How Canada Compares

Results From The Commonwealth Fund’s 2016 International Health Policy Survey of Adults in 11 Countries
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Executive summary

Delivering care that is centred around the patient is a health care goal in Canada and many other developed countries. By comparing the experiences of Canadians with those of adults in 10 other developed countries, this report provides important perspective on how well health systems in Canada are meeting the needs and expectations of patients.

Canadians continue to report longer wait times for doctors, specialists and emergency department visits than their peers in other countries. However, once they do get medical care, Canadians generally report positive experiences with their regular providers, as well as coordination of care between providers that is similar to or better than the international average.

Meriting further exploration are results suggesting that Canadians are more frequent users of some health services (e.g., emergency departments, drugs, doctor consultations) than people in most other countries, and that low-income Canadians are facing greater cost barriers to care overall. Finally, the report highlights variations in results — both within Canada and between countries. This provides an opportunity to learn from policies and best practices in higher-performing jurisdictions.

The table below provides a summary of Canadian results by theme compared with the international average of countries. The number in each cell represents the number of measures in each theme that are above, the same as or below The Commonwealth Fund average of 11 countries.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Above average</th>
<th>Same as average</th>
<th>Below average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Timely Access to Care</td>
<td>1</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>Cost Barriers to Care</td>
<td>2</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Person-Centred Care</td>
<td>11</td>
<td>10</td>
<td>7</td>
</tr>
</tbody>
</table>
Timely Access to Care

Canada continues to perform below the international average for timely access to patient care. Most Canadians (93%) have a regular doctor or place of care, but they generally report longer wait times for medical care than adults in comparable countries. One possible reason for longer waits here is that Canadians consult with physicians more often than people in other countries.

- Only 43% of Canadians report that they were able to get a same- or next-day appointment at their regular place of care the last time they needed medical attention — the lowest percentage of all countries.
- Only 34% of Canadians report that they could get care on evenings or weekends without going to an emergency department. However, after-hours access is closer to the international average (43%) in some provinces (Ontario and Alberta).
- Canadian patients are generally not seeing improvements in timely access to primary care over time. This is contrary to what primary care physicians reported in The Commonwealth Fund’s 2015 survey.
- Canadians visit emergency departments more often than people in other countries and wait longer for emergency care; Canada has the highest proportion of patients waiting 4 or more hours during a visit.
- Reported wait times for specialists and non-emergency surgeries in Canada are also the highest among the 11 countries, with all provinces showing significantly longer waits for specialists.

Cost Barriers to Care

Canadians report few financial barriers for medical services covered under the Canada Health Act, but they are more likely than those in other countries to skip filling a prescription or visiting a dentist because of the cost.

- Compared with the international average, fewer Canadians report skipping a medical appointment, test or treatment due to cost.
- 1 in 10 Canadians — a higher proportion than the international average — report that they didn’t fill a prescription or skipped a dose due to cost. Despite cost barriers, prescription drug use is higher in Canada than in most other surveyed countries, with 58% of Canadians reporting they use 1 or more prescription drugs (the international average is 52%).
- More than 1 in 4 (28%) Canadians report skipping a dental visit because of the cost, compared with 1 in 5 internationally.
• Canadians with below-average income face cost barriers for all health services more often than those with average or above-average income. Other research suggests the cost of transportation to medical appointments or taking time off work can be a barrier to care for low-income Canadians.¹

• Canadians younger than 65 are more likely to be worried about being able to pay for housing and nutritious meals than their peers in most other countries, and younger Canadians face more cost barriers to drugs and dental care.

### Person-Centred Care

Once they do get in for a visit, Canadians are generally happy with the medical care they receive from their regular doctor or place of care. However, their overall views about their health care system are less positive.

• Nearly 3 in 4 Canadians rate the quality of care they receive from their regular doctor as very good or excellent; however, 55% also believe the health care system overall requires fundamental changes.

• Canadians report better experiences than the international average when it comes to their regular doctor knowing their medical history, involving them in medical decisions and explaining things in a way that is easy to understand.

• When it comes to health promotion and disease prevention, Canadians have more discussions with their primary care providers about healthy lifestyle choices than patients in most other countries, with Alberta, Manitoba and Ontario leading the way.

• With regard to hospital stays, patients report results that are similar to the international average overall. Most Canadians also report good hospital discharge planning, with staff arranging follow-up care and providing written instructions for symptoms to watch for at home.

• Results suggest that coordination of patient care between regular providers and specialists could be improved in all countries. Similar to the international average, 1 in 5 Canadians report that their regular doctor did not seem up to date about the care they received from a specialist.
About this report

The 2016 edition of The Commonwealth Fund International Health Policy Survey focused on the views and experiences of the general population (age 18 and older) in 11 developed countries. This report highlights the Canadian story and examines how these experiences vary across Canada relative to comparator countries and how they are changing over time.

To provide additional context, this report also references information from the Canadian Institute for Health Information (CIHI) and other sources. Please see the References section at the end of this document.

Supplementary data tables are available online. These show more detailed responses to the questions presented here as well as some additional questions not covered in this report. Full data sets of the survey results are available to researchers upon request by writing to cmwf@cihi.ca. As well, a chartbook that presents the information in this report visually is available on CIHI’s website.

Interpreting results

CIHI applied statistical methods to determine whether Canadian and provincial results were significantly different from the international average of 11 countries. Results are described throughout the report as above average, same as average or below average.

Above-average results are more desirable relative to the international average, while below-average results often indicate areas in need of improvement.

Sample sizes in some provinces are much smaller than in others and have wider margins of error. For this reason, 2 provinces may have the same numeric results with different significance testing relative to the international average.

The most robust samples are in Quebec and Ontario because of the additional funding provided from these provinces. The overall response rate for the survey in Canada was 21.4%.
**Timely Access to Care**

Most Canadians (93%) have a regular doctor or place of care, but they have trouble accessing their health care system in a timely manner.

**Same- or next-day appointments are difficult to get in Canada**

*Last time you were sick or needed medical attention, how quickly could you get a same- or next-day appointment to see a doctor or a nurse? Country results from lowest to highest*

Canada, 43% (below average); Norway, 43%; Sweden, 49%; United States, 51%; Germany, 53%; France, 56%; Switzerland, 57%; United Kingdom, 57%; Commonwealth Fund average, 57%; Australia, 67%; New Zealand, 76%; Netherlands, 77%

<table>
<thead>
<tr>
<th>Table 2</th>
<th>Same- or next-day appointments, trend over time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Country</td>
<td>2010</td>
</tr>
<tr>
<td>Canada</td>
<td>42%</td>
</tr>
<tr>
<td>Commonwealth Fund average</td>
<td>62%</td>
</tr>
</tbody>
</table>

The trend over time is fairly stable for Canada.

**Access to after-hours care continues to be below average in Canada**

*Is it very/somewhat easy to get medical care in the evenings, on weekends or on holidays without going to the hospital emergency department? Country results from lowest to highest*

Sweden, 24%; Canada, 34% (below average); France, 35%; Germany, 36%; Switzerland, 41%; United States, 42%; United Kingdom, 43%; Commonwealth Fund average, 43%; Norway, 49%; Australia, 49%; New Zealand, 53%; Netherlands, 72%

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i. There is a slight methodological difference in the 2016 result, as it excludes respondents who did not seek a medical appointment. This information was not available in earlier years.

ii. Those who did not seek an after-hours appointment were excluded from the denominator.
Table 3  Access to after-hours care, trend over time

<table>
<thead>
<tr>
<th>Country</th>
<th>2010</th>
<th>2013</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada</td>
<td>34%</td>
<td>36%</td>
<td>34%</td>
</tr>
<tr>
<td>Commonwealth Fund average</td>
<td>46%</td>
<td>45%</td>
<td>43%</td>
</tr>
</tbody>
</table>

The trend over time is fairly stable for Canada.

**Canadian doctors report improvements to timely care, but patients don’t agree²–⁶**

Table 4  Availability of same- or next-day appointments, patient and physician perspectives

<table>
<thead>
<tr>
<th>Population</th>
<th>2009 or 2010</th>
<th>2012 or 2013</th>
<th>2015 or 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients who say they could get a same- or next-day appointment</td>
<td>42%</td>
<td>38%</td>
<td>43%</td>
</tr>
<tr>
<td>Primary care physicians who say most (at least 60%) of their patients can get a same- or next-day appointment</td>
<td>39%</td>
<td>45%</td>
<td>53%</td>
</tr>
</tbody>
</table>

Note
Patients were surveyed in 2010, 2013 and 2016, while physicians were surveyed in 2009, 2012 and 2015.

Physicians report easier access than patients do.

Table 5  Access to after-hours care, patient and physician perspectives

<table>
<thead>
<tr>
<th>Population</th>
<th>2009 or 2010</th>
<th>2012 or 2013</th>
<th>2015 or 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients who say it was easy or somewhat easy to access medical care after hours without going to the emergency department</td>
<td>34%</td>
<td>36%</td>
<td>34%</td>
</tr>
<tr>
<td>Primary care physicians who report having after-hours care arrangements</td>
<td>43%</td>
<td>45%</td>
<td>48%</td>
</tr>
</tbody>
</table>

Note
Patients were surveyed in 2010, 2013 and 2016, while physicians were surveyed in 2009, 2012 and 2015.

Physicians report easier access than patients do.
Communication with doctors not as easy in Canada

59% of Canadians often or always receive an answer the same day when they contact their regular doctor’s office with a medical concern.

When you contact your regular doctor’s office with a medical concern during regular practice hours, do you always/often get an answer that same day? Country results from lowest to highest

Canada, 59% (below average); Sweden, 61%; Norway, 65%; United Kingdom, 68%; United States, 68%; Commonwealth Fund average, 72%; New Zealand, 74%; Netherlands, 75%; Switzerland, 76%; Australia, 76%; Germany, 79%; France, 86%

Table 6  Always/often receive answer to medical concern by phone on the same day, trend over time

<table>
<thead>
<tr>
<th>Country</th>
<th>2013</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada</td>
<td>60%</td>
<td>59%</td>
</tr>
<tr>
<td>Commonwealth Fund average</td>
<td>68%</td>
<td>72%</td>
</tr>
</tbody>
</table>

The trend over time is fairly stable for Canada.

Timely access to primary care varies across the country

While results are below the international average in most parts of the country, some provinces report timelier access to regular care.

Able to get same- or next-day appointment to see a doctor or a nurse: Province results from east to west

Newfoundland and Labrador, 34% (below average); Prince Edward Island, 30% (below average); Nova Scotia, 34% (below average); New Brunswick, 33% (below average); Quebec, 39% (below average); Ontario, 44% (below average); Manitoba, 47% (below average); Saskatchewan, 49% (same as average); Alberta, 48% (below average); British Columbia, 44% (below average); Canada, 43% (below average); Commonwealth Fund average, 57%
Very/somewhat easy to get medical care in the evenings, on weekends or on holidays without going to the hospital emergency department: Province results from east to west

Newfoundland and Labrador, 16% (below average); Prince Edward Island, 25% (below average); Nova Scotia, 26% (below average); New Brunswick, 35% (below average); Quebec, 27% (below average); Ontario, 40% (same as average); Manitoba, 34% (below average); Saskatchewan, 32% (below average); Alberta, 42% (same as average); British Columbia, 27% (below average); Canada, 34% (below average); Commonwealth Fund average, 43%

Always/often receive an answer the same day when they contact their regular doctor’s office with a medical concern: Province results from east to west

Newfoundland and Labrador, 61% (below average); Prince Edward Island, 70% (same as average); Nova Scotia, 64% (same as average); New Brunswick, 50% (below average); Quebec, 54% (below average); Ontario, 62% (below average); Manitoba, 57% (below average); Saskatchewan, 51% (below average); Alberta, 58% (below average); British Columbia, 64% (same as average); Canada, 59% (below average); Commonwealth Fund average, 72%

Canadians report more timely access to mental health care than those in other countries

1 in 4 surveyed Canadians say they experienced emotional distress, such as anxiety or great sadness, in the past 2 years, which they found difficult to cope with by themselves (below average).

More Canadians — 59% — who experienced emotional distress were able to get professional help when they needed it (above average compared with the international average of 54%).

Canadians are high users of emergency departments

Adults who used an emergency department in the past 2 years: Country results from highest to lowest

Canada, 41% (below average); Sweden, 37%; United States, 35%; France, 33%; Switzerland, 30%; Commonwealth Fund average, 27%; Norway, 26%; United Kingdom, 24%; New Zealand, 23%; Australia, 22%; Netherlands, 20%; Germany, 11%
Table 7  Used emergency department in past 2 years, trend over time

<table>
<thead>
<tr>
<th>Country</th>
<th>2010</th>
<th>2013</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada</td>
<td>44%</td>
<td>40%</td>
<td>41%</td>
</tr>
<tr>
<td>Commonwealth Fund average</td>
<td>30%</td>
<td>29%</td>
<td>27%</td>
</tr>
</tbody>
</table>

The trend over time is fairly stable for Canada.

Many Canadians use EDs because they can’t get appointment with regular doctor

The last time you went to the hospital emergency department, was it for a condition that you thought could have been treated by the doctors or staff at the place where you usually get medical care if they had been available? Country results from highest to lowest

United States, 47%; Germany, 42%; Canada, 41% (below average); Norway, 40%; Commonwealth Fund average, 34%; Netherlands, 33%; Sweden, 32%; New Zealand, 31%; Switzerland, 30%; United Kingdom, 29%; Australia, 28%; France, 20%

How do the experiences of urban and rural Canadians compare?

Urban Canadians, 37%; rural Canadians, 56%

Did you know?

In rural Canada, the ED may be the only place to receive treatments that are performed in family practice settings in urban areas.

Potentially avoidable use of ED improving slightly in Canada

The last time you went to the hospital emergency department, was it for a condition that you thought could have been treated by the doctors or staff at the place where you usually get medical care if they had been available?
Table 8  Used ED for condition that could have been treated by usual doctors had they been available, trend over time

<table>
<thead>
<tr>
<th>Country</th>
<th>2010</th>
<th>2013</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada</td>
<td>45%</td>
<td>46%</td>
<td>41%</td>
</tr>
<tr>
<td>Commonwealth Fund average</td>
<td>35%</td>
<td>33%</td>
<td>34%</td>
</tr>
</tbody>
</table>

The trend over time shows a slight improvement for Canada.

Sources of potentially avoidable ED visits identified in 2014 CIHI study

In 2013–2014, more than 1.4 million visits to Canadian EDs were potentially avoidable or for conditions that could have been treated at a doctor’s office or clinic.

Nearly half of these patients came to the ED for the following reasons:

- Acute upper respiratory infection (13%)
- Antibiotic therapies (13%)
- Throat inflammation (8%)
- Ear infection (7%)
- Post-surgical care, such as dressing change (5%)

Emergency department wait times are longest in Canada

29% of Canadians report waiting 4 or more hours the last time they went to the hospital emergency department.

Patients who reported waiting 4 or more hours: Country results from highest to lowest

Canada, 29% (below average); Sweden, 20%; Norway, 13%; United States, 11%; Commonwealth Fund average, 11%; Australia, 10%; New Zealand, 10%; United Kingdom, 8%; Switzerland, 7%; Netherlands, 4%; Germany, 3%; France, 1%
Canada wait time breakdown

Never treated/left without being treated, 1% (same as average); less than 1 hour, 35% (below average); 1 hour to less than 4 hours, 34% (same as average); 4 or more hours, 29% (below average)

Emergency department use varies across the country

Note: Above-average results are more desirable relative to the international average, while below-average results often indicate areas in need of improvement.

Canadian adults who used an emergency department in the past 2 years: Province results from east to west

Newfoundland and Labrador, 44% (below average); Prince Edward Island, 44% (below average); Nova Scotia, 46% (below average); New Brunswick, 58% (below average); Quebec, 38% (below average); Ontario, 40% (below average); Manitoba, 41% (below average); Saskatchewan, 35% (same as average); Alberta, 46% (below average); British Columbia, 42% (below average); Canada, 41% (below average); Commonwealth Fund average, 27%

Canadian adults who waited 4 or more hours the last time they went to the hospital emergency department: Province results from east to west

Newfoundland and Labrador, 39% (below average); Prince Edward Island, 28% (below average); Nova Scotia, 26% (below average); New Brunswick, 28% (below average); Quebec, 51% (below average); Ontario, 24% (below average); Manitoba, 30% (below average); Saskatchewan, 15% (same as average); Alberta, 22% (below average); British Columbia, 17% (same as average); Canada, 29% (below average); Commonwealth Fund average, 11%

Canadian adults who last visited an emergency department for a condition that could have been treated by providers at usual place of care if they had been available: Province results from east to west

Newfoundland and Labrador, 49% (below average); Prince Edward Island, 60% (below average); Nova Scotia, 48% (below average); New Brunswick, 52% (below average); Quebec, 41% (same as average); Ontario, 44% (below average); Manitoba, 40% (same as average); Saskatchewan, 43% (same as average); Alberta, 30% (same as average); British Columbia, 36% (same as average); Canada, 41% (below average); Commonwealth Fund average, 34%
Wait times for specialists are longest in Canada and not improving

Patients who waited 4 weeks or longer to see a specialist, after they were advised or decided to see one in the last 2 years: Country results from highest to lowest

Canada, 56% (below average); Norway, 52%; New Zealand, 44%; Sweden, 42%; United Kingdom, 37%; Commonwealth Fund average, 36%; France, 36%; Australia, 35%; Germany, 25%; United States, 24%; Netherlands, 23%; Switzerland, 22%

Table 9  Wait time for specialist, trend over time

<table>
<thead>
<tr>
<th>Country</th>
<th>2010</th>
<th>2013</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada</td>
<td>56%</td>
<td>57%</td>
<td>56%</td>
</tr>
<tr>
<td>Commonwealth Fund average</td>
<td>35%</td>
<td>32%</td>
<td>36%</td>
</tr>
</tbody>
</table>

The trend over time is fairly stable for Canada.

Wait times for specialists significantly longer than international average in all provinces

Note: Above-average results are more desirable relative to the international average, while below-average results often indicate areas in need of improvement.

Patients who waited 4 weeks or longer to see a specialist, after they were advised to or decided to see one in the last 2 years: Province results from east to west

Newfoundland and Labrador, 67% (below average); Prince Edward Island, 55% (below average); Nova Scotia, 48% (below average); New Brunswick, 62% (below average); Quebec, 59% (below average); Ontario, 57% (below average); Manitoba, 62% (below average); Saskatchewan, 48% (below average); Alberta, 49% (below average); British Columbia, 51% (below average); Canada, 56% (below average); Commonwealth Fund average, 36%
Wait times are longer than average in Canada for all elective surgeries

Patients who waited 4 months or longer for elective surgery in last 2 years: Country results from highest to lowest

Canada, 18% (below average); New Zealand, 15%; Norway, 15%; United Kingdom, 12%; Sweden, 12%; Commonwealth Fund average, 9%; Australia, 8%; Switzerland, 6%; Netherlands, 4%; United States, 3%; France, 2%; Germany, 0%

Median wait times in days for priority procedures in 2014

Cataract surgery: Canada, 48 days; Commonwealth Fund average, 73 days
Hip replacement: Canada, 87 days; Commonwealth Fund average, 100 days
Knee replacement: Canada, 98 days; Commonwealth Fund average, 126 days

Note: The Commonwealth Fund average median wait time is calculated using the following countries: Australia, Canada, New Zealand, Norway and the United Kingdom.

While Canada performs better when it comes to wait times for priority procedures (cataract, hip and knee), these procedures account for less than half of elective surgeries in Canada (unpublished data, National Ambulatory Care Reporting System and Hospital Morbidity Database, CIHI).

Cost Barriers to Care

Canadians report few financial barriers to medical care in general, but they do report greater-than-average cost barriers when filling prescriptions and seeing a dentist. They also report greater financial worries overall.

Canadians worry about money for rent or the mortgage, particularly younger age groups

People who are usually or always worried or stressed about having enough money to pay rent or the mortgage (over the past 12 months): Country results from highest to lowest

United States, 16%; Switzerland, 12%; Canada, 12% (below average); Netherlands, 11%; Australia, 9%; Commonwealth Fund average, 9%; Sweden, 8%; New Zealand, 7%; United Kingdom, 7%; Norway, 6%; France, 4%; Germany, 3%
Table 10  People who report always or usually worrying about having enough money to pay rent or the mortgage, by age group

<table>
<thead>
<tr>
<th>Age group</th>
<th>Canada</th>
<th>Commonwealth Fund average</th>
</tr>
</thead>
<tbody>
<tr>
<td>18–24</td>
<td>10%</td>
<td>9%</td>
</tr>
<tr>
<td>25–34</td>
<td>17%</td>
<td>10%</td>
</tr>
<tr>
<td>35–49</td>
<td>15%</td>
<td>10%</td>
</tr>
<tr>
<td>50–64</td>
<td>11%</td>
<td>9%</td>
</tr>
<tr>
<td>65+</td>
<td>7%</td>
<td>6%</td>
</tr>
</tbody>
</table>

Younger Canadians (25 to 34) worry more often about money for rent or the mortgage than those in other age groups.

Food insecurity is a challenge for younger Canadians

Table 11  People who report always or often worrying about having enough money to buy nutritious meals, by age group

<table>
<thead>
<tr>
<th>Age group</th>
<th>Canada</th>
<th>Commonwealth Fund average</th>
</tr>
</thead>
<tbody>
<tr>
<td>18–24</td>
<td>7%</td>
<td>8%</td>
</tr>
<tr>
<td>25–34</td>
<td>17%</td>
<td>9%</td>
</tr>
<tr>
<td>35–49</td>
<td>14%</td>
<td>8%</td>
</tr>
<tr>
<td>50–64</td>
<td>12%</td>
<td>8%</td>
</tr>
<tr>
<td>65+</td>
<td>9%</td>
<td>6%</td>
</tr>
</tbody>
</table>

Percentage of food-insecure households in Canada, provinces and territories, 2011–2012: Province results from east to west

Newfoundland and Labrador, 8%; Prince Edward Island, 11%; Nova Scotia, 12%; New Brunswick, 10%; Quebec, 8%; Ontario, 8%; Manitoba, 8%; Saskatchewan, 8%; Alberta, 8%; British Columbia, 8%; Yukon, 12%; Northwest Territories, 14%; Nunavut, 37%; Canada, 8%
Few Canadians face cost barriers to care covered under *Canada Health Act*

**Within last year, had a medical problem but did not visit a doctor because of the cost:**

Country results from highest to lowest

- United States, 22%; Switzerland, 16%; New Zealand, 14%; Australia, 9%; France, 9%;
- Commonwealth Fund average, 9%; Canada, 6% (above average); Norway, 5%;
- United Kingdom, 4%; Netherlands, 3%; Sweden, 3%; Germany, 3%

**Within last year, skipped a medical test, treatment or follow-up because of the cost:**

Country results from highest to lowest

- United States, 19%; France, 12%; Switzerland, 10%; New Zealand, 10%; Commonwealth Fund average, 7%; Australia, 7%; Canada, 6% (above average); Germany, 5%; Norway, 4%;
- Netherlands, 4%; Sweden, 3%; United Kingdom, 3%

More Canadians face cost barriers to dental care and prescription drugs

**Within last year, did not fill prescription for medicine or skipped doses of medicine because of the cost:** Country results from highest to lowest

- United States, 18%; Canada, 10% (below average); Switzerland, 9%; Commonwealth Fund average, 6%; Australia, 6%; New Zealand, 6%; Sweden, 6%; Netherlands, 4%; France, 4%;
- Norway, 3%; Germany, 3%; United Kingdom, 2%

**Within last year, skipped dental care or dental checkups because of the cost:**

Country results from highest to lowest

- United States, 32%; Canada, 28% (below average); France, 23%; New Zealand, 22%; Australia, 21%; Switzerland, 21%; Norway, 20%; Commonwealth Fund average, 20%;
- Sweden, 19%; Germany, 14%; United Kingdom, 11%; Netherlands, 11%
Despite cost barriers, use of prescription drugs is higher in Canada than in most other countries

58% of Canadian adults report taking 1 or more prescription drugs on a regular basis.

**Adults taking 1 or more prescription drugs on a regular basis: Country results from highest to lowest**

Norway, 59%; Canada, 58% (below average); United States, 57%; Germany, 53%; Netherlands, 52%; Sweden, 52%; Commonwealth Fund average, 52%; New Zealand, 49%; France, 48%; Switzerland, 48%; United Kingdom, 47%; Australia, 46%

**Polypharmacy higher in Canada than in other Commonwealth Fund countries**

1 in 5 Canadians report that they take 4 or more prescription drugs on a regular basis (below average; Commonwealth Fund average is 1 in 6).

**Younger adults report greater financial barriers to drugs and dental care**

**Table 12** Within last year, skipped dental care or dental checkups because of the cost, by age group

<table>
<thead>
<tr>
<th>Age group</th>
<th>Canada</th>
<th>Commonwealth Fund average</th>
</tr>
</thead>
<tbody>
<tr>
<td>18–24</td>
<td>27%</td>
<td>19%</td>
</tr>
<tr>
<td>25–34</td>
<td>38%</td>
<td>26%</td>
</tr>
<tr>
<td>35–49</td>
<td>30%</td>
<td>23%</td>
</tr>
<tr>
<td>50–64</td>
<td>27%</td>
<td>21%</td>
</tr>
<tr>
<td>65+</td>
<td>20%</td>
<td>12%</td>
</tr>
</tbody>
</table>
Within last year, did not fill prescription for medicine or skipped doses of medicine because of the cost, age 18 to 64 versus age 65 and older

Age 18 to 64: Canada, 12% (below average); Commonwealth Fund average, 7%
Age 65 and older: Canada, 4% (same as average); Commonwealth Fund average, 4%

Note: All Canadian provinces and territories provide drug coverage for seniors age 65 and older.

Cost barriers to all care are highest for low-income Canadians

Table 13  Cost barriers to care by income level

<table>
<thead>
<tr>
<th>Barrier</th>
<th>Below-average income</th>
<th>Above-average income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Skipped a medical test, treatment or follow-up</td>
<td>9%</td>
<td>3%</td>
</tr>
<tr>
<td>Had a medical problem but did not visit a doctor</td>
<td>11%</td>
<td>3%</td>
</tr>
<tr>
<td>Did not fill/collect a prescription</td>
<td>17%</td>
<td>4%</td>
</tr>
<tr>
<td>Skipped dental care</td>
<td>41%</td>
<td>17%</td>
</tr>
</tbody>
</table>

People with below-average income report more cost barriers.

Person-Centred Care

Canadians are generally happy with the medical care they receive from their regular doctor or place of care, but they are less positive about their health care system overall.

Coordination of care has been improving both in Canada and internationally, though there are still challenges.
Most Canadians have a regular doctor or place where they receive care

85% of Canadians have a usual doctor.
93% of Canadians have a usual doctor or place they go to for medical care.

People who report having one doctor they usually go to for their medical care: Country results from lowest to highest

Sweden, 42%; United States, 77%; United Kingdom, 81%; Canada, 85% (same as average); Switzerland, 85%; Commonwealth Fund average, 85%; Australia, 86%; New Zealand, 89%; Norway, 95%; Germany, 98%; Netherlands, 99%; France, 99%

Canadians like their usual physician but don’t think the system works well

Overall, how do you rate the medical care that you have received in the past 12 months from your regular doctor’s practice or clinic? “Excellent or very good” country results from lowest to highest

Sweden, 39%; Germany, 54%; France, 60%; Netherlands, 62%; Norway, 63%; Switzerland, 64%; Commonwealth Fund average, 65%; United Kingdom, 70%; Australia, 72%; United States, 73%; Canada, 74% (above average); New Zealand, 79%

How would you rate the overall quality of medical care in your country? “Excellent or very good” country results from lowest to highest

United States, 26%; Sweden, 39%; Canada, 45% (below average); Germany, 49%; Norway, 50%; Commonwealth Fund average, 51%; Netherlands, 51%; France, 52%; New Zealand, 58%; Australia, 59%; United Kingdom, 63%; Switzerland, 66%

Most Canadians think the health care system needs fundamental changes to work better

Which of the following statements expresses your overall views of the system? Canada results by statement

On the whole, the system works pretty well and only minor changes are necessary to make it work better: 35% (below average)
There are some good things in our health care system, but fundamental changes are needed to make it work better: 55% (below average)

Our health care system has so much wrong with it that we need to completely rebuild it: 9% (below average)

Not sure: 2% (same as average)

**Overall view of the health care system — It works well and only minor changes are necessary to make it better: Country results from lowest to highest**

United States, 19%; Sweden, 31%; Canada, 35% (below average); New Zealand, 41%; Netherlands, 43%; Commonwealth Fund average, 44%; Australia, 44%; United Kingdom, 44%; France, 54%; Switzerland, 58%; Norway, 59%; Germany, 60%

**Provinces vary when it comes to perceptions of the health care system**

Is there one doctor you usually go to for your medical care? Province results from east to west

Newfoundland and Labrador, 85% (same as average); Prince Edward Island, 92% (above average); Nova Scotia, 85% (same as average); New Brunswick, 88% (same as average); Quebec, 75% (below average); Ontario, 92% (above average); Manitoba, 83% (same as average); Saskatchewan, 79% (same as average); Alberta, 84% (same as average); British Columbia, 83% (same as average); Canada, 85% (same as average); Commonwealth Fund average, 85%

Overall, how do you rate the medical care that you have received in the past 12 months from your regular doctor’s practice or clinic? “Excellent or very good” province results from east to west

Newfoundland and Labrador, 76% (above average); Prince Edward Island, 77% (above average); Nova Scotia, 78% (above average); New Brunswick, 76% (above average); Quebec, 66% (same as average); Ontario, 76% (above average); Manitoba, 75% (above average); Saskatchewan, 75% (above average); Alberta, 78% (above average); British Columbia, 77% (above average); Canada, 74% (above average); Commonwealth Fund average, 65%
How would you rate the overall quality of medical care in your country? “Excellent or very good” province results from east to west

Newfoundland and Labrador, 48% (same as average); Prince Edward Island, 44% (same as average); Nova Scotia, 52% (same as average); New Brunswick, 40% (below average); Quebec, 26% (below average); Ontario, 52% (same as average); Manitoba, 46% (same as average); Saskatchewan, 43% (same as average); Alberta, 54% (same as average); British Columbia, 52% (same as average); Canada, 45% (below average); Commonwealth Fund average, 51%

Overall, you think the health care system works pretty well and only minor changes are necessary to make it work better: Province results from east to west

Newfoundland and Labrador, 35% (same as average); Prince Edward Island, 35% (same as average); Nova Scotia, 38% (same as average); New Brunswick, 29% (below average); Quebec, 22% (below average); Ontario, 38% (same as average); Manitoba, 39% (same as average); Saskatchewan, 41% (same as average); Alberta, 38% (same as average); British Columbia, 43% (same as average); Canada, 35% (below average); Commonwealth Fund average, 44%

Canada relies more on doctors to provide care compared with other Commonwealth Fund countries

Aside from your regular doctor, is there a nurse or other clinical staff who is regularly involved with your health care (for example, who discusses test results/treatment plans or advises you on your health)? Country results from lowest to highest

Switzerland, 17%; Canada, 22% (below average); Norway, 22%; Australia, 27%; France, 29%; Netherlands, 30%; Commonwealth Fund average, 31%; Sweden, 32%; United States, 35%; New Zealand, 41%; United Kingdom, 42%; Germany, 44%

Doctor consultations per capita⁹

Canada, 7.6; Commonwealth Fund average, 5.8

Number of physicians per 1,000 people⁹

Canada, 2.5; Commonwealth Fund average, 3.5

Note: The Commonwealth Fund average is calculated using the following countries: Australia, Canada, Finland, France, Germany, New Zealand, Norway, Sweden, the United Kingdom and the United States.
Canadians report better experiences with their regular doctors than 11-country average

When you need care or treatment, how often does your regular doctor or the medical staff you see always know important information about your medical history?

Canada, 63% (above average); Commonwealth Fund average, 57%

When you need care or treatment, how often does your regular doctor or the medical staff you see always spend enough time with you?

Canada, 57% (same as average); Commonwealth Fund average, 55%

When you need care or treatment, how often does your regular doctor or the medical staff you see always involve you as much as you want in decisions about your care and treatment?

Canada, 63% (above average); Commonwealth Fund average, 56%

When you need care or treatment, how often does your regular doctor or the medical staff you see always explain things in a way that is easy to understand?

Canada, 70% (above average); Commonwealth Fund average, 63%

Canadians are more likely to discuss healthy lifestyle choices as part of care

During the past 2 years, have you and your doctor or other clinical staff at the place you usually go to for care talked about a healthy diet and healthy eating? Province results from east to west

Newfoundland and Labrador, 48% (same as average); Prince Edward Island, 53% (above average); Nova Scotia, 53% (above average); New Brunswick, 55% (above average); Quebec, 38% (same as average); Ontario, 56% (above average); Manitoba, 59% (above average); Saskatchewan, 47% (same as average); Alberta, 61% (above average); British Columbia, 44% (same as average); Canada, 50% (above average); Commonwealth Fund average, 40%
During the past 2 years, have you and your doctor or other clinical staff at the place you usually go to for care talked about exercise or physical activity? Province results from east to west

Newfoundland and Labrador, 37% (same as average); Prince Edward Island, 49% (same as average); Nova Scotia, 55% (above average); New Brunswick, 54% (above average); Quebec, 43% (same as average); Ontario, 60% (above average); Manitoba, 65% (above average); Saskatchewan, 45% (same as average); Alberta, 62% (above average); British Columbia, 58% (above average); Canada, 55% (above average); Commonwealth Fund average, 42%

During the past 2 years, have you and your doctor or other clinical staff at the place you usually go to for care talked about the health risks of smoking and ways to quit? Province results from east to west

Newfoundland and Labrador, 57% (same as average); Prince Edward Island, 62% (same as average); Nova Scotia, 65% (same as average); New Brunswick, 68% (same as average); Quebec, 61% (above average); Ontario, 79% (above average); Manitoba, 71% (above average); Saskatchewan, 58% (same as average); Alberta, 79% (above average); British Columbia, 57% (same as average); Canada, 71% (above average); Commonwealth Fund average, 50%

During the past 2 years, have you and your doctor or other clinical staff at the place you usually go to for care talked about alcohol use? Province results from east to west

Newfoundland and Labrador, 10% (below average); Prince Edward Island, 21% (same as average); Nova Scotia, 14% (same as average); New Brunswick, 15% (same as average); Quebec, 18% (same as average); Ontario, 26% (above average); Manitoba, 28% (above average); Saskatchewan, 14% (same as average); Alberta, 32% (above average); British Columbia, 22% (same as average); Canada, 23% (above average); Commonwealth Fund average, 19%

During the past 2 years, have you and your doctor or other clinical staff at the place you usually go to for care talked about things in your life that worry you or cause stress? Province results from east to west

Newfoundland and Labrador, 28% (same as average); Prince Edward Island, 35% (same as average); Nova Scotia, 30% (same as average); New Brunswick, 29% (same as average); Quebec, 28% (same as average); Ontario, 38% (above average); Manitoba, 38% (above average); Saskatchewan, 31% (same as average); Alberta, 40% (above average); British Columbia, 36% (same as average); Canada, 35% (above average); Commonwealth Fund average, 28%
Canadians more likely to receive medication reviews

77% of Canadians with 2 or more prescription drugs had a doctor, nurse or pharmacist review their medications in the last 2 years: Country results from lowest to highest

France, 45%; Norway, 55%; Sweden, 58%; Switzerland, 63%; Germany, 66%; Commonwealth Fund average, 68%; New Zealand, 71%; Netherlands, 72%; Australia, 75%; Canada, 77% (above average); United Kingdom, 79%; United States, 82%

Did you know?

Medication reviews are important for patient safety. In 2010–2011, nearly 47,000 Canadians were hospitalized due to an adverse drug reaction (unpublished data, Discharge Abstract Database and Hospital Morbidity Database, CIHI).

Fewer Canadians have online access to health information

Viewed online or downloaded your health information, such as your tests or laboratory results, in last 2 years: Country results from lowest to highest

Germany, 4%; Australia, 5%; Canada, 6% (below average); United Kingdom, 7%; New Zealand, 7%; Switzerland, 8%; Sweden, 10%; Netherlands, 10%; Commonwealth Fund average, 11%; Norway, 12%; United States, 25%; France, 27%

Emailed your regular practice with a medical question in last 2 years: Country results from lowest to highest

Canada, 4% (below average); United Kingdom, 5%; Netherlands, 5%; New Zealand, 6%; Germany, 6%; Switzerland, 7%; Norway, 7%; Sweden, 8%; Australia, 8%; Commonwealth Fund average, 8%; United States, 12%; France, 24%
Online access to personal health information low across most provinces

Viewed online or downloaded your health information, such as tests or laboratory results: Province results from east to west

Newfoundland and Labrador, 1% (below average); Prince Edward Island, 1% (below average); Nova Scotia, 6% (below average); New Brunswick, 2% (below average); Quebec, 6% (below average); Ontario, 6% (below average); Manitoba, 2% (below average); Saskatchewan, 1% (below average); Alberta, 4% (below average); British Columbia, 14% (same as average); Canada, 6% (below average); Commonwealth Fund average, 11%

Did you know?

B.C. currently has 730,000 users who are registered on my ehealth and have the ability to access reports from both private and public outpatient labs (email communication, October 25, 2016, Excelleris).

Patient-centred care in Canadian hospitals is similar to the international average

Thinking about the last time you were in the hospital, were you involved as much as you wanted in decisions about your care and treatment? “Yes, definitely”

Canada, 58% (same as average); Commonwealth Fund average, 61%

Thinking about the last time you were in the hospital, during this hospital stay, how often did doctors treat you with courtesy and respect? “Always”

Canada, 73% (same as average); Commonwealth Fund average, 73%

Thinking about the last time you were in the hospital, during this hospital stay, how often did nurses treat you with courtesy and respect? “Always”

Canada, 65% (below average); Commonwealth Fund average, 71%
Hospital inpatient experience varies across Canada

Note: Saskatchewan’s sample size was less than 30. Please interpret with caution.

Thinking about the last time you were in the hospital, were you involved as much as you wanted in decisions about your care and treatment? “Yes, definitely” province results from east to west

Newfoundland and Labrador, 68% (same as average); Prince Edward Island, 61% (same as average); Nova Scotia, 41% (same as average); New Brunswick, 61% (same as average); Quebec, 66% (same as average); Ontario, 51% (below average); Manitoba, 50% (same as average); Saskatchewan, 65% (same as average); Alberta, 63% (same as average); British Columbia, 56% (same as average); Canada, 58% (same as average); Commonwealth Fund average, 61%

Thinking about the last time you were in the hospital, during this hospital stay, how often did doctors treat you with courtesy and respect? “Always” province results from east to west

Newfoundland and Labrador, 77% (same as average); Prince Edward Island, 67% (same as average); Nova Scotia, 56% (same as average); New Brunswick, 74% (same as average); Quebec, 85% (above average); Ontario, 68% (same as average); Manitoba, 72% (same as average); Saskatchewan, 83% (same as average); Alberta, 64% (same as average); British Columbia, 79% (same as average); Canada, 73% (same as average); Commonwealth Fund average, 73%

Thinking about the last time you were in the hospital, during this hospital stay, how often did nurses treat you with courtesy and respect? “Always” province results from east to west

Newfoundland and Labrador, 59% (same as average); Prince Edward Island, 51% (same as average); Nova Scotia, 52% (same as average); New Brunswick, 62% (same as average); Quebec, 84% (above average); Ontario, 60% (below average); Manitoba, 58% (same as average); Saskatchewan, 71% (same as average); Alberta, 48% (below average); British Columbia, 67% (same as average); Canada, 65% (below average); Commonwealth Fund average, 71%
Most hospital patients report comprehensive discharge planning

When you left the hospital, did someone discuss with you the purpose of taking each of your medications?

Canada, 83% (same as average); Commonwealth Fund average, 82%

When you left the hospital, did the hospital make arrangements for or make sure you had follow-up care with a doctor or other health care professional?

Canada, 73% (same as average); Commonwealth Fund average, 73%

When you left the hospital, did you receive written information on what to do when you returned home and what symptoms to watch for?

Canada, 75% (same as average); Commonwealth Fund average, 74%

Two-way communication between specialists and regular doctors can be improved in most countries

The specialist did not have basic medical information or test results from your regular doctor about the reason for your visit: Country results from highest to lowest

France, 22%; Switzerland, 19%; Sweden, 18%; United States, 17%; Netherlands, 16%; Commonwealth Fund average, 15%; Norway, 14%; Canada, 13% (same as average); United Kingdom, 13%; Germany, 13%; Australia, 11%; New Zealand, 8%

After you saw the specialist, your regular doctor did not seem informed and up to date about the care you got from the specialist: Country results from highest to lowest

Norway, 29%; United States, 23%; Sweden, 23%; France, 21%; Canada, 21% (same as average); Commonwealth Fund average, 19%; Netherlands, 18%; Switzerland, 17%; Australia, 16%; Germany, 15%; New Zealand, 14%; United Kingdom, 11%
Communication between specialists and regular doctors varies across the country

The specialist did not have basic medical information from your regular doctor about the reason for your visit: Province results from east to west

Newfoundland and Labrador, 10% (same as average); Prince Edward Island, 17% (same as average); Nova Scotia, 11% (same as average); New Brunswick, 8% (above average); Quebec, 13% (same as average); Ontario, 14% (same as average); Manitoba, 23% (same as average); Saskatchewan, 9% (same as average); Alberta, 11% (same as average); British Columbia, 16% (same as average); Canada, 13% (same as average); Commonwealth Fund average, 15%

After you saw the specialist, your regular doctor did not seem informed and up to date about the care you got from the specialist: Province results from east to west

Newfoundland and Labrador, 22% (same as average); Prince Edward Island, 15% (same as average); Nova Scotia, 12% (same as average); New Brunswick, 16% (same as average); Quebec, 21% (same as average); Ontario, 23% (below average); Manitoba, 30% (below average); Saskatchewan, 19% (same as average); Alberta, 21% (same as average); British Columbia, 14% (same as average); Canada, 21% (same as average); Commonwealth Fund average, 19%

Conflicting information biggest challenge for coordination of care

Note: Above-average results are more desirable relative to the international average, while below-average results often indicate areas in need of improvement.

You received conflicting information from different doctors or health care professionals: Country results from highest to lowest

Norway, 20%; Sweden, 20%; United States, 17%; Canada, 17% (below average); Switzerland, 16%; New Zealand, 15%; Commonwealth Fund average, 14%; Australia, 13%; United Kingdom, 12%; France, 9%; Germany, 8%; Netherlands, 8%
Test results or medical records were not available at the time of your scheduled medical care appointment: Country results from highest to lowest

France, 13%; United States, 11%; Sweden, 8%; Canada, 8% (same as average); Commonwealth Fund average, 8%; Norway, 7%; New Zealand, 7%; United Kingdom, 6%; Germany, 6%; Switzerland, 6%; Netherlands, 5%; Australia, 5%

Doctors ordered a medical test that you felt was unnecessary because the test had already been done: Country results from highest to lowest

France, 20%; United States, 11%; Switzerland, 9%; Commonwealth Fund average, 7%; Australia, 6%; Germany, 6%; Norway, 6%; Canada, 6% (above average); United Kingdom, 5%; Sweden, 5%; New Zealand, 4%; Netherlands, 3%

International progress in reducing coordination problems

### Table 14
You received conflicting information from different doctors or health care professionals, trend over time

<table>
<thead>
<tr>
<th>Country</th>
<th>2010</th>
<th>2013</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada</td>
<td>20%</td>
<td>15%</td>
<td>17%</td>
</tr>
<tr>
<td>Commonwealth Fund average</td>
<td>18%</td>
<td>15%</td>
<td>14%</td>
</tr>
</tbody>
</table>

The trend over time improved slightly for Canada.

### Table 15
Test results or medical records were not available at the time of your scheduled medical care appointment, trend over time

<table>
<thead>
<tr>
<th>Country</th>
<th>2010</th>
<th>2013</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada</td>
<td>11%</td>
<td>11%</td>
<td>8%</td>
</tr>
<tr>
<td>Commonwealth Fund average</td>
<td>9%</td>
<td>9%</td>
<td>8%</td>
</tr>
</tbody>
</table>

The trend over time improved slightly for Canada.
Table 16  Doctors ordered a medical test that you felt was unnecessary because the test had already been done, trend over time

<table>
<thead>
<tr>
<th>Country</th>
<th>2010</th>
<th>2013</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada</td>
<td>8%</td>
<td>7%</td>
<td>6%</td>
</tr>
<tr>
<td>Commonwealth Fund average</td>
<td>10%</td>
<td>10%</td>
<td>7%</td>
</tr>
</tbody>
</table>

The trend over time improved slightly for Canada.

Acknowledgements and methodology notes

Acknowledgements

Core funding for The Commonwealth Fund’s 2016 International Health Policy Survey of Adults in 11 countries was provided by The Commonwealth Fund with co-funding from the following organizations outside of Canada:

The NSW Bureau of Health Information (Australia); the Victoria Department of Health and Human Services (Australia); the Haute autorité de santé (France); the Caisse nationale de l’assurance maladie des travailleurs salariés (France); the Institute for Quality Assurance and Transparency in Healthcare (IQTIG) (Germany); the Scientific Institute for Quality of Healthcare, Radboud University Nijmegen (the Netherlands); the Dutch Ministry of Health, Welfare and Sport (the Netherlands); the Norwegian Knowledge Centre at the Norwegian Institute of Public Health; the Swedish Ministry of Health and Social Affairs; the Swedish Agency for Health and Care Services Analysis (Vårdanalys); the Swiss Federal Office of Public Health; and other country partners.

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- Dr. Alan Katz, Director, Manitoba Centre for Health Policy, University of Manitoba
- Dr. Gail Dobell, Director, Performance Measurement, Health Quality Ontario
- Michelinan Mancuso, Executive Director, Performance Measurement, New Brunswick Health Council
- Annette McKinnon, patient representative
- Dr. Jean-Frédéric Levesque, Chief Executive, Bureau of Health Information, New South Wales, Australia

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Please note that the analyses and conclusions in the present document do not necessarily reflect those of the individuals or organizations mentioned above.

Appreciation goes to the CIHI staff from the core team as well as the supporting program areas who contributed to the development of this project. Core team members who contributed to this report include Gilles Fortin, Tracy Johnson, Christopher Kuchciak, Christina Lawand, Kathleen Morris, Geoff Paltser, David Paton, Sheril Perry, Alain Yao, Alison Ytsma, Jingbo Zhang and Annie Zhao.

**Methodology notes**

The Commonwealth Fund’s 2016 International Health Policy Survey includes responses from adults in 11 countries: Australia, Canada, France, Germany, the Netherlands, New Zealand, Norway, Sweden, Switzerland, the United Kingdom and the United States.

More detailed methodology notes, including a complete list of response rates from all countries surveyed, are available online.

In Canada, phone surveys (landline and cell phone) were conducted from March through June 2016 by Social Science Research Solutions (SSRS). There were 4,547 respondents. Due to small sample sizes in the 3 territories, these jurisdictions are not included in the provincial results. Sample sizes were further increased in Quebec and Ontario with funding from provincial organizations. The overall response rate in Canada was 21.4%.
### Table 17  
**Canadian sample sizes**

<table>
<thead>
<tr>
<th>Province/territory</th>
<th>Landline</th>
<th>Cell phone</th>
<th>Total</th>
<th>Percentage distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>N.L.</td>
<td>177</td>
<td>76</td>
<td>253</td>
<td>6%</td>
</tr>
<tr>
<td>P.E.I.</td>
<td>172</td>
<td>79</td>
<td>251</td>
<td>6%</td>
</tr>
<tr>
<td>N.S.</td>
<td>184</td>
<td>69</td>
<td>253</td>
<td>6%</td>
</tr>
<tr>
<td>N.B.</td>
<td>192</td>
<td>59</td>
<td>251</td>
<td>6%</td>
</tr>
<tr>
<td>Que.</td>
<td>741</td>
<td>261</td>
<td>1,002</td>
<td>22%</td>
</tr>
<tr>
<td>Ont.</td>
<td>1,119</td>
<td>381</td>
<td>1,500</td>
<td>33%</td>
</tr>
<tr>
<td>Man.</td>
<td>201</td>
<td>54</td>
<td>255</td>
<td>6%</td>
</tr>
<tr>
<td>Sask.</td>
<td>170</td>
<td>81</td>
<td>251</td>
<td>6%</td>
</tr>
<tr>
<td>Alta.</td>
<td>177</td>
<td>94</td>
<td>271</td>
<td>6%</td>
</tr>
<tr>
<td>B.C.</td>
<td>183</td>
<td>71</td>
<td>254</td>
<td>6%</td>
</tr>
<tr>
<td>Y.T.</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>0%</td>
</tr>
<tr>
<td>N.W.T.</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>0%</td>
</tr>
<tr>
<td>Nun.</td>
<td>1</td>
<td>3</td>
<td>4</td>
<td>0%</td>
</tr>
<tr>
<td>Total</td>
<td>3,317</td>
<td>1,230</td>
<td>4,547</td>
<td>100%</td>
</tr>
</tbody>
</table>

### Weighting of results

Survey data for Canada was weighted by age, gender, educational attainment and phone status (landline phone with multiple adults versus single adult in household; cell phone only versus dual usage of landline and cell phone) within each province. Data was weighted for knowledge of official languages in Quebec and in Canada as a whole. Additionally, data was then weighted to reflect Canada’s overall geographic distribution for all provinces and territories.

### Averages and trends

For this report, The Commonwealth Fund average was calculated by adding the results from the 11 countries and dividing by the number of countries. The Canadian average represents the average experience of Canadians (as opposed to the mean of provincial results). Except where otherwise noted, results were compared over time using data from previous Commonwealth Fund surveys.
Significance testing

CIHI developed statistical methods to determine whether

- Canadian results were significantly different from the average of 11 countries; and
- Provincial results were significantly different from the international average.

For the calculation of variances and confidence intervals, standard methods for the variances of sums and differences of estimates from independent simple random samples were used, with the design effects provided by SSRS used to appropriately adjust the variances for the effects of the survey design and post-survey weight adjustments.

Sample size by province

Provincial results are flagged for questions for which the denominator is less than 30. Due to small sample sizes, provincial results are to be interpreted with caution. For more information on sample sizes for individual questions, please refer to the companion data tables on CIHI’s website.

Sample population

This year’s sample population showed some characteristics that were not in line with previous Canadian population surveys. Of particular note were responses about self-perceived health. In past Commonwealth Fund surveys (and other international surveys), Canada has performed above the international average for this measure, while 2016 saw a large drop (11%) in those reporting excellent or very good health. While characteristics for different sample populations selected in each year are not expected to be the same, the low response rate in 2016 may indicate that the population sampled in 2016 may have different characteristics than that sampled in 2013 or 2010.

Self-perceived health ("excellent or very good")

Canada: 2010, 61%; 2013, 60%; 2016, 49%
Commonwealth Fund average: 2010, 52%; 2013, 54%; 2016, 51%

Response rate

Canada: 2010, 29%; 2013, 24%; 2016, 21%
Commonwealth Fund average: 2010, 28%; 2013, 24%; 2016, 25%
Demographics by province

Total respondents (number)
Newfoundland and Labrador, 253; Prince Edward Island, 251; Nova Scotia, 253; New Brunswick, 251; Quebec, 1,002; Ontario, 1,500; Manitoba, 255; Saskatchewan, 251; Alberta, 271; British Columbia, 254; Canada, 4,541

Percentage male
Newfoundland and Labrador, 40%; Prince Edward Island, 41%; Nova Scotia, 37%; New Brunswick, 39%; Quebec, 40%; Ontario, 40%; Manitoba, 38%; Saskatchewan, 45%; Alberta, 48%; British Columbia, 45%; Canada, 41%

Percentage female
Newfoundland and Labrador, 60%; Prince Edward Island, 59%; Nova Scotia, 63%; New Brunswick, 61%; Quebec, 60%; Ontario, 60%; Manitoba, 62%; Saskatchewan, 55%; Alberta, 52%; British Columbia, 55%; Canada, 59%

Percentage age 18 to 24
Newfoundland and Labrador, 4%; Prince Edward Island, 6%; Nova Scotia, 5%; New Brunswick, 5%; Quebec, 4%; Ontario, 3%; Manitoba, 5%; Saskatchewan, 4%; Alberta, 7%; British Columbia, 4%; Canada, 4%

Percentage age 25 to 34
Newfoundland and Labrador, 7%; Prince Edward Island, 9%; Nova Scotia, 6%; New Brunswick, 11%; Quebec, 12%; Ontario, 9%; Manitoba, 11%; Saskatchewan, 13%; Alberta, 11%; British Columbia, 8%; Canada, 10%

Percentage age 35 to 49
Newfoundland and Labrador, 21%; Prince Edward Island, 16%; Nova Scotia, 19%; New Brunswick, 16%; Quebec, 23%; Ontario, 20%; Manitoba, 20%; Saskatchewan, 22%; Alberta, 23%; British Columbia, 19%; Canada, 21%

Percentage age 50 to 64
Newfoundland and Labrador, 35%; Prince Edward Island, 34%; Nova Scotia, 31%; New Brunswick, 38%; Quebec, 35%; Ontario, 34%; Manitoba, 25%; Saskatchewan, 27%; Alberta, 27%; British Columbia, 29%; Canada, 33%
Percentage age 65 and older

Newfoundland and Labrador, 30%; Prince Edward Island, 33%; Nova Scotia, 37%; New Brunswick, 28%; Quebec, 25%; Ontario, 32%; Manitoba, 34%; Saskatchewan, 33%; Alberta, 30%; British Columbia, 38%; Canada, 31%

Percentage age 18 and older, exact age not provided

Newfoundland and Labrador, 2%; Prince Edward Island, 2%; Nova Scotia, 2%; New Brunswick, 2%; Quebec, 1%; Ontario, 3%; Manitoba, 4%; Saskatchewan, 1%; Alberta, 1%; British Columbia, 2%; Canada, 2%

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