



9th Annual National Report Card on Health Care

August 2009

Embargoed until 17 August 2009 at 12:01 am EDT

ASSOCIATION
MÉDICALE
CANADIENNE



CANADIAN
MEDICAL
ASSOCIATION



Ipsos Reid Public Affairs



ASSOCIATION
MÉDICALE
CANADIENNE



CANADIAN
MEDICAL
ASSOCIATION

2009 National Report Card Report

Submitted to: Canadian Medical Association
August 2009

Ipsos Reid Public Affairs
One Nicholas Street,
Suite 1400
Ottawa ON K1N 7B7
Tel: 613.241.5802
Fax: 613.241.5460
www.ipsos.ca

TABLE OF CONTENTS

Introduction.....	1
Methodology	2
Executive Summary.....	3
Detailed Findings.....	6
2009 Report Card	6
Impact of the Economic Downturn on the Health of Canadians	18
Health Status of Canadians	22
Social Determinants of Health.....	31



Introduction

This is the ninth annual CMA Report Card on the health care system in Canada. Since 2001, the Canadian Medical Association has asked Ipsos Reid each year to measure public opinion with respect to the health of the Canadian health care system. In particular, Ipsos Reid has asked Canadians to assign a letter grade to the health care system overall, and considering different aspects of the system.

This year, Canadians were also asked a series of questions about their health status, their knowledge and awareness of how to be healthy, as well as questions about their lifestyle habits as they relate to their health. They were also asked an extensive series of demographic questions in order to determine the social determinants of health.

Methodology

This research was conducted by telephone and online. Portions of the study that are tracked with earlier years' research were conducted by telephone. Several new questions were asked as part of an online survey conducted among members of the Ipsos Household Panel.

In the telephone survey, Canadians were asked to rate a range of dimensions of the health care system using a letter grade (i.e., A, B, C or F with A being the highest grade and F being a failing grade). During the online survey, a series of questions were asked related to health status and the social determinants of health.

Telephone Research

Between June 7 and June 9, 2009, Ipsos Reid surveyed 1,002 Canadian adults. This sample provides a ± 3.2 percentage point margin of error for the overall national findings at a 95% confidence interval. The data was weighted by region, age and gender to ensure that the sample accurately reflects the population according to Census data.

The studies conducted in previous years are referenced in this research. The margins of error for each of these studies are set out below.

Year	Sample Size	Margin of Error (%)
2009	N=1,002	± 3.2
2008	N=1,002	± 3.2
2007	N=1,001	± 3.2
2006	N=1,007	± 3.2
2005	N=1,006	± 3.2
2004	N=1,057	± 3.1
2003	N=1,055	± 3.1

Online Research

Between June 25 and July 11th, 2009, Ipsos Reid surveyed 3,223 Canadian adults online. A sample of this size is associated with a ± 1.73 percentage point margin of error. Respondents were randomly selected from the Ipsos Household Panel. The data was weighted by region, age and gender to ensure the sample accurately reflects the population according to Census data.

Executive Summary

Overall Views of Canada's Health Care System

- Two in three Canadians (67%) grade the overall quality of the health care services they receive in the A (26%) or B (41%) range, consistent with the 2008 findings (66%). However, this year's sounding shows a three-point increase in the proportion who offer an A rating (26% compared to 23% in 2008), a ten-point increase since 2006 (16%).
- Similarly, over two in three (68%) Canadians grade their most recent experience with the health care system in their community as either an A (31%) or a B (37%), virtually unchanged since 2008 (68%).
- A majority of Canadians (60%) grade the choice of health services in their community as either an A (22%) or B (38%).
- Nearly three in four (72%) grade cooperation among health professionals in their community, including doctors, pharmacists and nurses, as either an A (28%) or a B (44%). This finding is consistent with the results of the 2008 sounding (73%).
- Fifty-six percent grade health care providers and their associations as either an A (12%) or B (44%) for their performance in dealing with health care in Canada.
- Grades for access to several health services have remained largely stable since 2008.
 - The proportion who grade *access to a family doctor* as an A remains significantly lower than when first measured in 2003 (29% in 2009 vs. 35% in 2003).
 - A grades for *access to health care services for children* hold steady (24% compared to 23% in 2008 and 22% in 2007).
 - A slight improvement was measured across all other categories in terms of the proportion providing A grades for access to:
 - emergency room services (24%, up from 20% in 2008);
 - access to health care services for seniors (21%, up from 19% in 2008);
 - access to health care services on evenings and weekends (16%, up from 13% in 2008);
 - access to modern diagnostic equipment such as MRIs and CT scans (18%, up from 14% in 2008);
 - access to walk in clinics (30%, up from 25% in 2008);
 - access to medical specialists (15%, up from 13% in 2008);
 - access to home health care service (15%, up from 13% in 2008); and,
 - access to mental health care services (13%, up from 11% in 2008 and 9% in 2007).
- With respect to health care quality, service, and access, those with a family physician remain more positive, as compared to those without a family physician. For example, 27 percent of those with a family physician grade the overall quality of available health care services as an A, compared to only 15 percent among those without a family physician.

Rating the Performance of Government

- Thirty-nine percent of Canadians grade the federal government's performance in dealing with health care as either an A (8%) or a B (31%), showing a slight improvement from 34 percent in 2008.
- Two in five Canadians (43%) grade their provincial government's performance in dealing with health care as an A (9%) or a B (34%) indicating a slight improvement over 2008 (40%) and a return to the level measured in 2006 (43%).
- In all regions, with the exception of Alberta and Saskatchewan/Manitoba, provincial governments receive more A or B grades than the federal government in dealing with health care. This is most notable in Quebec, where 38 percent give the provincial government A or B grades compared to 30 percent giving the federal government such ratings.

Perspectives on the Future of Health Care and Specific Health Concerns

- The public remains divided as to whether health care services will get better or worse over the next two or three years with 51 percent saying health care services will get better and 46 percent saying they will get worse.
- When asked to name their most pressing personal health issues, system related issues like access to a doctor (7%), waiting times (4%), and cost (1%) top the list at a total of twelve percent overall. Concerns about the health care system are followed by obesity (6%), Diabetes (5%), and a range of other specific medical conditions.
- Among those who have required the following health care services over the past year, many say they have had to wait longer than they thought was reasonable:
 - A specialist (55%);
 - Advanced diagnostic procedures such as magnetic resonance imaging (MRI) or a CT Scan (46%);
 - A family physician (39%);
 - Elective surgery, that is, procedures that do not need to be performed immediately, such as a hip replacement (36%); and,
 - Treatment such as chemotherapy or radiation therapy (22%).

Social Determinants of Health

- When asked to rate a number of factors in terms the impact each has on a person's health, tobacco use, stress, and diet and nutrition are considered to have the greatest impact relative to the rest (with 60%, 51%, and 49%, indicating 9 or 10 out of 10, respectively). Two in five (42%) feel that access to health care has a great impact.
- The findings indicate that education and income are key social determinants of healthy living habits in that those with lower levels of education and income are less likely than their respective counterparts to partake in a number of healthy living activities on a daily or more frequent basis, such as eating the recommended number of fruits and vegetables and engaging in outdoor activity.
- Moreover, the findings show that perceived health status differs based on a number of social determinants (a combination of behavioural and demographic characteristics), to varying degrees. The largest differences can be seen with respect to eating habits, education, and physical activity whereby those who consider themselves to have healthy eating habits, those with higher levels of education and those who consider themselves to be active are more likely than their respective counterparts to describe their health status as excellent or very good.

Detailed Findings

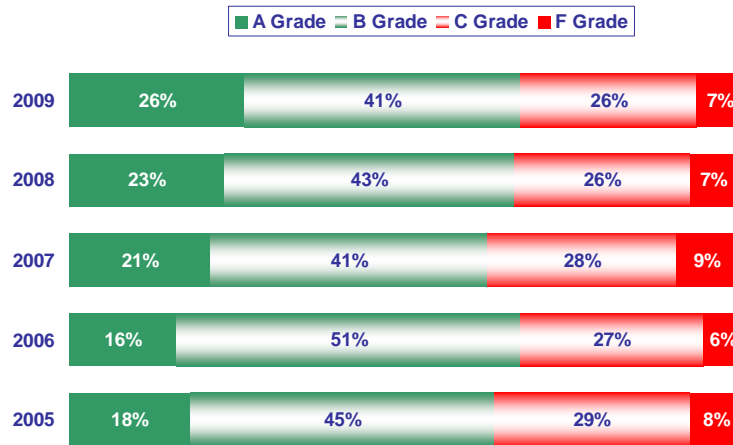
2009 Report Card

Over One in Five Give “Overall Quality” an “A” Grade

Canadians were asked to grade the overall quality of health care services as an A, B, C or F, where an A is the highest grade and an F is a failing grade. Two in three (67%) grade overall quality in the A (26%) or B (41%) range, consistent with 2008 (66%) and a return to the level measured in 2006 (67%). Moreover, this year’s result marks a continuation in an increasing trend in the proportion who offer A grades that began in 2006 (a ten percentage point increase in the last three years).

Over One in Five Give “Overall Quality” an “A” Grade

What mark/letter grade would you give to:
The overall quality of the health care services available to you and your family.



Base: Telephone respondents n=1,002

Those most likely to grade the overall quality of health care services as an A include:

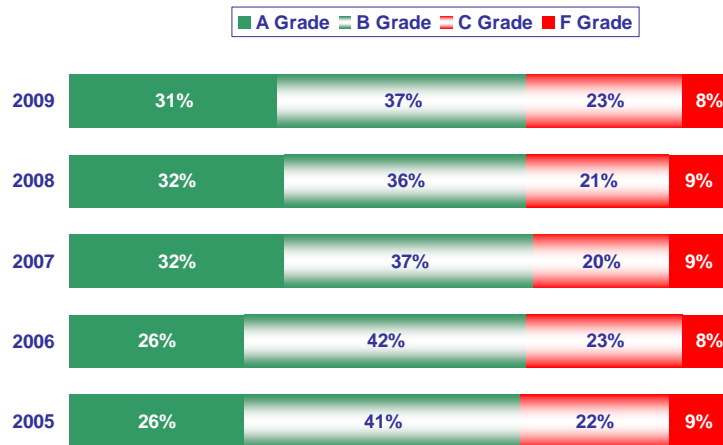
- Residents of Ontario (34%) Alberta (24%) and British Columbia (23%) compared to residents of Saskatchewan/Manitoba (9%);
- Canadians 55 years of age and older (29%) compared to those 35 to 54 years of age (20%); and,
- Those who reside in urban areas (27%) compared to those in rural communities (19%).

One in Three Give Their Most Recent Experience an “A” Grade

Canadians were also asked to grade their most recent experience dealing with the health care system in their community. Over two in three (68%) Canadians grade their most recent experience with the health care system in their community as either an A (31%) or a B (37%), which is virtually unchanged since 2008 (68%).

One in Three Give Their Most Recent Experience an “A” Grade

What mark/letter grade would you give to:
Your most recent experience dealing with the health care system in your community.



Base: Telephone respondents n=1,002

Those more likely to grade their most recent experience dealing with the health care system as an A include:

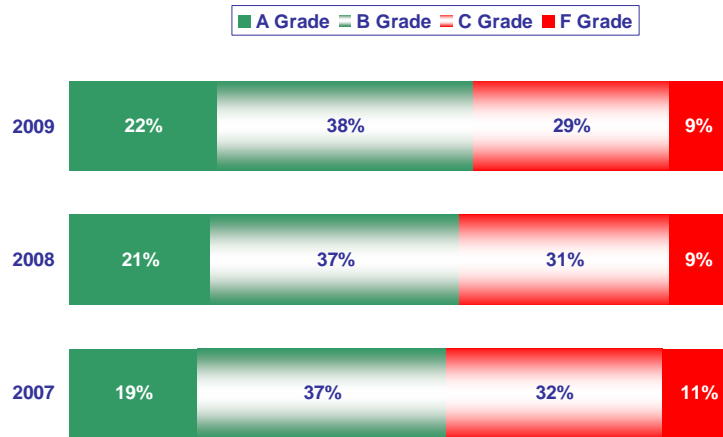
- Residents of Ontario (38%), Alberta (36%), Atlantic Canada (27%) and British Columbia (31%) compared to those in Saskatchewan/Manitoba (11%); and,
- Those 55 years and older (38%) compared to those 35 to 54 years (25%).

One in Five Give “A” Grade to Choice of Health Services in Community

A majority of Canadians (60%) grade the choice of health services in their community as either an A (22%) or B (38%). This marks a three-point increase in the proportion grading the choice of health services as an A since the question was first asked in 2007.

One in Five Give an “A” Grade to Choice of Health Services in Community

What mark/letter grade would you give to:
The choice of health services in your community.



Base: Telephone respondents n=1,002

Those more likely to grade the choice of health services in their community as an A include:

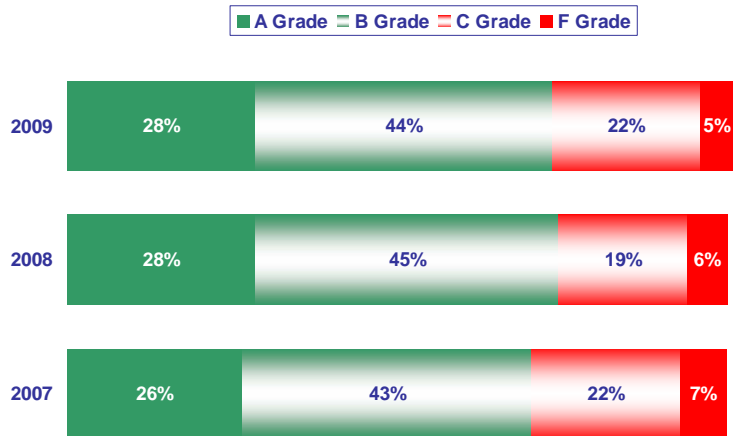
- Residents of Ontario (29%) compared to residents of Quebec (17%), Atlantic Canada (16%), and Saskatchewan/Manitoba (9%); and,
- Urban respondents (24%) compared to those in rural areas (15%).

Over One in Four Give Cooperation Among Health Professionals an “A” Grade

Nearly three in four (72%) grade cooperation among health professionals in their community, including doctors, pharmacists and nurses, as either an A (28%) or a B (44%). This is consistent with 2008 (73%), and represents a three-point improvement over 2007 (69%).

Over One in Four Give Cooperation Among Health Professionals an “A” Grade

What mark/letter grade would you give to:
The level of cooperation between various health professionals like doctors, pharmacists and nurses in your community.



Base: Telephone respondents n=1,002

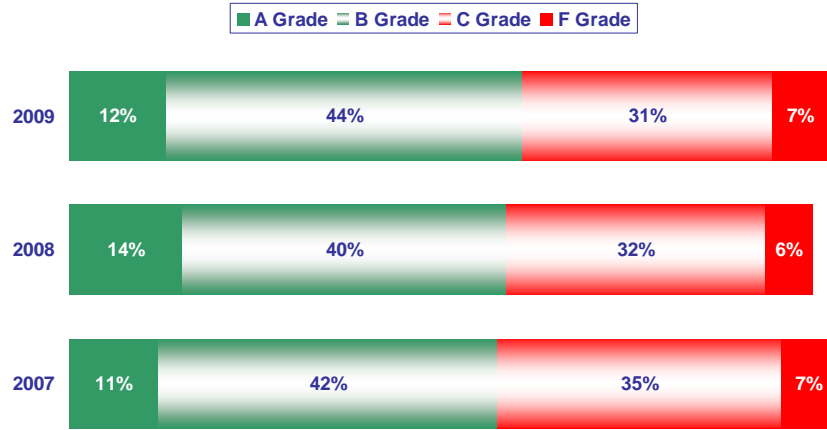
Residents of Ontario (35%) are more likely to grade cooperation among health care professionals as an A compared to residents of Quebec (21%) and Saskatchewan/Manitoba (15%).

Just Over Half Give Health Care Providers and Their Associations “A” or “B” Grades

Fifty-six percent of respondents grade health care providers and their associations as either an A (12%) or B (44%) for their performance in dealing with health care in Canada. This marks a return to the proportion assigning an A grade when the question was first asked in 2007 (12% compared to 11%), slightly down from 2008 (14%).

Just Over Half Give Health Care Providers and Their Associations “A” or “B” Grades

What mark/letter grade would you give to:
The performance of health care providers and their associations in dealing with health care in Canada.



Base: Telephone respondents n=1,002

Residents of British Columbia (16%) and Ontario (14%) are more likely to give health care providers and their associations an A grade as compared to those in Quebec (6%).

Grading Access to Health Care Services

Canadians were asked to grade access to ten health care services using the letter grade rating system, where an A is the highest grade and an F is a failing grade.

Six out of the ten services tested received an A grade more often than an F grade while the remaining four services received an F grade more often.

The services where the A grades outweigh the F grades include:

- Access to walk-in clinics (30% A grades vs. 14% F grades);
- Access to a family doctor (29% A grades vs. 18% F grades);
- Access to health care services for children (24% A grades vs. 6% F grades);
- Access to emergency room services (24% A grades vs. 18% F grades);
- Access to health care services for seniors (21% A grades vs. 8% F grades);
- Access to home health care service (15% A grades vs. 11% F grades);

The services where the F grades outweigh the A grades include:

- Access to modern diagnostic equipment (19% F grades vs. 18% A grades);
- Access to health care services on evenings and weekends (19% F grades vs. 16% A grades);
- Access to medical specialists (17% F grades vs. 15% A grades);

Canadians were just as likely to grade access to mental health care services as an A (13%) as they were to grade these services as an F (13%).

	A Grade	B Grade	C Grade	F Grade
Access to walk in clinics in your community	30%	32%	21%	14%
Access to a family doctor in your community	29%	28%	24%	18%
Access to health care services for children in your community	24%	39%	23%	6%
Access to emergency room services	24%	30%	27%	18%
Access to health care services for seniors in your community	21%	39%	25%	8%
Access to modern diagnostic equipment such as MRIs and CT scans	18%	32%	30%	19%
Access to health care services on evenings and weekends in your community	16%	30%	33%	19%
Access to medical specialists	15%	33%	32%	17%
Access to home health care service	15%	32%	29%	11%
Access to mental health care services in your community	13%	33%	27%	13%

Slight Improvement in A Grades for Access to Services

A grades for access to almost all health services tested show at least a slight improvement over 2008. The most significant improvement can be seen in access to walk-in clinics in communities (30%, up from 25% in 2008). We see similar increases when we look at access to emergency services (24%, up from 20% in 2008), and access to diagnostic equipment such as MRIs and CT scans (18%, up from 14% in 2008).

Slight improvements can be seen when we look at access to health care services for seniors (21%, up from 19% in 2008), access to health care services on evenings or weekends (16%, up from 13% in 2008), access to medical specialists (15%, up from 13% in 2008), access to home health care (15%, up from 13% in 2008), and access to mental health care (13%, up from 11% in 2008).

The proportion who grade access to a family doctor as an A remains significantly lower than when first measured in 2003 (29% vs. 35% in 2003).

	2009	2008	2007	2006	2005	2005 vs. 2009*
Access to walk in clinics in your community	30%	25%	26%	29%	26%	+4
Access to a family doctor in your community	29%	29%	29%	30%	32%	-3
Access to health care services for children in your community	24%	23%	22%	-	-	+2
Access to emergency room services	24%	20%	18%	20%	19%	+5
Access to health care services for seniors in your community	21%	19%	17%	-	-	+4
Access to modern diagnostic equipment such as MRIs and CT scans	18%	14%	13%	14%	11%	+7
Access to health care services on evenings and weekends in your community	16%	13%	11%	15%	12%	+4
Access to medical specialists	15%	13%	14%	13%	13%	+2
Access to home health care service	15%	13%	13%	-	-	+2
Access to mental health care services in your community	13%	11%	9%	-	-	+4

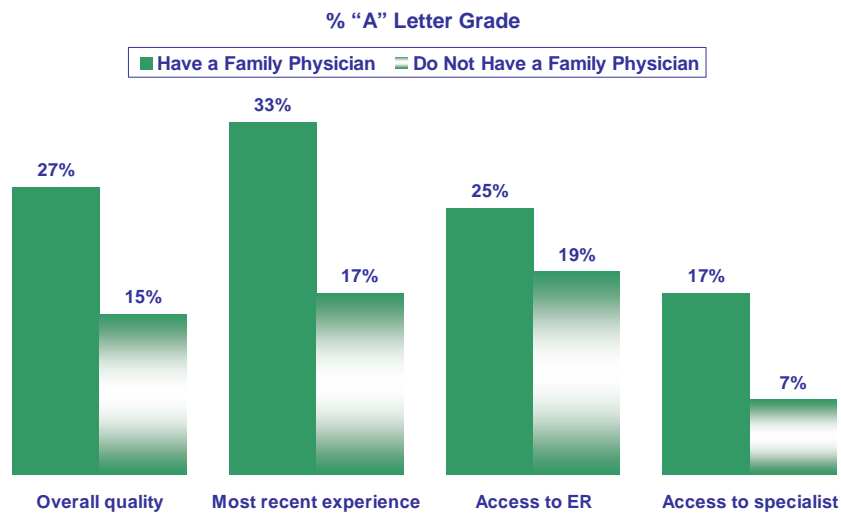
* The difference between 2009 results and 2005 or the first time this question was asked.

Canadians With a Family Physician are More Positive About Health Care Quality, Service, and Access

With respect to health care quality, service, and access, those with a family physician remain more positive, as compared to those without a family physician. For example, 27 percent of those with a family physician grade the overall quality of available health care services A grade, as compared to 15 percent of those without a family physician, and 33 percent of those who rate their most recent experience as an A, compared to 17 percent among those who do not have a family doctor.

Canadians With a Family Physician are More Positive About Health Care Quality, Service, and Access

What mark/letter grade would you give to...



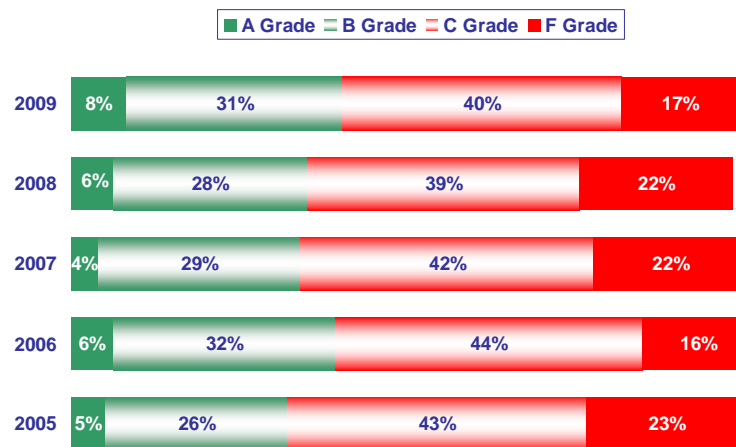
Base: Those with a family physician (n=858); No family physician (n=143)

Federal Performance on Health Care up Slightly With About Two in Five Giving “A” or “B” Grades

Canadians were asked to grade the performance of the federal government in dealing with health care in Canada. Thirty-nine percent grade the federal government’s performance as either an A (8%) or B (31%), an increase from 2008 (34%, including 6% who gave an A, and 28% who said B).

Federal Performance on Health Care up Slightly With About Two in Five Giving “A” or “B” Grades

What mark/letter grade would you give to:
The federal government’s performance in dealing with health care in Canada.



Base: Telephone respondents n=1,002

Those more likely to grade the federal government’s performance on health care as an A or a B include:

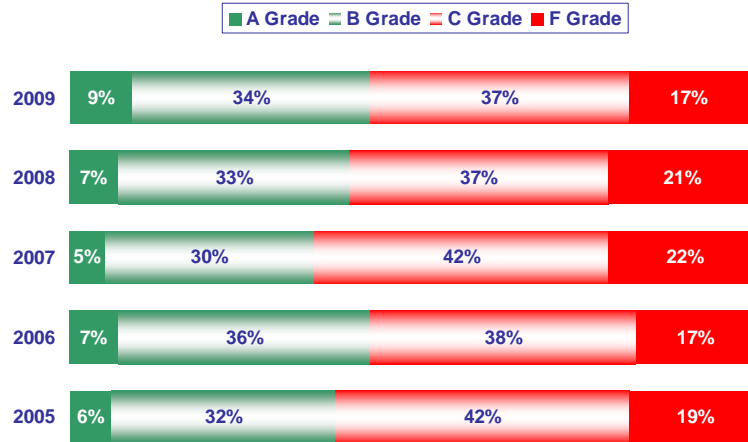
- Residents of Ontario (46%) and Alberta (46%) compared to those in Quebec (30%);
- Respondents 18 to 34 years (52%) and 55 years of age and older (40%) compared to those 35 to 54 years (28%); and,
- Men (54%) compared to women (34%).

About Two in Five Give Provincial Performance on Health Care “A” or “B” Grades

About two in five Canadians (43%) grade their provincial government’s performance in dealing with health care as an A (9%) or a B (34%). This marks a slight improvement over 2008, when 40 percent graded their provincial government’s performance as an A or a B.

About Two in Five Give Provincial Performance on Health Care “A” or “B” Grades

What mark/letter grade would you give to:
Your provincial government’s performance in dealing with health care in your province.



Base: Telephone respondents n=1,002

Those more likely to grade their provincial government’s performance in dealing with health care as an A or B include:

- Respondents 18 to 34 years (53%) and 55 years of age and older (43%) compared to those 35 to 54 years (35%);
- Those with lower household incomes (peaking at 53% among those who earn less than \$30,000 annually);
- Residents of Ontario (49%) compared to those in Quebec (38%); and,
- Men (47%) compared to women (40%).

Provincial Governments Receive More “A” or “B” Grades than Federal Government in all Regions – Except Alberta and Saskatchewan/Manitoba

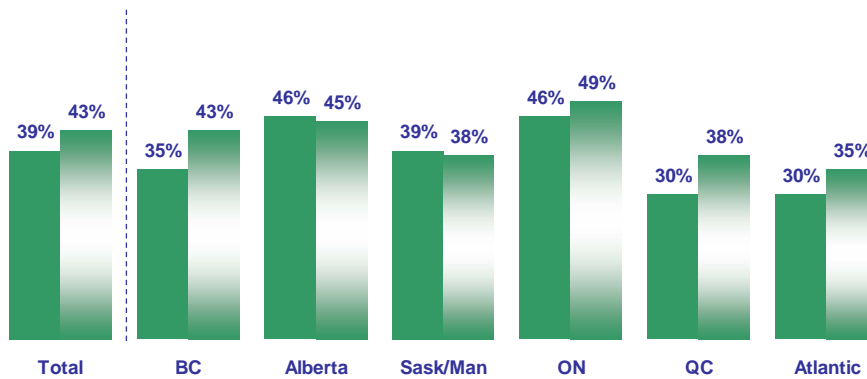
In all regions, with the exception of Alberta and Saskatchewan/Manitoba, provincial governments received more A or B grades in dealing with health care than the federal government. Most notable is Quebec, where 38 percent give the provincial government A or B grades compared to 30 percent giving the federal government A or B grades. Alberta and Saskatchewan/Manitoba were the only regions where perceptions of federal performance slightly outpace perceptions of provincial government performance (with 46% in Alberta grading the federal government as an A or B compared to 45% for the provincial government, and 39% in Saskatchewan/Manitoba rating the federal government as an A or B compared to 45% for the provincial government).

Provincial Governments Receive More “A” or “B” Grades Than Federal Government Everywhere – Except Alberta and Saskatchewan/Manitoba

What mark/letter grade would you give to:
The _____ government's performance in dealing with health care in Canada.

% “A” or “B” Grade

■ Federal Government ■ Provincial Government



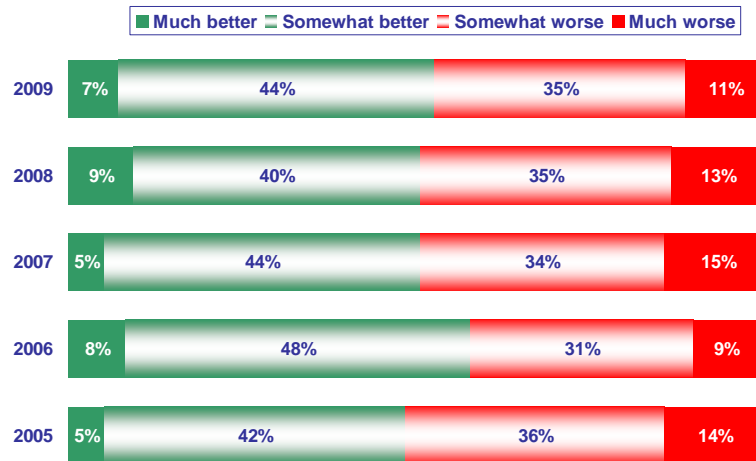
Base: Telephone respondents n=1,002

Views Remain Divided on Whether Health Care Will Improve

The public remains largely divided as to whether health care services will get better or worse over the next two or three years, with 51 percent saying health care services will get better and 46 percent saying they will get worse. This year we see a slight increase in the proportion saying health care services will get better (51% vs. 49% in 2008), with a corresponding decrease in the proportion saying it will get worse (46% vs. 48% in 2008).

Views Remain Divided on Whether Health Care Will Improve

Overall, do you think health care services in your community will get much better, somewhat better, somewhat worse or much worse over the next two or three years?



Base: Telephone respondents n=1,002

Those more likely to think that health care services in their community will get much or somewhat better over the next two or three years include:

- Residents of Ontario (59%) and the Atlantic Provinces (57%) compared to residents of British Columbia (40%) and Alberta (41%);
- Those 18 to 34 years of age (63%) compared to those 35 to 54 years (44%) and those 55 years and older (52%);
- Those with lower levels of educational attainment (peaking at 60%) among those with less than a high school education; and,
- Men (55%) compared to women (48%).

Impact of the Economic Downturn on the Health of Canadians

A Quarter of Canadians Say that the Economic Downturn Has Impacted How They Take Care of Their Health

One in four Canadians (23%) agree that they have spent less time, energy and money maintaining their health as a result of the recent economic downturn.

As household income *decreases*, agreement that less time, energy and money has been spent on health *increases*. Among those who earn \$90,000 or more annually¹, 16 percent say they have spent less time, energy and money maintaining their health. The proportion who agrees is about double (31%) among those in the lowest income bracket (less than \$30,000 a year).

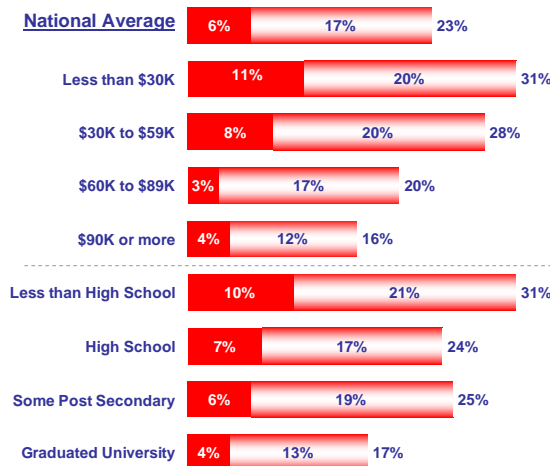
The results are similar looking at the level of education. Those with less than a high school education (31%) are nearly twice as likely to agree with the statement compared to those who have graduated university (17%).

A Quarter of Canadians Say That the Economic Downturn Has Impacted How They Take Care of Their Health

On a scale of 0 to 10, where 0 means not at all and 10 means completely, please rate your agreement with the following statement:

As a result of the recent economic downturn I have spent less time, energy and money maintaining my health.

■ Agree strongly (9,10) ■ Agree somewhat (6,7,8)



Base: Online respondents n=3,223

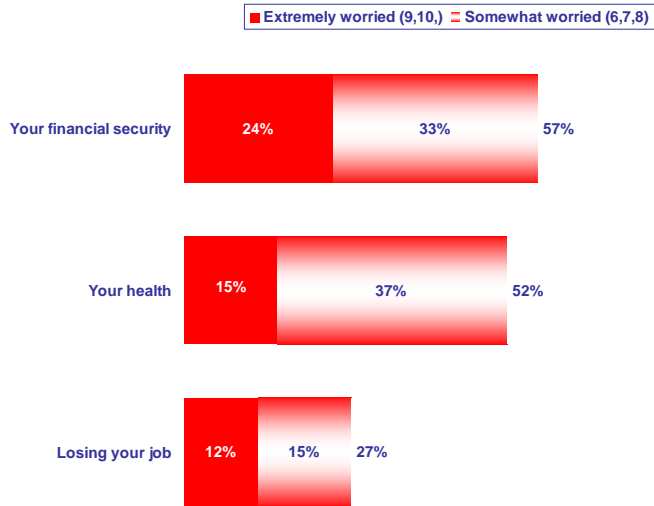
¹ For the purpose of this report, those who *earn* a certain amount each year (e.g., \$90,000 or more) actually refers to those with annual household incomes of this amount.

Half of Canadians are Worried About Their Health – Only Slightly Fewer than the Proportion Worried About Their Financial Security

Half of Canadians (52%) are either very (15%) or somewhat worried (37%) about their health, fewer than the proportion that is worried about their financial security (57% including 24% extremely worried and 33% somewhat). More than one in four (27%) are very (12%) or somewhat worried (15%) about losing their job.

Half of Canadians are Worried About Their Health - Only Slightly Fewer Than the Proportion Worried About Their Financial Security

On a scale of 0 to 10 where 0 means not at all worried and 10 means extremely worried, how worried are you about the following?



Base: Online respondents n=3,223

The Economic downturn is Hurting the Health of Canadians with Lower Income and Lower Education the Most

Canadians were asked whether financial concerns stemming from the economic downturn have led them to take any of several actions adverse to their health. The results show that those with lower levels of income and education are much more likely to say they have taken each of the tested actions adverse to their health.

Nationally, two in five Canadians (40%) say that they feel stressed and/or overwhelmed as a result of financial concerns. This number rises to half (51%) among those who earn less than \$30,000 annually, while it decreases among those who earn more than \$90,000 (32%). Likewise, just about half (48%) of those with less than high school are feeling stressed and/or overwhelmed as a result of financial concerns, while just one in three (33%) university graduates feel this is the case.

Lower income Canadians are much more likely to say they are spending less money on food as a result of the downturn. While one in three nationally (32%) say they have spent less money on food, more than two in five (44%) among those in the lowest income bracket say this. The proportion is one in four (23%) among those who earn \$90,000 or more. Those with lower education (39%) are also much more likely than university graduates (26%) to have spent less money on food.

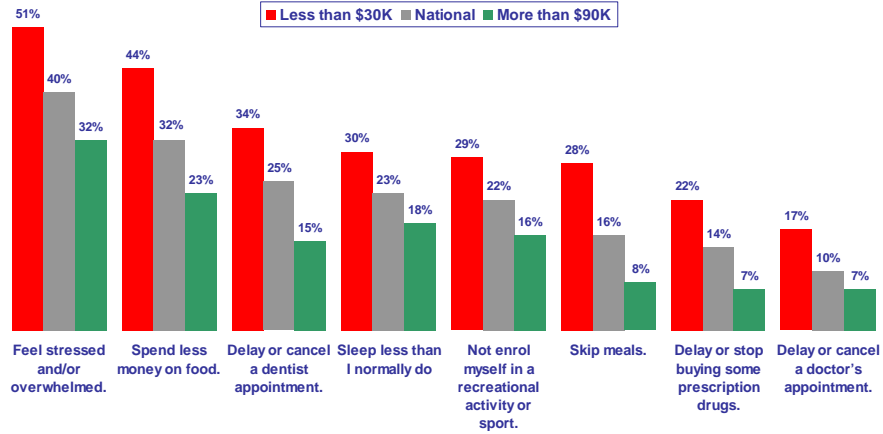
Nationally, nearly one in five Canadians (16%) have skipped meals as a result of financial concerns. This proportion nearly doubles among the lowest income bracket (28%). Meanwhile less than one in ten (8%) earning \$90,000 or more have skipped meals for this reason. By education, those with less than high school (26%) are almost three times more likely than university graduates (10%) to say they have skipped a meal as a result of financial concerns.

Canadians are also losing sleep as a result of the economic downturn, particularly if they have lower levels of education. Nationally, one in four (23%) say they are sleeping less than they normally do. Among those with less than high school the proportion rises to 33 percent, but is lower among those with a university degree (16%).

Nationally, one in four Canadians (25%) have delayed or cancelled a dentist appointment as a result of financial concerns, while one in three who earn less than \$30,000 (34%) say this. Fifteen percent of those who earn more than \$90,000 have delayed or cancelled a dentist appointment.

The Economic Downturn is Hurting the Health of Canadians With Lower Income Affected the Most (% Yes)

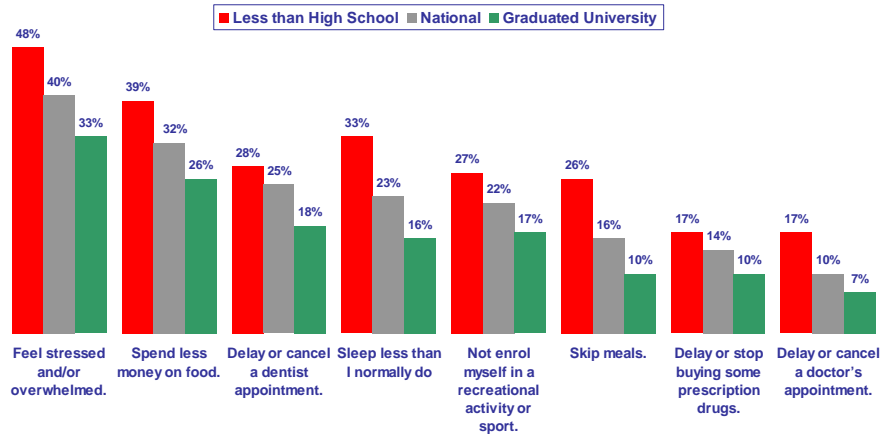
Thinking about the recent economic downturn, have financial concerns led you to do any of the following?



Base: Online respondents n=3,223

Economic Downturn is Also Having a Negative Impact on Canadians With Lower Levels of Education (% Yes)

Thinking about the recent economic downturn, have financial concerns led you to do any of the following?



Base: Online respondents n=3,223

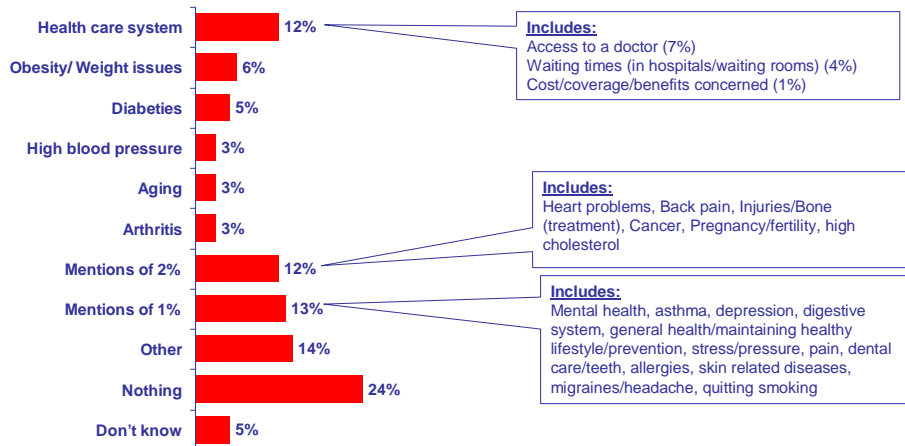
Health Status of Canadians

Issues Relating to the Health Care System Rated as Top Personal Health Issue

When asked to name their most pressing personal health issue, Canadians most often mention factors related to the health care system (12%). This includes those who mention access to a doctor (7%), wait times (4%), and cost/coverage/benefit concerns (1%). Six percent say obesity/weight issues are their top concern, while five percent say diabetes. Three percent say high blood pressure (3%), aging (3%), and arthritis (3%). Other mentions were provided by two percent or fewer. One in four (24%) say 'nothing'.

Issues Relating to the Health Care System Rated as Top Personal Health Issue

With regard to your own health, what is your most pressing personal health issue?



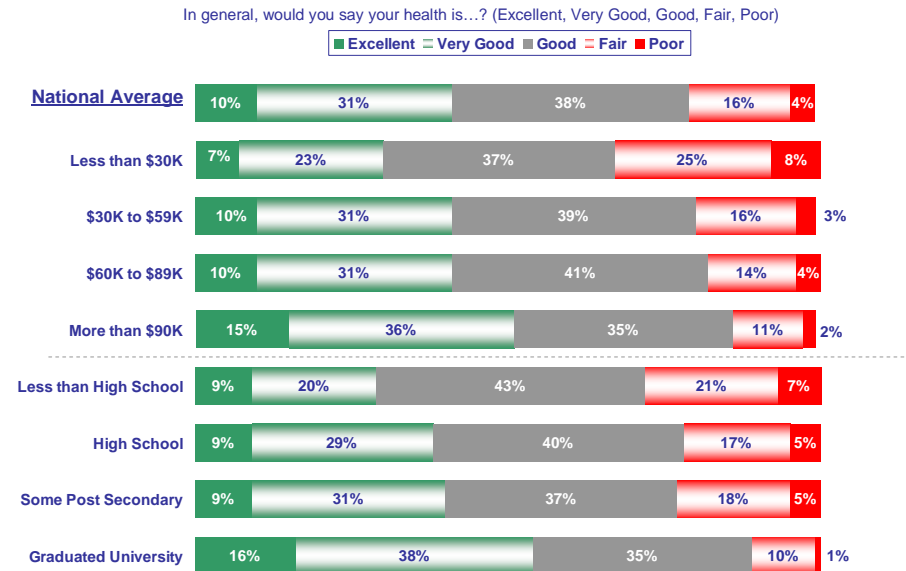
Base: Online respondents n=3,223

One in Ten Say They are in Excellent Health; Those With Lower Incomes and Levels of Education are More Likely to say They are in Fair or Poor Health

Canadians were asked to rate their health as either excellent, very good, good, fair, or poor. On this basis, 41 percent of Canadians rate their health as either excellent (10%) or very good (31%). An additional two in five say their health is good (38%), while one in five say their health is good (38%), while one in five (20%) rate their health as either fair (16%) or poor (4%).

Income and education significantly impact Canadians' assessment of their health. Canadians earning less than \$30,000 annually (33%) and those with less than a high school education (28%) are significantly more likely than those earning \$90,000 or more (13%) and those with a university degree or higher (11%) to describe their health as fair or poor.

One in Ten Say They are in Excellent Health; Those With Lower Incomes and Levels of Education are More Likely to Say They are in Fair or Poor Health



Base: Online respondents n=3,223

A Profile of Canadians With Lower Levels of Income and Education

The following chart shows how Canadians with lower and higher levels of income and education compare on several key measures. The results find little difference in the proportions of respondents who have accessed the health care system in the past month. On other measures, lower income Canadians (less than \$30,000) and those with lower levels of education (less than high school) are significantly less likely than those with higher incomes (\$90,000 or more) and higher levels of education (university degree or higher) to say they are in excellent or good health or to say that they are trying hard to be healthy and have a healthy lifestyle.

On other measures, lower income earners are less likely than higher income earners to say they have been diagnosed with a chronic medical condition (43% compared to 33%), and to say that their kids are either very or somewhat overweight (31% compared to 24%).

Those with lower levels of education are more likely than those with higher levels of education to say that they, personally, are either very or somewhat overweight (60% compared to 52%). Meanwhile, those with lower levels of education are much less likely than those with higher levels of education to say that their parents did a good job teaching them about healthy lifestyle (43% compared to 63%).

The percent of Canadians who...	Income		Education	
	Less than \$30K	\$90K or more	Less than high school	University
Say they accessed the health care system within the last month	51%	52%	51%	53%
Say they are in excellent/good health	30%	51%	29%	54%
Agree (9,10) they are trying hard these days to be healthy and to have a healthy lifestyle	30%	36%	29%	39%
Say they have been diagnosed with a chronic medical condition	43%	33%	29%	29%
Say that their kids are somewhat/very overweight	31%	24%	33%	34%
Say that they are somewhat/very overweight	56%	56%	60%	52%
Agree (6,7,8,9,10) that their parents did a good job of teaching them about healthy lifestyle including the impacts of nutrition and physical activity.	49%	52%	43%	63%

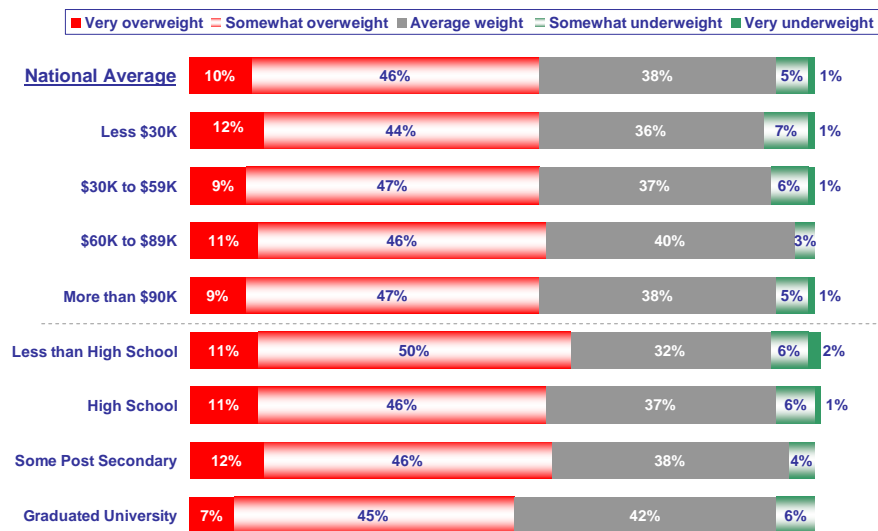
Over Half Say They are Overweight; Income and Education Have Little Impact

Over half of Canadians (56%) say they are either very (10%) or somewhat (46%) overweight. About two in five (38%) say they are of average weight, while six percent describe themselves as somewhat (5%) or very underweight (1%).

There are few differences in how Canadians perceive their weight by income level. By education, those with less than a high school education (61%) are more likely than those with a university degree or higher (52%) to say they are very or somewhat overweight.

Over Half Say They are Overweight; Income and Education Have Little Impact

Would you say that you are...? Very overweight, Somewhat overweight, Average weight, Somewhat underweight, Very underweight.



Base: Online respondents n=3,223

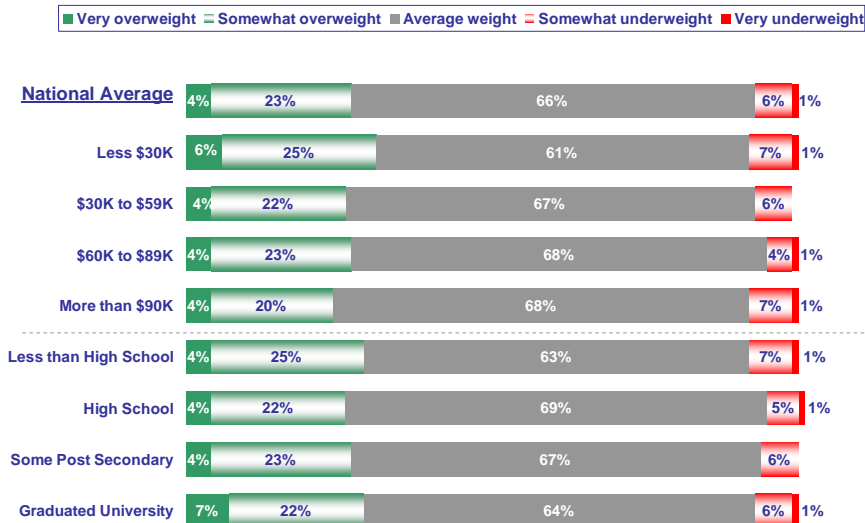
Lower Income and Less Educated Canadian Parents Slightly More Likely to Say Their Kids are Overweight

When asked to describe their children's weight just over one in four Canadian parents (27%) say their children are either very (4%) or somewhat overweight (23%). Two in three (66%) say their children are of average weight for their height and age, while just six percent describe their children as somewhat underweight. (fewer than one percent describe their children as very underweight.)

Those earning less than \$30,000 (31%) are somewhat more likely than those earning \$90,000 or more (24%) to say their children are very or somewhat overweight. There are no significant differences based on level of education.

Lower Income Parents Slightly More Likely to Say Their Kids are Overweight

On average, would say that your child or children are very overweight, somewhat overweight, average weight for their height and age, somewhat underweight or very underweight?



Base: Respondents with children n=2,175

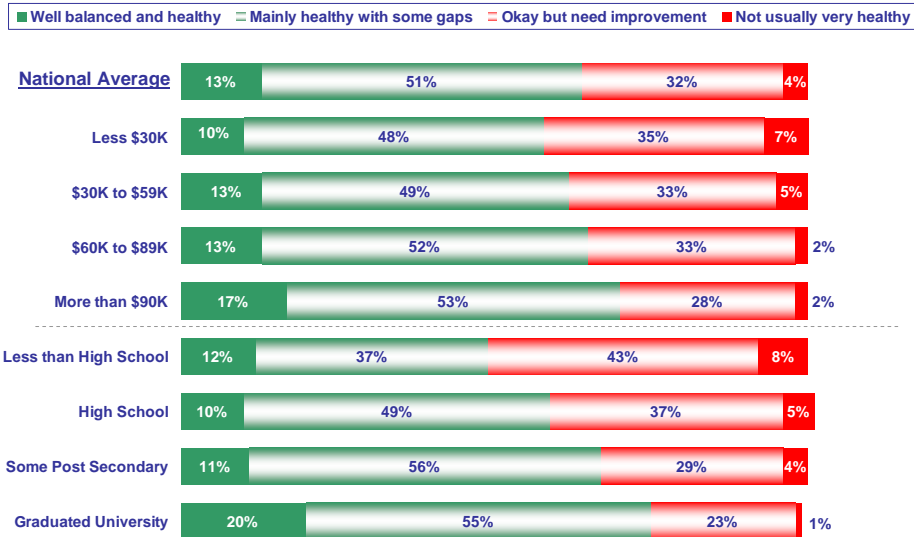
Canadians With Lower Incomes and Education Levels are More Likely to Say Their Eating Habits Need Improvement

When asked to describe their eating habits, nearly two in three Canadians (64%) say their usual eating habits are either well balanced and healthy (13%) or mainly healthy – with some gaps (51%). Over a third (36%) say their eating habits are okay, but in need of improvement (32%) or not usually very healthy (4%).

The proportions who describe their eating habits as just okay or not very healthy are higher among Canadians earning less than \$30,000 a year (42%) and those with less than a high school education (51%) as compared to those earning \$90,000 or more (30%) or with a university education (24%).

Canadians With Lower Incomes and Education Levels are More Likely to Say Their Eating Habits Need Improvement

Which of the following best describes your usual eating habits?



Base: Online respondents n=3,223

Knowledge Levels are High but There are Barriers to Eating Healthy

At least eight in ten Canadians agree with several statements about the benefits of healthy eating: that it can reduce health problems associated with aging (93%), that it can add years to life (92%), that it helps to prevent disease (90%), that it makes it easy to avoid gaining weight (84%), and that it helps one deal with everyday stress (83%). Furthermore, over four in five (84%) say they know how to shop for healthy foods.

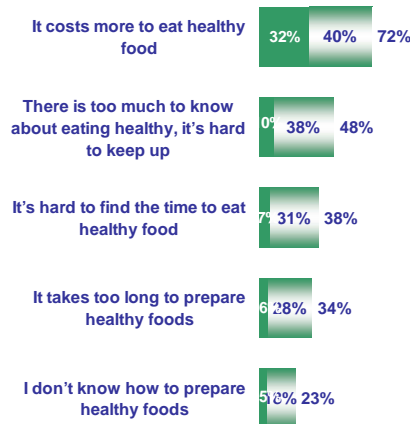
Despite high awareness of the benefits of healthy eating, Canadians also recognize barriers to doing so. Three in four (72%) say it costs more to eat healthy food. About half (48%) say there is too much to know about healthy eating. Two in five (38%) say it's hard to find time to eat healthy food, while one in three (34%) say healthy food takes too long to prepare. One in four (23%) say they don't know how to prepare healthy food.

Knowledge Levels are High but There are Barriers to Eating Healthy

Please read the following statements about physical activity and indicate whether you, personally, agree or disagree with what each statement is saying

■ Agree strongly ■ Agree somewhat

% Agree Somewhat/Strongly	
Healthy eating can greatly reduce the health problems associated with aging	93%
Healthy eating can add many years to your life	92%
Healthy eating prevents disease, such as cancer and heart disease	90%
Healthy eating makes it easy to avoid gaining weight	84%
I know how to shop for healthy foods	84%
Healthy eating helps you deal with the stress of everyday life	83%



Base: Online respondents n=3,223

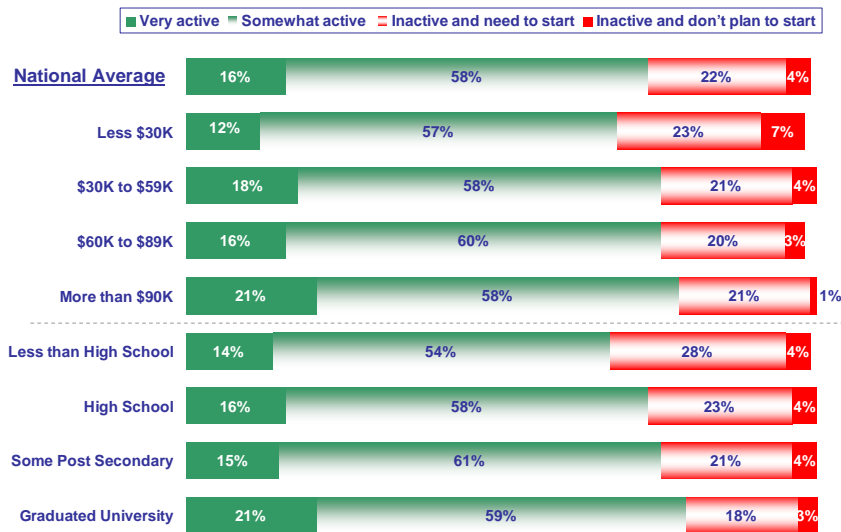
Canadians With Higher Incomes and Education are More Physically Active

When asked to describe their level of physical activity, seven in ten Canadians (74%) say they are either very (16%) or somewhat active (58%), while one in four (26%) say they are inactive, and need to become more active (22%), or are inactive, and don't plan to change (4%).

Canadians earning less than \$30,000 a year (69%) and those with less than a high school education (68%) are less likely than those earning \$90,000 or more (79%) and those with a university education or higher (80%) to describe themselves as either very or somewhat active.

Canadians With Higher Incomes and Education are More Physically Active

Thinking about your usual level of physical activity, how would you describe your current level of physical activity?



Base: Online respondents n=3,223

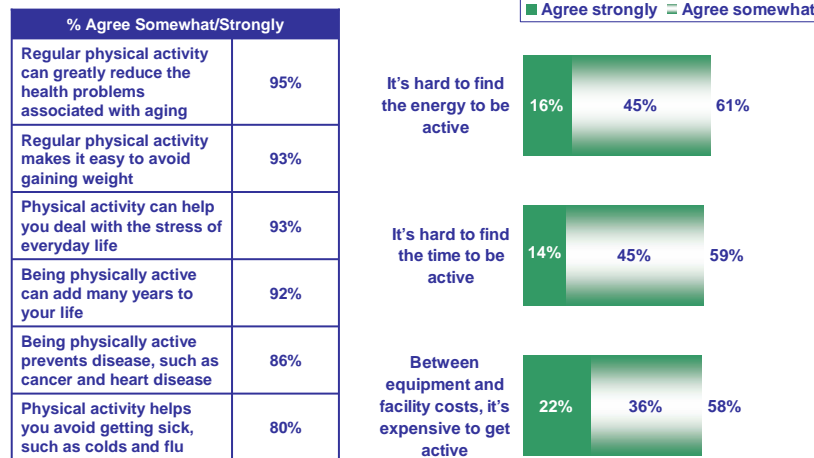
Knowledge Levels are High but, More Than Half Lack the Time, Energy and Money to be Physically Active

As with healthy eating, substantial majorities agree with statements about the benefits of regular physical activity: that it can reduce health problems associated with aging (95%), that it makes it easy to avoid gaining weight (93%), that it helps one deal with everyday stress (93%), that it can add years to life (92%), that it helps to prevent serious disease (86%), and that it helps one avoid getting sick with common ailments (80%).

Despite their recognition of the benefits of regular physical activity, Canadians identify barriers to doing so. Three in five agree that it's hard to find the energy (61%) or time (59%) to be active, while a similar proportion says it's expensive to become active, given costs for equipment and facilities (58%).

Knowledge Levels are High But, More Than Half Lack The Time, Energy and Money to be Physically Active

Please read the following statements about physical activity and indicate whether you, personally, agree or disagree with what each statement is saying



Base: Online respondents n=3,223

Social Determinants of Health

Tobacco use, Stress and Diet and Nutrition Seen as Top Three in Terms of Impact on a Person's Health

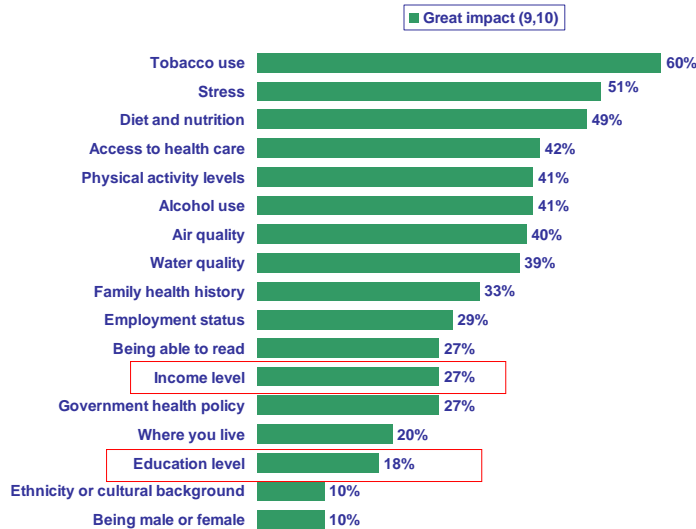
Canadians were asked to rate what impact they believe several factors have on a person's health on a scale of 0 to 10, where 0 means none at all and 10 means it has a great impact. On this basis, tobacco use (60%), stress (51%) and diet and nutrition (49%) are ranked highest in terms of having a great impact on health.

Access to health care (42%), physical activity levels (41%), alcohol use (41%), and air (40%) and water quality (39%) occupy a middle tier in terms of how Canadians view the impact of these factors on health.

Social and economic factors such as employment status (29%), income level (27%) and education (18%) are less likely to have a great impact on health. However those with household incomes of less than \$30,000 are significantly more likely to rate income as having a great impact on health (36%) than are those with incomes of \$90,000 or greater (22%).

Tobacco Use, Stress and Diet and Nutrition Seen as Top Three in Terms of Impact on a Person's Health

Using a scale of 0 to 10 where 0 means none at all and 10 means the greatest impact, please rate the extent to which each of the following has an impact on a person's health.



Base: Online respondents n=3,223

Education and Income are Key Social Determinants of Healthy Living Habits

Across a range of activities that contribute to good health, including healthy eating and lifestyle habits, Canadians with lower household incomes and lower levels of education are consistently *less* likely than those with higher incomes and higher levels of education to say they engage in these activities either every day or often.

For example, in terms of eating habits, Canadians earning less than \$30,000 a year (36%) and those with less than a high school education (32%) are much less likely than those earning \$90,000 or more (53%) and those with a university education or higher (56%) to say they eat five servings of fruits or vegetables a day every day or often.

In terms of physical activity, Canadians earning less than \$30,000 a year (37%) and those with less than a high school education (37%) are less likely than those earning \$90,000 or more (42%) and those with a university education or higher (45%) to say they engage in active outdoor activity every day or often.

The percent of Canadians who every day or often...	National Average	Income		Education	
		Less than \$30K	\$90K or more	Less than high school	University
Eat breakfast	71%	63%	76%	60%	83%
Sleep 6 to 8 hours during the night	71%	65%	73%	63%	82%
Leisure activity - such as gardening, walking, playing with young children or an easy bike ride - for 10 or more minutes	62%	58%	69%	58%	67%
Reduce or restrict your sugar intake	51%	48%	53%	50%	50%
Reduce or restrict your fat intake	50%	48%	54%	48%	55%
Take vitamin or mineral supplements, such as Vitamin C, folic acid, or calcium	44%	41%	50%	34%	49%
Eat five servings of fruit or vegetables a day	43%	36%	53%	32%	56%
Active outdoor activity - such as brisk walking, hiking, running or playing a sport - for 30 minutes or more	39%	37%	42%	37%	45%
Reduce or restrict your calorie intake	38%	34%	44%	35%	43%
Stretching exercises to maintain or improve flexibility	30%	26%	32%	24%	38%
Active indoor activity - such as the treadmill or racquet ball - for 30 minutes or more	19%	14%	26%	16%	27%
Weight training to improve muscle tone and strength	17%	13%	23%	15%	20%

Difference Between Those Describing Their Health Status as Excellent or Very Good Based on Social Determinants

The slides on the following page indicate how Canadians' description of their health as excellent or very good differs based on a range of social determinants. The social determinants of health presented here include behavioural and demographic characteristics commonly identified as indicators of health status in past research.² The social determinants are presented in pairs of opposites. The percents indicate the proportion describing their health as excellent or very good, while the gap indicated on the right side calculates the percentage point difference between each pair.

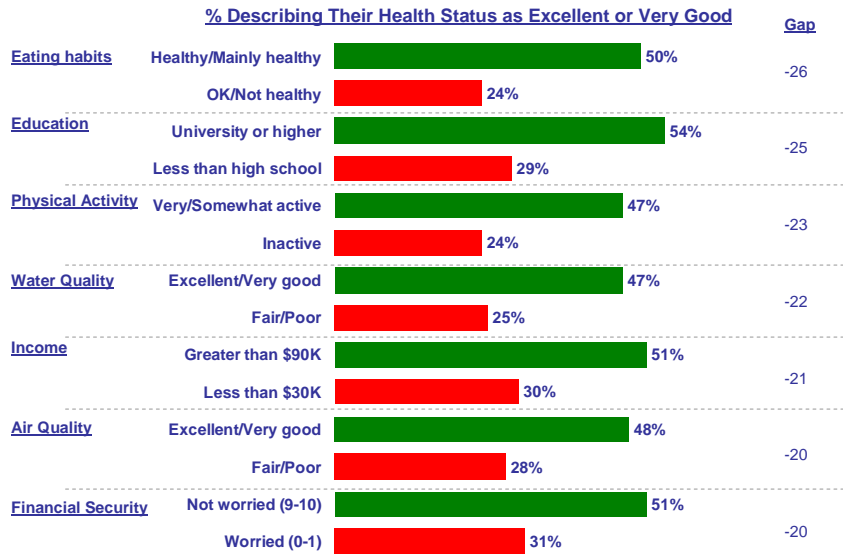
The results find that different eating habits generate the widest gap in the perception of one's health status as excellent or very good. Those who say their eating habits are healthy or mainly healthy (50%) are 26 points more likely than those who say their eating habits are okay or not healthy (24%) to say their health status is excellent or very good.

Educational status yields the second largest gap. Those who have at least a university degree (54%) are 25 points more likely than those who have less than a high school education to describe their health status as excellent or very good. The related factor, income, yields a similar 21 point gap between those earning \$90,000 or more (51%) and those earning \$30,000 or less (30%).

Physical activity generates the third largest gap. Those who say they are very or somewhat active (47%) are 23 points more likely than those who describe themselves as inactive (24%) to describe their health status as excellent or very good.

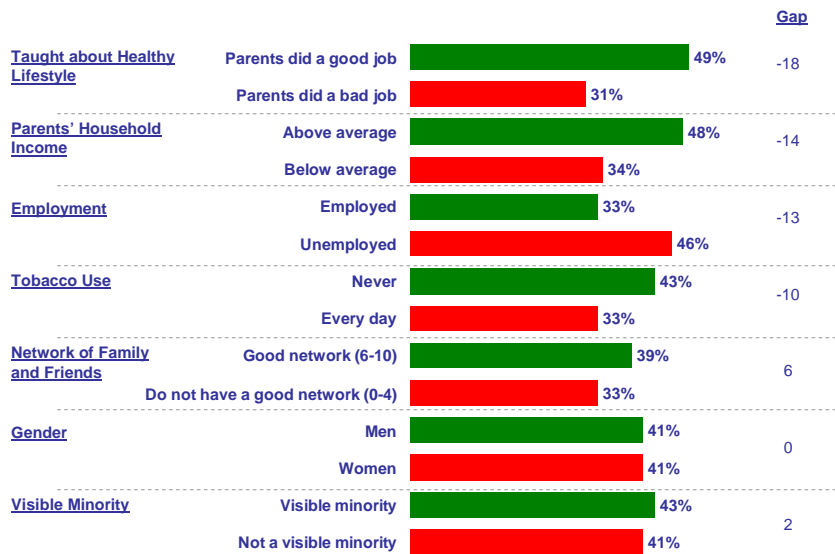
² Canadian Institute for Health Information, "*Select Highlights on Public Views of the Determinants of Health*"; CPHI Public Opinion Survey, 2003.

Difference Between Those Describing Their Health Status as Excellent or Very Good Based on Social Determinants



Base: Online respondents n=3,223

Difference Between Those Describing Their Health Status as Excellent or Very Good Based on Social Determinants



Base: Online respondents n=3,223

Among the social determinants of health included in this research, we find little difference in self reported health status based on visible minority status or gender.