscal challenges while health care costs continue to rise.

It is essential that physicians are equipped to handle these challenges. It is therefore necessary to review postgraduate medical education in Canada. The Association of Faculties of Medicine of Canada (AFMC), in coordination with other organizations, has launched the Future of Medical Education in Canada Postgraduates (FMEC PG) Project. The goal of this endeavour is to "conduct a thorough review of postgraduate medical education in Canada, establish whether the structure and processes of the current system are designed for the best possible outcomes to meet the current and future societal health care needs, and formulate recommendations for change."

As part of this endeavour, this study will examine a number of important issues pertaining to health care and the medical education system in Canada. In particular, this study will look at public confidence in the health care system, public priorities, public literacy of the health care system, confidence in the medical education system, and the growing role of technology.

1.1 METHODOLOGY

This survey was conducted January 24 - February 4, 2010 using EKOS' unique hybrid online-offline research panel, Probit. This panel is randomly recruited from the general population, meaning that the only way to be included in Probit is through random selection. Unlike opt-in internet-only research panels, Probit supports confidence intervals and error testing.

In Canada, nearly one third of the population does not use the internet. Since those who do not use the internet are much more likely to be bigger users of the health care system, it is crucial that these individuals are included in the sample. Recognizing the importance of capturing this segment of the population, respondents without internet access were able to participate by means of a self-administered mail-out survey.

In total, a random sample of 1,720 Canadians aged 18 and over responded to the survey (1,502 online, 218 by self-administered mail-out surveys). A sample of this size provides a margin of error of +/- 2.4 percentage points, 19 times out of 20. The margin of error increases when the results are subdivided (i.e., error margins for sub-groups such as regions). The survey was conducted in both official languages.

2. Public Attitudes Towards Health Care in Canada

Confidence in Canada's health care system is at a modern high point. Furthermore, there has been a dramatic reversal of the public belief that the health care system is deteriorating. Whereas in 1997, those who believed the system had deteriorated outnumbered those who believed it had improved by a margin of nearly ten to one, these numbers virtually stand at parity today. Nevertheless, there is a clear sense among Canadians that Canada is experience a shortage of doctors, particularly family doctors.

2.1 Confidence in Health Care System

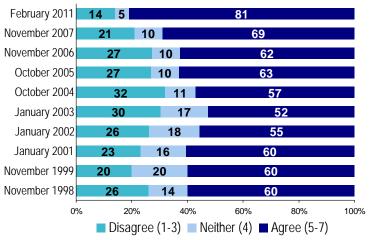
Respondents were asked whether they are confident that they would be able to access the necessary health care services if they (or a family member) were to become ill. Results suggest a very high level of public confidence in Canada's health care system. Indeed, with more than eight in ten respondents (81 per cent) agreeing that they would receive the appropriate care, confidence is at its highest level in over a decade. By contrast, 14 per cent of respondents say they disagree that they would be able to access the appropriate services and five per cent say they neither agree nor disagree.

- > Confidence in the health care system increases progressively with self-rated health. Nearly nine in ten respondents in excellent health (86 per cent) say they agree that they could access the necessary health care services should they fall ill, a figure that falls to just 58 per cent among those who rate their health as poor.
- Perhaps not surprisingly, respondents who have a family doctor are significantly more likely to express confidence in the health care system (83 per cent say they agree, compared to 72 per cent of those without a family doctor).
- **>** Quebec residents are moderately less confidence in the health care system (77 per cent).

Confidence in Health Care System

"To what extent do you agree with the following statement?"

I am confident that if I or a family member were to become seriously ill, we would be able to access the necessary health care services





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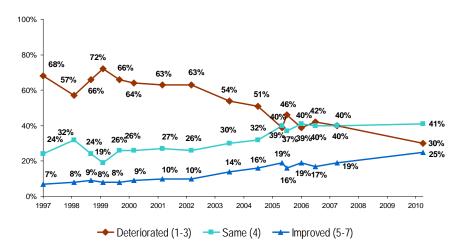
2.2 Perceptions of Health Care Quality

Respondents were asked if they feel that the health care system has improved, deteriorated, or stayed the same over the last two years. Despite the record high levels of confidence in the health care system expressed in the previous section, most respondents feel that the health care system has not improved. A plurality of respondents (41 per cent) say that the quality of health care in Canada has stayed the same, while one-third (30 per cent) believe that it has deteriorated. Just 25 per cent say that the quality of health care has improved. While these findings may initially suggest a negative perception of Canada's health care system, it is important to note that these figures have improved dramatically over the last 14 years. Whereas in 1997, those who believed the system had deteriorated outnumbered those who believed it had improved by a margin of nearly ten to one (68 per cent versus 7 per cent), these numbers almost stand at parity today.

- Residents of the Prairies and residents of Ontario show the most positive perceptions of health care quality in Canada (42 per cent and 31 per cent, respectively, say the quality has improved). By contrast, residents of Quebec and Alberta are far more pessimistic (43 per cent and 37 per cent, respectively, say the quality has deteriorated).
- > The perception that the quality of health care has improved over the last two years is more prevalent among older age groups (41 per cent of seniors say the system has improved, compared to just 19 per cent among youth).
- Again, those with a family doctor share the most optimistic perceptions of the quality of health care (27 per cent say improved, compared to 15 per cent of those without a family doctor).
- > High school graduates express a somewhat more positive view of the quality of health care (33 per cent say improve, compared to 25 per cent on average).

Perceptions of Health Care Quality

"Has the quality of health care over the past two years improved, deteriorated, or stayed the same?"



EKOS Research Associates Inc.

2.3 ADEQUACY OF NUMBER OF DOCTORS

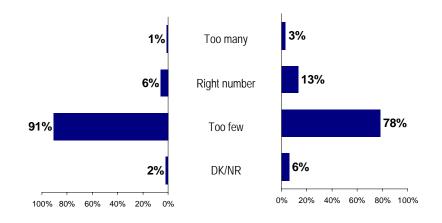
Respondents were asked whether they feel that Canada has too many, too few, or just the right number of family doctors and physicians. In both cases, responses show an overwhelming sense that there are too few physicians in Canada. Nine in ten respondents (91 per cent) say there are too few family doctors, compared to six per cent who say the number is right and just one per cent who say there are too many. Similarly, responses also suggest that the public feels there are too few specialists, but that the shortage is less severe. Three-quarters of respondents (78 per cent) say that there are too few specialists, compared to 13 per cent who say the number is sufficient and three per cent who say there are too many.

- > Regionally, residents of the Prairies are the most likely to suggest that there are too few specialists (89 per cent).
- Interestingly, those with a family doctor are more likely to see a shortage in both the number of family doctors (92 per cent, compared to 88 per cent of those without a family doctor) and the number of specialists (79 per cent versus 68 per cent).

Adequacy of Number of Doctors

"Overall, do you think that Canada has too many, too few, or just the right number of *family doctors*?"

"Overall, do you think that Canada has too many, too few, or just the right number of *other specialists?*"





n=1,720

3. Public Priorities REGARDING HEALTH CARE

Over the last decade, the focus of public priorities has shifted from equality to quality. In 1995, access was ranked a the top priority by a majority of Canadians. Today, it is health care quality that now ranks as the leading issue. Canadians also feel that it is important that doctors are trained to understand and deal with the cultural needs of patients, though they are more apt to apply this requirement to foreign-trained doctors. There is also a strong sense that patients should have the right to see a doctor of the same gender.

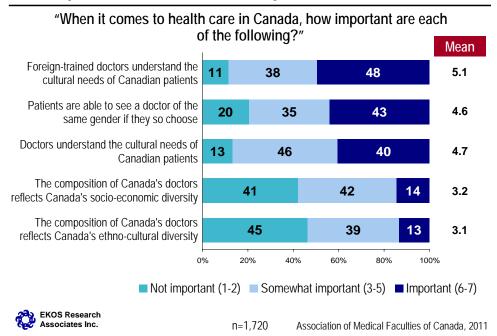
Echoing the perceived shortage of doctors expressed in the last section, most respondents believe that governments should focus their health care spending on more doctors and additional hospitals.

3.1 MOST IMPORTANT ASPECT OF HEALTH CARE SYSTEM

Respondents were presented with a list of four aspects of the health care system (quality, equal access for all Canadians, cost, and the health of the population) and asked to select the one they feel is the most important. Results show that a plurality of respondents (43 per cent) view the quality of health care services as the most important aspect of health care, followed closely by equal access for all Canadians (38 per cent). Health of the Canadian population was selected as a top priority by one in ten respondents (12 per cent) and six per cent selected costs of the health care system. Tracking data reveals that that public preferences are gradually shifting towards a system that focuses on quality, rather than on equality. Whereas in 1995, equal access was selected by a majority of Canadians (53 per cent), health care quality now ranks as the leading issue.

- The perceived importance of health care quality increases progressively with income (from 35 per cent among those with a household income of less than \$20,000, to a high of 51 per cent among those earning more than \$100,000). By contrast, the perceived importance of equal access to health care decreases with income (from 44 per cent among those earning less than \$20,000 to 28 per cent of those earning more than \$100,000).
- Respondents with a family doctor place more importance on health care quality than those who do not have a family doctor (45 per cent versus 30 per cent). By contrast, those without a family doctor place more importance on equal access (41 per cent versus 37 per cent) and health the Canadian population (19 per cent versus 11 per cent).

Importance of Various Aspects of Health Care

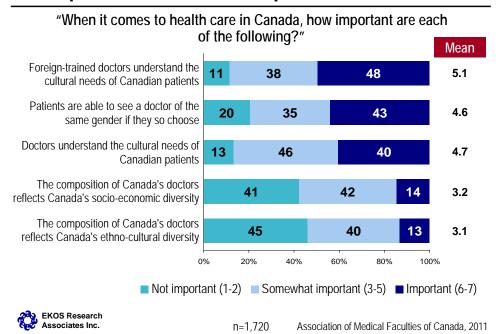


3.2 IMPORTANCE OF VARIOUS ASPECTS OF HEALTH CARE

Respondents were presented with a list of five aspects of health care and asked to rate the importance of each one. Roughly half of respondents (48 per cent) place a high degree of importance (i.e., 6 or 7 on a 7-point scale) on the ability of foreign-trained doctors to understand the cultural needs of Canada. Meanwhile, four in ten respondents say it is important that patients are able to see a doctor of the same gender (43 per cent) and that all doctors (not just foreign-trained doctors) understand the cultural needs of Canadian patients (40 per cent). Responses suggest that Canadians place relatively low levels of importance on ensuring that the composition of Canada's doctors reflect its socio-economic diversity (14 per cent) and its ethno-cultural diversity (13 per cent).

- Perhaps not surprisingly, respondents who identify themselves as visible minorities are significantly more likely to say that it is important that all doctors understand and are trained to deal with the cultural needs of Canadian patients (67 per cent). This group is also more likely to say that the composition of Canada's doctors should reflect Canada's ethno-cultural diversity (24 per cent) and socio-economic diversity (22 per cent).
- Respondents in the lowest income brackets are more likely to say that the composition of Canada's doctors should reflect Canada's socio-economic diversity (21 per cent of those with a household income of less thank \$20,000, compared to just 9 per cent of those earning more than \$100,000).
- **>** Women place relatively more importance on the right to see a doctor of the same gender (50 per cent, compared to 36 per cent of men).
- Regionally, residents of British Columbia place relatively more importance on the ability to see a doctor of the same gender (57 per cent) and the composition of Canada's doctors reflecting its ethno-cultural diversity (20 per cent).

Importance of Various Aspects of Health Care



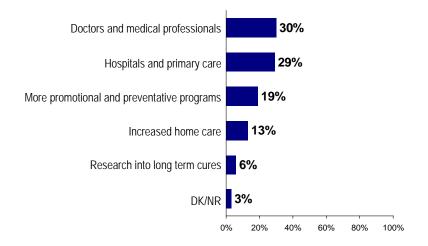
3.3 Preferred Focus of Government Funding

Echoing the perceived shortage of doctors seen earlier, one-third of respondents (30 per cent) say that hiring more doctors and medical professionals should be the primary focus of government spending on health, while a similar proportion (29 per cent) say that hospitals and primary care should be the top priority. One in five respondents (19 per cent) would like to see funding go towards more promotional and preventative programs, while one in seven (13 per cent) place a high level of importance on increased home care. Six per cent say that increased home care should be the focus of government funding and three per cent are undecided.

- Residents of Quebec (who were the most likely to suggest a doctor shortage) are the most likely to say that governments should focus on hiring more doctors and medical shortages (41 per cent). This sentiment is also more prevalent among those who rate their health as poor (40 per cent) and those with children under 18 (36 per cent) and.
- **>** Hospitals and primary care are a top priority among those with a high school education (37 per cent) and British Columbia residents (35 per cent).
- Support for promotional and preventative programs is relatively higher among youth (31 per cent), university graduates (28 per cent), residents of British Columbia (28 per cent), visible minorities (27 per cent), and those with a household income of over \$100,000 (25 per cent). Support also increases progressively with rated health (from 8 per cent of those rating their health as poor to 34 per cent of those in excellent health).
- Not surprisingly, those most likely to rely on home care seniors are the most likely to say that increased home care should be the government's top priority when it comes to health care funding (23 per cent, compared to just 5 per cent of youth).

Preferred Focus of Government Funding

"Of the following, where should the government be focusing its funding?"





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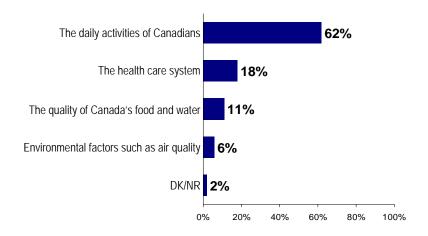
3.4 Factors Affecting Canadian Health

Respondents were presented with a list of four factors and asked to select the one they feel has the biggest impact on the health of the average Canadian. By an overwhelming margin, respondents point to the daily activities of Canadians as the primary determinant of Canadian health (62 per cent). About one in five (18 per cent) say the health care system is the main driver while one in ten identify the quality of Canada's food and water (11 per cent). Just six per cent say the environmental factors such as air quality is the biggest factor and two per cent are uncertain.

- ➤ Men are more likely to select the daily activities of Canadians (67 per cent, compared to 58 per cent of women), while women are more likely to select the health care system (22 per cent, compared to 15 per cent of men)
- Interesting, respondents who rate their health as excellent or very good are significantly more likely to identify the daily activities of Canadians as having the biggest impact on Canadian health (72 per cent and 70 per cent, respectively). Those who rate their health as poor, fair, or good, in contrast, are more likely to suggest that the health care system is primarily responsible (32 per cent, 25 per cent, and 24 per cent, respectively).
- The most economically vulnerable respondents (i.e., those in the lowest income bracket and those limited to a high school education) are more likely to identify the health care system as the biggest determinant of Canadian health (30 per cent of those with a household income of less than \$20,000 and 28 per cent of those without post-secondary education). By contrast, those earning more than \$100,000 and those with a university education are more likely to say that the daily activities of Canadians are the primary factor (74 per cent and 73 per cent, respectively).

Factors Affecting Canadian Health

"Which of the following factors do you think has the biggest impact on the health of the average Canadian?"





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4. EVALUATION OF CANADA'S DOCTORS

Unchanged over the last decade, trust in the medical profession is extremely high. Indeed, doctors and nurses are seen as more trustworthy than any of the other occupational groups examined.

Overall, the quality of a patient's experience when seeing either a specialist or a family doctor appears to be very high. Doctors receive slightly lower marks on the amount of time they spend with their patients and on how long it took to see them, but overall the scores are excellent. There is, however, consistent evidence that doctors fare worse with the least healthy (it is unclear if this is a causal relationship).

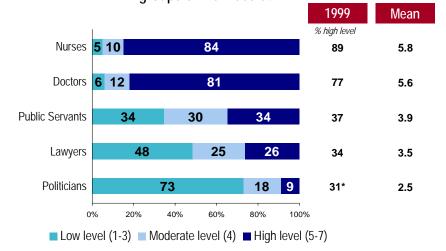
4.1 TRUST IN OCCUPATIONS

Respondents were asked how much trust they have in five occupational groups: nurses, doctors, public servants, lawyers, and politicians. Unchanged from a decade ago, results suggest very high levels of trust in Canada's medical professionals, with more than eight in ten respondents saying they have a high level of trust in nurses (84 per cent) and doctors (81 per cent). Respondents exhibit much less trust in public servants (34 per cent) and lawyers (26 per cent), and express little to no trust in politicians (9 per cent, compared to 73 per cent who say they have a low level of trust).

- > Trust in both nurses and doctors is substantially higher among those who have a family doctor (for instance, 83 per cent say they trust doctors, compared to 67 per cent of those who do not have a family doctor).
- > Trust in nurses and doctors increases progressively with rated health. For example, just 61 per cent of those who rate their health as poor say they have a high level of trust in doctors, a figure that rises to 83 per cent among those in excellent health.

Trust in Occupations

"How much trust do you have in each of the following occupational groups or individuals?"



*In 1999, this question was worded as "federal politicians"



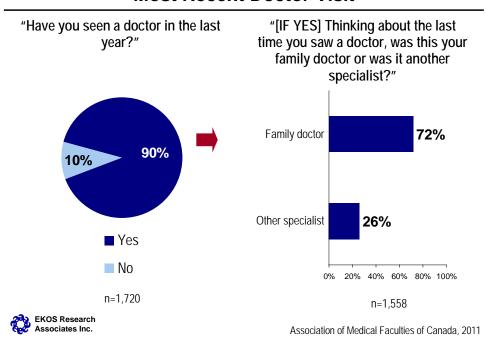
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4.2 Most Recent Doctor Visit

Nine in ten respondents (90 per cent) say they have seen a doctor in the last year, compared to just 10 per cent who have not. Of those who have seen a doctor, 72 per cent saw a family doctor during their last visit, while 26 per cent saw another specialist.

- Nearly every senior who responded to this survey has seen a doctor in the past year (97 per cent).
- Not surprisingly, those with a family doctor are more likely to have seen a doctor (93 per cent, compared to 68 per cent of those who do not have a family doctor).

Most Recent Doctor Visit



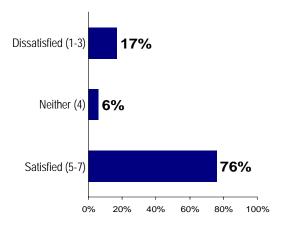
4.3 Satisfaction with Wait Times

Results suggest that Canadians are generally satisfied with wait times. Three-quarters of those who have seen a doctor in the last year say they are satisfied with the amount of time it took to see them, compared to 17 per cent who are dissatisfied and 6 per cent who are neither satisfied nor dissatisfied. There are no significant differences between respondents who saw a family doctor and those who saw another specialist.

- Respondents who identify themselves as visible minorities exhibit the least satisfaction with wait times (54 per cent say they are satisfied).
- > Satisfaction with wait times rises progressively with age from a low of 62 per cent among youth to a high of 87 per cent among seniors.
- > Satisfaction with wait times varies by region, ranging from 72 per cent in Quebec to 88 per cent in Atlantic Canada.

Satisfaction with Wait Times

"Thinking again about the last time you saw a doctor, how would you rate your level of satisfaction with the amount of time it took to see him or her?"



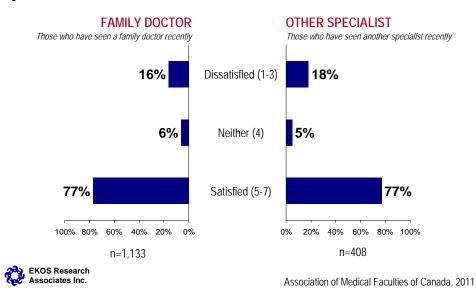


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Association of Medical Faculties of Canada, 2011

Satisfaction with Wait Times

"Thinking again about the last time you saw a doctor, how would you rate your level of satisfaction with the amount of time it took to see him or her?"



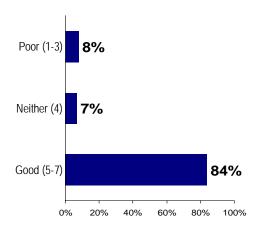
4.4 OVERALL SATISFACTION WITH LAST DOCTOR VISIT

Respondents who had seen a doctor in the last year were asked to rate their level of satisfaction with their last visit with a doctor. Overall, responses suggest that Canadians are satisfied with their doctors, with 84 per cent of respondents rating the experience as good. Less than one in ten respondents rate the experience as poor (8 per cent) or as neither good nor poor (7 per cent). Again, there are no significant differences between respondents who saw a family doctor and those who saw another specialist.

- > Satisfaction is highest among seniors (90 per cent say good, compared to 72 per cent of youth) and those with a family doctor (86 per cent, compared to 66 per cent of those without a family doctor).
- > Satisfaction is lower among those who identify themselves as visible minorities (66 per cent say good).

Overall Satisfaction with Last Doctor Visit

"Thinking again about the last time you saw a doctor, how would you rate the experience overall?"



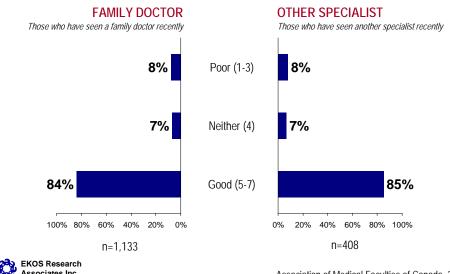


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Association of Medical Faculties of Canada, 2011

Overall Satisfaction with Doctor Visit

"Thinking again about the last time you saw a doctor, how would you rate the experience overall?"



Associates Inc.

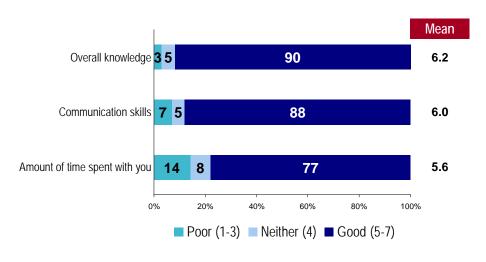
4.5 EVALUATION OF CANADA'S DOCTORS

Respondents who have seen a doctor in the last year were asked to rate their doctor with regards to overall knowledge, communication skills, and amount of time spent with patients. Nine in ten respondents rate their doctors' overall knowledge and communications skills as good (90 per cent and 88 per cent, respectively), while roughly three-quarters are satisfied with the amount of time they received with their doctor (77 per cent). Again, there are no significant differences between respondents who saw a family doctor and those who saw another specialist.

- Regionally, residents of Atlantic Canada are consistently rate with their last visit with a physician more highly than respondents from other provinces. For instance, 90 per cent of these respondents say they are satisfied with the amount of time they received with their doctor, compared to a national average of 77 per cent.
- Respondents with a family doctor consistently rate physicians more highly. For example, 79 per cent of these respondents rate their doctor's performance regarding time spent with patients as good, a figure that drops to 60 per cent among those that do not have a family doctor.
- > Those who rate their health as poor appear to be among the least satisfied. For example, just 66 per cent say their doctor spent enough time with them, compared to 78 per cent of those who say they are in excellent health.

Evaluation of Canada's Doctors

"Thinking again about the last time you saw a doctor, how would you rate his or her performance in each of the following areas?"



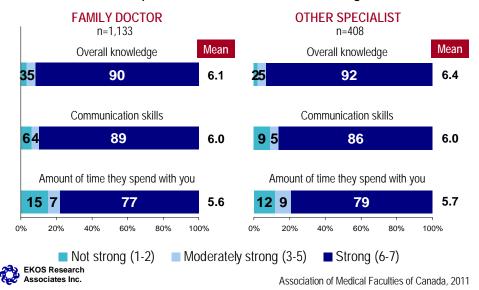


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Association of Medical Faculties of Canada, 2011

Evaluation of Canada's Doctors

"Thinking again about the last time you saw a doctor, how would you rate his or her performance in each of the following areas?"



5. PUBLIC LITERACY OF CANADA'S HEALTH CARE SYSTEM

Literacy on Canada's health care system varies heavily by topic. For instance, most Canadians recognize that doctors are mostly private business people who are compensated for their services, rather than public servants. By contrast, less than a third of Canadians correctly identified provincial governments as the body responsible for determining the number of new doctors to be trained.

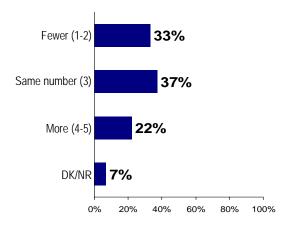
5.1 PERCEIVED CHANGE IN THE NUMBER OF PHYSICIANS

Respondents were asked whether they believe that there are more physicians, fewer physicians, or the same number of physicians practising in Canada as there were a year ago. Responses reveal that Canadians are largely unaware that the number of physicians practising in Canada is increasing, as just one in five respondents (22 per cent) selected this option. Most respondents believe that the number of physicians is either unchanged from last year (37 per cent) or has actually decreased (33 per cent). An additional seven per cent offered no response.

There are relatively few sub-group differences, though seniors (32 per cent), men (29 per cent), residents of British Columbia (27 per cent), and university graduates (26 per cent) are all somewhat more likely to recognize that the number of physicians in Canada is increasing.

Perceived Change in the Number of Physicians

"Do you think there are more physicians, fewer physicians, or the same number of physicians practising in Canada as there were a year ago?"





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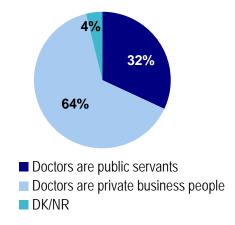
5.2 PERCEIVED EMPLOYER OF CANADA'S PHYSICIANS

Respondents were asked whether they believe that physicians are mostly employees of the government or are mostly private business people who are compensated for their services through a variety of payment mechanisms. Results show that two-thirds of Canadians (64 per cent) say that doctors are private business people, though nearly one third (32 per cent) believe that doctors are public servants. An additional four per cent are uncertain.

- Regionally, Quebec residents are the most likely to say that doctors are public servants (58 per cent).
- Men (72 per cent) and those with a family doctor (66 per cent, compared to 56 per cent of those without a family doctor) are more likely to say that doctors are private business people. This belief increases progressively with age (75 per cent among seniors, compared to 41 per cent among youth), education (67 per cent of university graduates, compared to 59 per cent of those without any post-secondary education), and income (73 per cent of those with a household income of over \$100,000, compared to 51 per cent of those earning less than \$20,000).

Perceived Employer of Canada's Physicians

"Do you think that physicians are mostly employees of the government or do you think that they are mostly private business people who are compensated for their services by the government?"





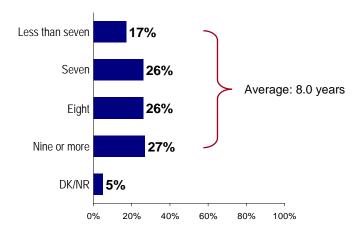
5.3 TIME REQUIRED TO TRAIN NEW DOCTORS

Respondents were asked, unprompted, how long they believe it takes to become a family doctor who can see patients. On average, respondents believe that it takes approximately eight years of school to become a family doctor, slightly less than the nine to ten years typically required). Respondents also believe, on average, that it takes approximately 10 years to become a cardiologist who can see patients, much less than the 13-14 years typically required.

➤ University graduates and those with a household income of over \$100,000 are consistently more likely to correctly estimate the amount of time required to become a physician.

Time Required to Train Family Doctors

"After finishing high school, how many years of school on average do you think it takes to become a *family doctor* who can see patients in Canada?"



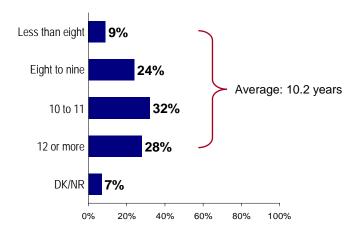


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Association of Medical Faculties of Canada, 2011

Time Required to Train a Cardiologist

"After finishing high school, how many years of school on average do you think it takes to become a *cardiologist* who can see patients in Canada?"





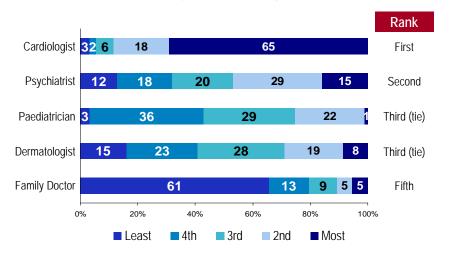
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5.4 TIME REQUIRED TO TRAIN NEW DOCTORS

Respondents were given a list of five specialities within the medical profession and asked to rank them in order of how much each one earns. Results show a somewhat limited degree of literacy with this topic. Respondents believe that cardiologists are by far the most highly paid. In second place, according to respondents, are psychiatrists, while paediatricians and dermatologists are tied for third. A majority of respondents believe that family doctors earn the least of the five professions tested.

Perceived Wages of Canada's Physicians

"Please rank the following five occupations in order of how much you believe they earn on average"





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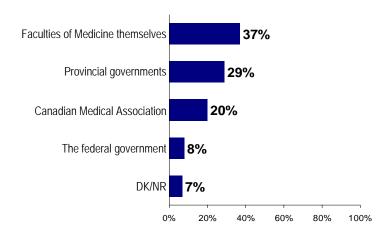
5.5 PERCEIVED RESPONSIBILITY FOR NUMBER OF NEW DOCTORS

Results reveal that relatively few respondents recognize that provincial governments are responsible for determining the number of applicants to be accepted to faculties of medicine in Canada; just 29 per cent correctly answered this question. Nearly four in ten respondents (37 per cent) believe that the faculties of medicine themselves are responsible for determining the number of applicants to be accepted, while 20 per cent believe that the Canadian Medical Association is the decision maker. One in ten respondents (8 per cent) say the federal government is responsible, while seven per cent are uncertain.

Respondents with a household income of over \$100,000 are the most likely to correctly identify provincial governments as the body responsible for determining the number of applicants to be accepted into medical school (39 per cent). Other groups that score above average include those who rate their health as excellent (35 per cent), men (34 per cent), and university graduates (34 per cent).

Perceived Responsibility for Number of New Doctors

"Faculties of Medicine in Canada accept a predetermined number of applicants each year. Who do you think determines the number of new doctors to be trained?"





n=1,720 Association of Medical Faculties of Canada, 2011

6. MEDICAL EDUCATION IN CANADA

Overall, responses reveal that the public has full confidence in the quality of the education that doctors receive in Canada. The main concern regarding Canada's medical education system, however, does not appear to centre on quality, but rather on quantity. There is a clear sense that medical schools in Canada are producing too few graduates, particularly among seniors.

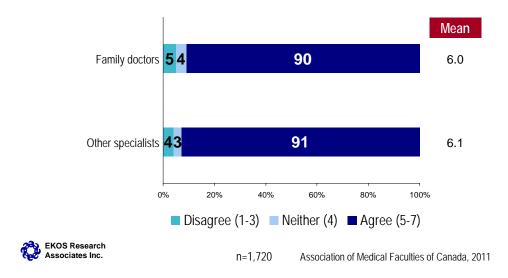
6.1 CONFIDENCE IN MEDICAL EDUCATION SYSTEM

Overall, responses show very high levels of confidence in Canada's medical education system. Fully 90 per cent of respondents say they agree that family doctors who receive training at Canadian Faculties of Medicine have the skills and expertise necessary to provide quality health care. Just five per cent disagree with this assessment and four per cent neither agree not disagree. One per cent are uncertain. Similarly, 91 per cent of respondents exhibit confidence in the system's ability to produce adequately trained specialists (compared to 4 per cent who disagree, 3 per cent who neither agree nor disagree, and 2 per cent who offered no response).

- Confidence is consistently higher among respondents who have a family doctor (for example, 91 per cent say they are confident that family doctors are adequately trained, compared to 83 per cent of those who do not have a family doctor).
- **>** Confidence is consistently lower among respondents who rate their health as poor (for example, 80 per cent have confidence in new family doctors) and those who identify themselves as visible minorities (80 per cent).

Confidence in Medical Education System

"I am confident that family doctors/other specialists who receive training at Canadian Faculties of Medicine have the skills and expertise necessary to provide quality health care.



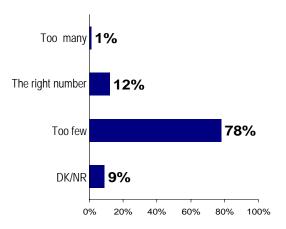
6.2 ADEQUACY OF NUMBER OF NEW GRADUATES

Responses show that, despite their high levels of confidence in the medical education system, the vast majority of Canadians (78 per cent) feel that medical schools are producing too few graduates. One in ten respondents (12 per cent) say medical school are producing the right number of graduates and just one per cent believe that too are too many new doctors.

- **>** Concerns that the number of new graduates is too low are more prevalent among older age groups (notably 84 per cent of seniors, compared to 69 per cent of youth).
- > Regionally, residents of the Prairies and Atlantic Canada are the most likely to perceive a shortage of new graduates (88 per cent and 82 per cent, respectively).

Adequacy of Number of New Graduates

"Overall, do you think that medical schools in Canada are producing too many graduates, too few graduates, or just the right number of graduates?"





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7. CANADIAN HEALTH CARE IN THE 21ST CENTURY

Over the next few decades, Canadian health care is expected to change significantly in order to adapt to the new and emerging challenges of the 21st century. Respondents believe that the primary driver of these changes will be Canada's aging population and changing demographics. Responses also reveal that Canadians are highly receptive to the development of electronic health records and the vast majority of Canadians would be comfortable having a medical exam conducted in their own home. The internet has also become a widely used tool in searching for health information and is particularly popular among younger age groups.

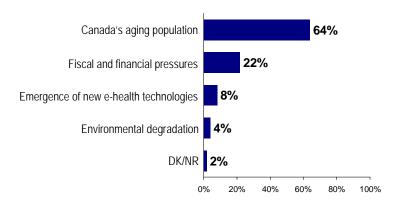
7.1 MOST INFLUENTIAL FORCE ON THE FUTURE OF HEALTH CARE

Respondents were provided with a list of emerging issues in the health care system and asked which one they believe will have the greatest impact on the future of health care in Canada. A clear majority of respondents (64 per cent) say that Canada's aging population and changing demographics will be the most influential factor. Meanwhile, one in five (22 per cent) believe that fiscal and financial pressures will be a key issue. The emergence of new e-health technologies (8 per cent) and environmental degradation (4 per cent) were not seen as dominant factors.

- **>** Canada's aging population is of particular concern to university graduates (67 per cent, compared to 54 per cent of high school graduates).
- Women are somewhat more likely to identify Canada's changing demographics as the most influential force on the future of health care (66 per cent, versus 61 per cent of men), while men are somewhat more concerned with fiscal and financial pressures (25 per cent, compared to 20 per cent of women).

Most Influential Force on the Future of Health Care

"Over the next few decades, Canadian health care is expected to change significantly in order to adapt to the new and emerging challenges of the 21st century. Which of the following forces do you think will have the greatest impact on the future of health care in Canada?"





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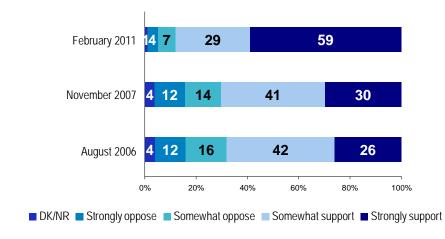
7.2 SUPPORT FOR ELECTRONIC HEALTH RECORDS

Results show that Canadians are generally comfortable with the idea of electronic health records (EHRs). The vast majority of respondents (88 per cent) say they support the development of EHRs, including 59 per cent who strongly support their development. Just one in ten respondents (11 per cent) say they are opposed to EHRs and one per cent offered no response.

- Interestingly, support for EHRs varies depending on rated health. More than nine in ten respondents who rate their health as excellent (92 per cent) support the development of EHRs, a figure that falls to 77 per cent of those in poor health.
- > Support for EHRs also rises progressively in income (82 per cent of those with a household income of less thank \$20,000 to 95 per cent of those earning over \$100,000).

Support for Electronic Health Records

"Overall, do you strongly support, somewhat support, somewhat oppose or strongly oppose the development of electronic health records?"





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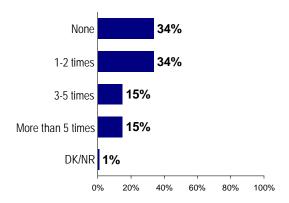
7.3 USE OF THE INTERNET TO SEARCH FOR HEALTH INFORMATION

Results show that use of the internet for health information is widespread, with 64 per cent of respondents saying they have used the internet to search for health information at least once in the last month (including 15 per cent who have done so more than five times). By comparison, one third (34 per cent) have not searched for health information online and one per cent offered no response.

- Use of the internet to find health information rises with education (from 50 per cent among high school graduates to 74 per cent among university graduates) and income (from 50 per cent of those earning less than \$20,000 to 74 per cent earning more than \$100,000), while it decreases with age (from 74 per cent of youth to 42 per cent of seniors).
- > Use of the internet to search for health information is somewhat more common among women (69 per cent, compared to 61 per cent of men) and those with children in the home (74 per cent, compared to 61 per cent of those without children).

Use of the Internet to Search for Health Information

"In the past month, how many times have you used the internet to search for health or medical-related information?"





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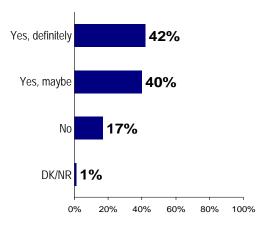
7.4 RECEPTIVITY TO RECEIVING A HOME MEDICAL EXAM

Respondents were asked whether they would be comfortable receiving a medical exam in their own home. Results show high receptivity to the idea, with 82 per cent saying that they would be willing to see doctor in their own home (including 42 per cent who say they would definitely be open). Nevertheless, one in six respondents (17 per cent) appears to be uncomfortable with the idea and one per cent are uncertain.

- > Residents of Quebec exhibit the most enthusiasm with the concept of home medical exams, with more than half of these respondents (53 per cent) saying they would definitely be comfortable.
- Men appear to be slightly more comfortable than women when it comes to receiving a medical exam in one's own home (85 per cent say they would be comfortable, compared to 79 per cent of women).

Receptivity to Receiving a Home Medical Exam

"If technology permitted, would you be comfortable receiving a medical exam in your own home?"





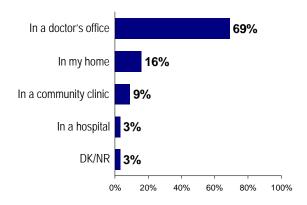
7.5 Preferred Venue for Seeing a Doctor

Despite strong receptivity to receiving a home medical exam, respondents exhibit a clear preference for seeing a doctor in their office. Two-thirds of respondents (69 per cent) say they would prefer to see a doctor in a doctor's office, while one in six (16 per cent) would prefer to see a doctor in their own home. One in ten respondents (9 per cent) would be more comfortable seeing a doctor in a community clinic, while just three per cent selected a hospital as their preferred venue for seeing a doctor. An additional three per cent are undecided.

- ➤ Perhaps not surprisingly, respondents who have a family doctor are particularly keen on visiting a doctor's office (72 per cent, compared to 54 per cent of those without a family doctor) while those without a family doctor are more open to visiting a clinic (17 per cent versus 8 per cent).
- > Regionally, residents of British Columbia are more likely to select a doctor's office (76 per cent), while Quebeckers are more likely to prefer seeing a doctor in their own home (22 per cent).

Preferred Venue for Seeing a Doctor

"Where would you most prefer to a see a doctor?"





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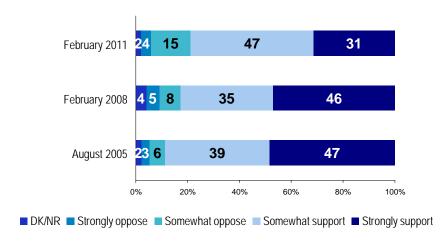
7.6 Support for Foreign Credential Recognition

This study also examined public attitudes regarding foreign credential recognition of health professionals. Survey results also indicate that nearly eight in ten Canadians support recognizing the credentials of foreign-trained health professionals (31 per cent strongly support, and 47 per cent somewhat support), while only 19 per cent oppose this idea. Support for this idea, however, is down three points since February 2008, and opposition is up six points over this same time period.

Support for the recognition of the qualifications of foreign-trained doctors is slightly higher among university graduates (82 per cent, compared to 73 per cent of high school graduates) and those who rate their health more highly (82 per cent of those who rate their health as excellent, compared to 70 per cent of those of those in poor health).

Support for Foreign Credential Recognition

"Are you generally in favour or opposed to recognizing the credentials of foreign-trained health professionals?"





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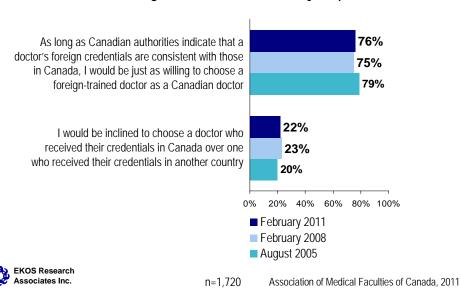
7.7 WILLINGNESS TO CHOOSE FOREIGN-TRAINED HEALTH CARE PROFESSIONALS

Results also suggest that most Canadians would be comfortable with having foreign-trained doctors provide medical services to themselves and their family. Three in four respondents (76 per cent) indicate they would be just as willing to choose a foreign-trained doctor as a Canadian-trained one, as long as Canadian authorities indicate that the doctor's credentials are consistent with those in Canada. Just 22 per cent are more inclined to choose a doctor who received their credentials in Canada. These results have remained unchanged over the last three years.

> Canadians under the age of 25 and university graduates are somewhat more open to seeking treatment from a foreign-trained doctor (84 per cent and 80 per cent, respectively).

Willingness to Choose Foreign-Trained Health Care Professionals

"Which of the following statements is closest to your point of view?"



8. Conclusions

Confidence in Canada's health care system is at a modern high point. Furthermore, there has been a dramatic reversal of the public's pervasive sense that the health care system is deteriorating. Whereas in 1997, those who believed the system had deteriorated outnumbered those who believed it had improved by a margin of nearly ten to one, these numbers virtually stand at parity today. Trust in the medical profession remains extremely high and doctors and nurses are seen as more trustworthy than any of the other occupational groups examined.

Overall, the quality of a patient's experience when seeing either a specialist or a family doctor appears to be very high. Doctors receive slightly lower marks on the amount of time they spend with their patients and on how long it takes to see them, but overall the scores are excellent. There is, however, consistent evidence that doctors fare worse with the least healthy (it is unclear if this is a causal relationship).

Nevertheless, there are appear to be some areas of concern. First of all, there is a near consensus that Canada is facing a shortage of doctors, particularly family doctors (this theme is echoed by the fact hiring more doctors was rated as a top priority). Also, there are several indicators that suggest that there are some inequalities between regions. Atlantic Canada exhibits the highest level of satisfaction with the health care they receive, and Ontario and the Prairies do well. Quebec, by contrast, consistently reveals relative dissatisfaction. Also, respondents who identify themselves as visible minorities, as well as those who are more economically vulnerable, tend to believe they are less well served.

Literacy on Canada's health care system is somewhat spotty, though it varies heavily by topic. For instance, most Canadians recognize that doctors are mostly private business people who are compensated for their services, rather than public servants. By contrast, less than a third of Canadians correctly identified provincial governments as the body responsible for determining the number of new doctors to be trained.

Over the last decade, the focus of public priorities has shifted from equality to quality. In 1995, access was ranked a the top priority by a majority of Canadians. Today, it is health care quality that now ranks as the leading issue. Canadians also feel that it is important that doctors are trained to understand and deal with the cultural needs of patients, though they are more apt to apply this requirement to foreign-trained doctors. There is also a strong sense that patients should have the right to see a doctor of the same gender.

This study also examined the issue of technology and its role in the health care system. Responses reveal that Canadians are highly receptive to the development of electronic health records and the vast majority of Canadians would be comfortable having a medical exam conducted in their own home. The internet has also become a widely used tool in searching for health information and is particularly popular among younger age groups. Canadians are also highly receptive to the idea of receiving a medical exam in their own home.

Lastly, the public believe that Canada's aging population and changing demographics will the most influential factor on Canada's health system in the coming decade. To address these changes, respondents believe that governments should focus their funding strategies on hiring more doctors and building more hospitals.