

Chaoulli Shifts Public Debate



Implications of the New Health Politics for Family Physicians

*Presentation to the Coalition of Family Physicians of Ontario
Sustaining Health & Healthcare – Bold New Horizons
June 3, 2006*

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Agenda

Methodology

Private Health Care: No Longer the Third Rail

The New Politics of Health Care

Willingness to Pay for Private Insurance

What It Means for Private Clinics

A Cloud on the Horizon?

Methodology

- A series of online surveys conducted among approximately 7,000 current members of the Canada 20/20 panel.
- Anyone interested in participating in these surveys can join the Canada 20/20 panel by going to Canada2020.com and completing the enrolment survey. However, our base sample was recruited through a series of invitations emailed by Rogers Publishing and Canadians recruited through INNOVATIVE's telephone surveys. Our core analysis is based on those who respond to email invitations.
- The March wave included 3063 responses eligible for inclusion in our analysis. After weighting a sample of this size the aggregated results are considered accurate to within ± 1.77 percentage points, 19 times out of 20, of what they would have been had a representative cross-section of Canadians eligible to vote been polled.
- The margin of error will be larger within each sub-grouping of the sample

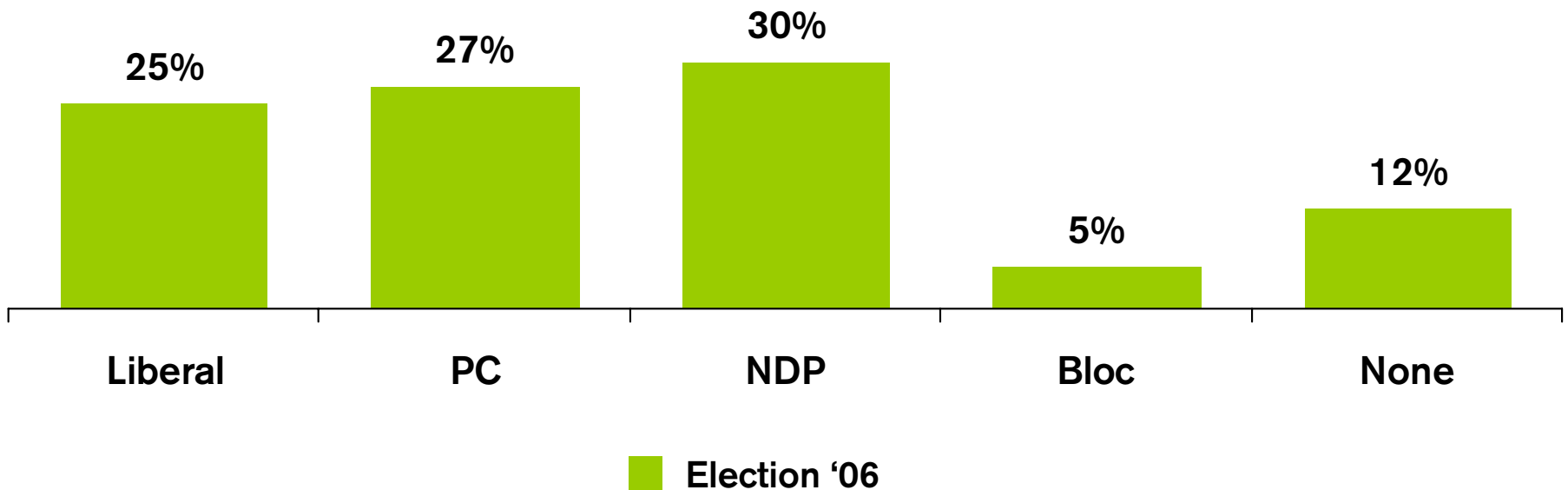
Survey Dates

| Survey Wave | Start Date | End Date | Sample Size | Margin of Error (+/- %, 19 times out of 20) |
|--------------------------------------|-------------------|-------------------|-------------|---|
| 1 st Wave | December 2, 2005 | December 12, 2005 | N = 4808 | +/- 1.41% |
| 2 nd Wave | December 13, 2005 | December 19, 2005 | N = 4725 | +/- 1.43% |
| 3 rd Wave | December 20, 2005 | December 26, 2005 | N = 5156 | +/- 1.36% |
| 4 th Wave | December 27, 2005 | January 2, 2006 | N = 4838 | +/- 1.41% |
| 5 th Wave | January 3, 2006 | January 9, 2006 | N = 4990 | +/- 1.39% |
| 6 th Wave | January 10, 2006 | January 16, 2006 | N = 4936 | +/- 1.39% |
| 7 th Wave | January 18, 2006 | January 22, 2006 | N = 4701 | +/- 1.43% |
| 8 th Wave | January 26, 2006 | January 31, 2006 | N = 5019 | +/- 1.38% |
| Canada This Month (CTM), February | February 17, 2006 | February 25, 2006 | N = 4189 | +/- 1.51% |
| March CTM | March 22, 2006 | March 29, 2006 | N = 3063 | +/- 1.77% |
| April CTM | April 20, 2006 | April 27, 2006 | N = 2916 | +/- 1.81% |
| May CTM | May 17, 2006 | May 25, 2006 | N = 3600 | +/- 1.63% |

Private Health Care: No longer the third rail

- In 2000 and 2004, private health care was a key arrow in the Liberal quiver.
- In 2006, no longer on the radar screen of Conservative fears

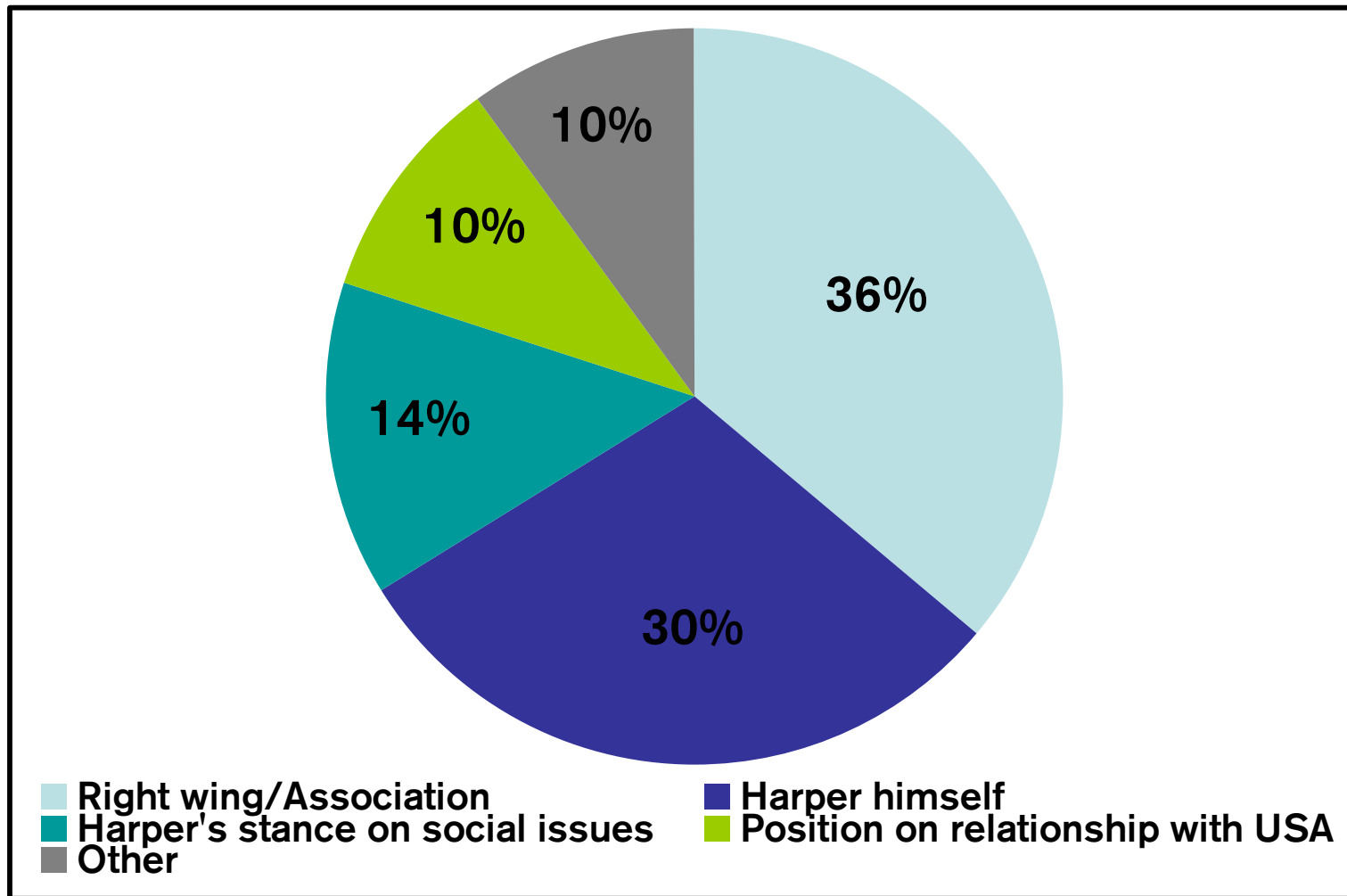
Party best on Health ... no clear leader



Note: 'All of them/Don't know/Refused' not shown

Wave 7, Election Study: Jan. 18-22, 2006.

Why Harper is scary: Health not on the radar screen



Wave 8, Election Study: Jan. 26-31, 2006.

Expectations of the New Government: Just as many expected health to be better as worse

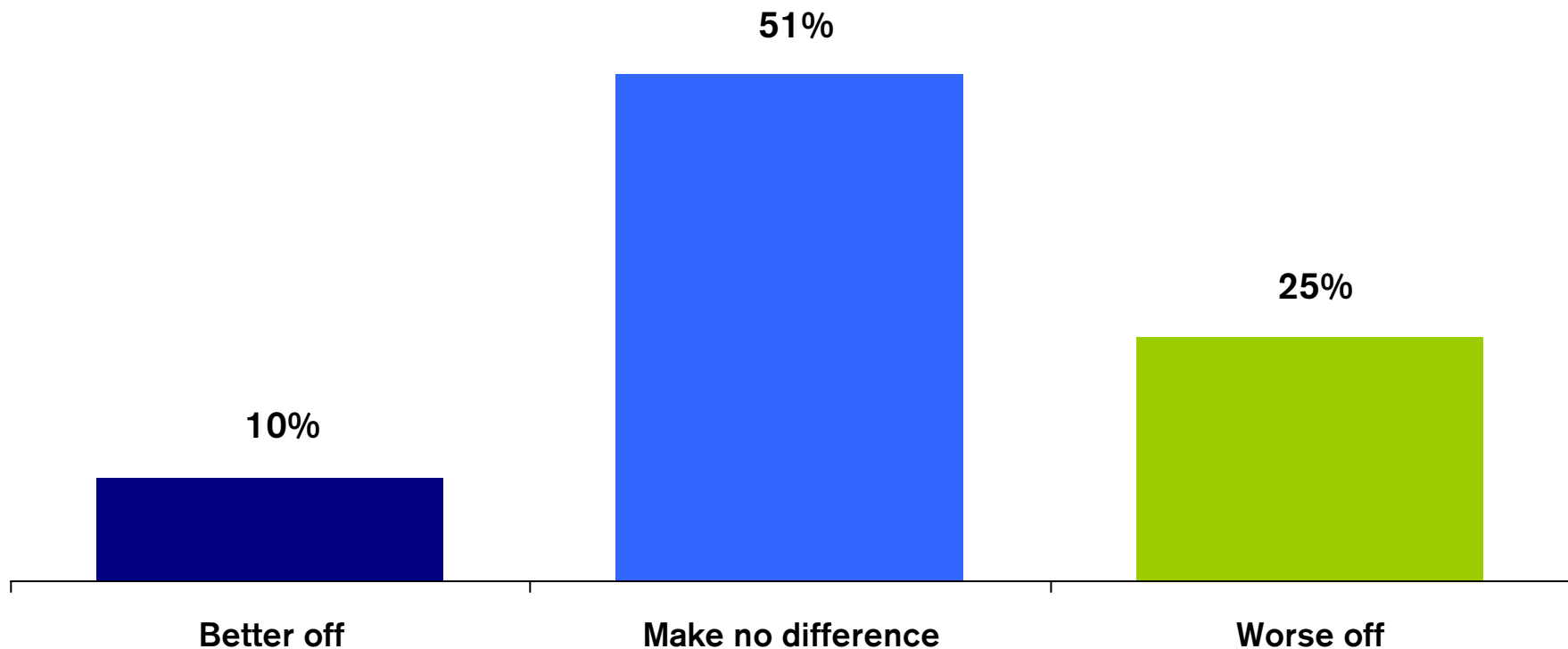
| | Better | No difference | Worse | Net |
|--|--------|---------------|-------|-----|
| Ethics in government | 58% | 36% | 6% | +52 |
| Canada US relations | 65% | 20% | 15% | +50 |
| Canada's military | 63% | 23% | 14% | +49 |
| Crime | 49% | 39% | 12% | +37 |
| Cutting taxes | 51% | 32% | 17% | +34 |
| National Unity | 37% | 34% | 29% | +8 |
| Responding to my province's needs | 36% | 36% | 28% | +8 |
| Creating jobs | 24% | 58% | 19% | +5 |
| Health | 30% | 39% | 31% | -1 |
| Post secondary education | 20% | 54% | 26% | -6 |
| Child care | 32% | 29% | 40% | -8 |
| Balancing the budget | 24% | 40% | 36% | -12 |
| Aboriginal Issues | 15% | 50% | 36% | -21 |
| Environment | 17% | 31% | 52% | -35 |
| Same-sex marriage | 15% | 23% | 62% | -47 |

Wave 8, Election Study: Jan. 26-31, 2006.

Half believe federal budget will make no difference to health care system

Q

Do you think the budget will leave the Canadian health care system better off, worse off, or will it make no difference?

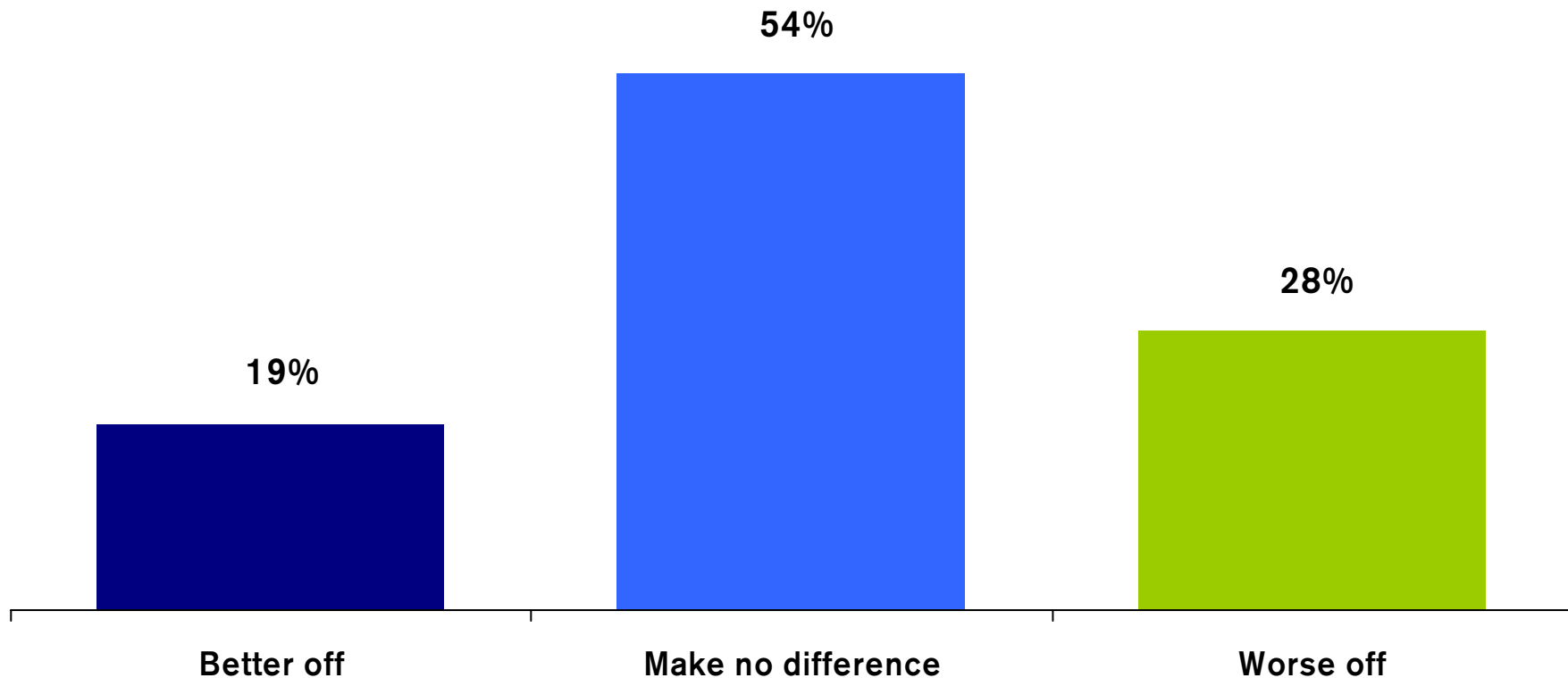


Canada This Month, May 2006

Feds no different that the provinces

Q

Do you think the budget will leave the [Province] health care system better off, worse off, or will it make no difference?

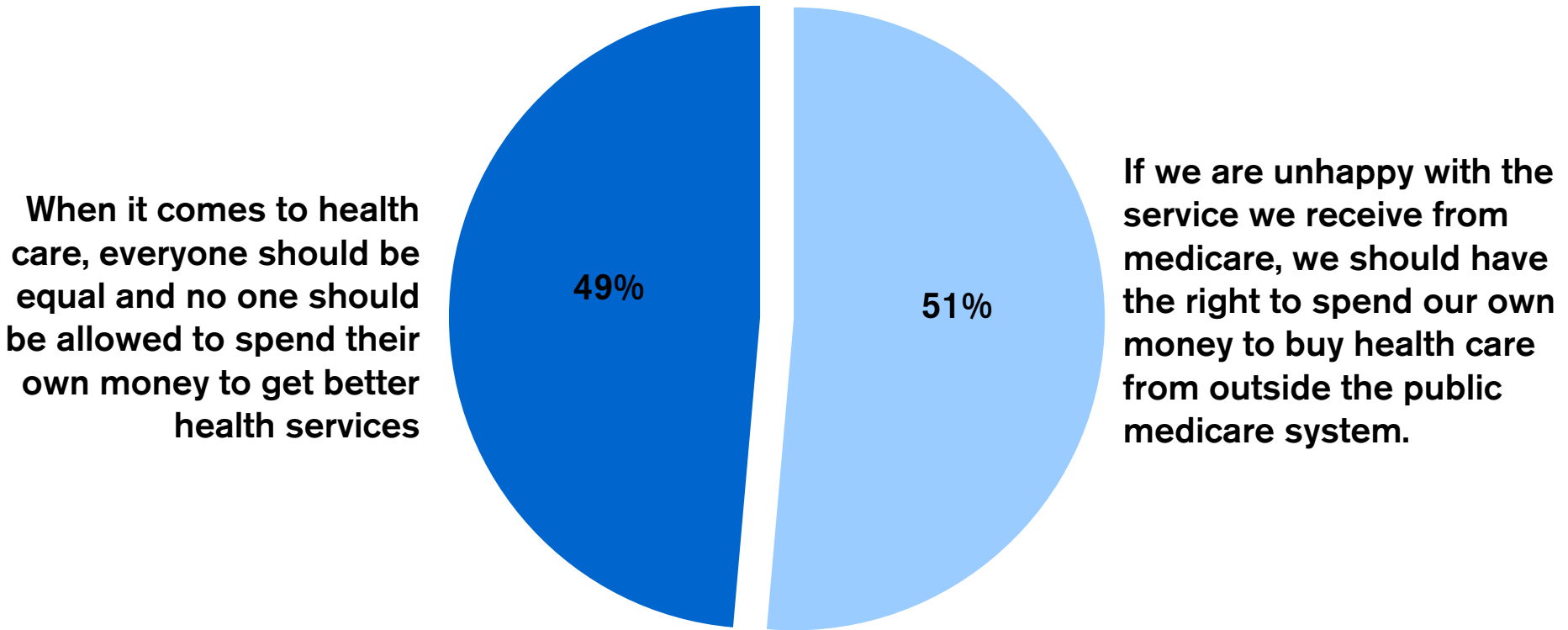


Canada this Month, April 2006

The new politics of health care

Canadians split on using personal money to buy health services

Which view is closest to your own?



Wave 8, Election Study: Jan. 26-31, 2006.

Ontarians least open to spending own money to buy health care outside of public system

Which view is closest to your own?

| | BC | AB | MB/SK | ON | QC | Atlantic |
|--|-----|-----|-------|-----|-----|----------|
| When it comes to health care, everyone should be equal and no one should be allowed to spend their own money to get better health services | 44% | 46% | 44% | 55% | 45% | 49% |
| If we are unhappy with the service we receive from medicare, we should have the right to spend our own money to buy health care from outside the public medicare system. | 56% | 53% | 56% | 46% | 55% | 51% |

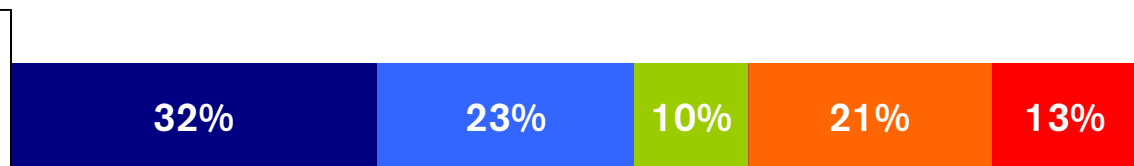


Wave 8, Election Study: Jan. 26-31, 2006.

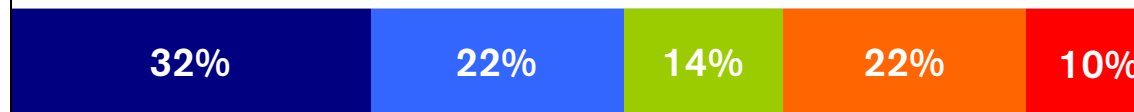
Canadians tend to oppose private delivery if they have to pay, open if government pays ¹⁴

For each of the following statements, I'd like you to tell me if you strongly agree, somewhat agree, somewhat disagree or strongly disagree?

It would be wrong to allow a separate, privately funded health care system in Canada because it would allow a two-tier health care system where the rich get better care than the rest.



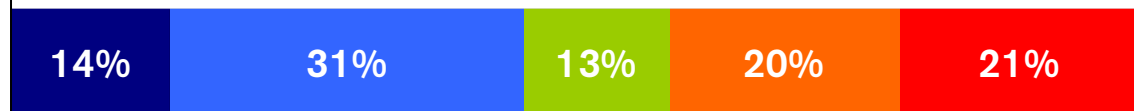
It is wrong to allow companies to make a profit providing publicly funded health care services.



I don't care whether I go to a non-profit or a for-profit hospital, so long as the government pays the bill.



A separate, privately funded health care system would be a good way to take pressure off our publicly funded Medicare system.



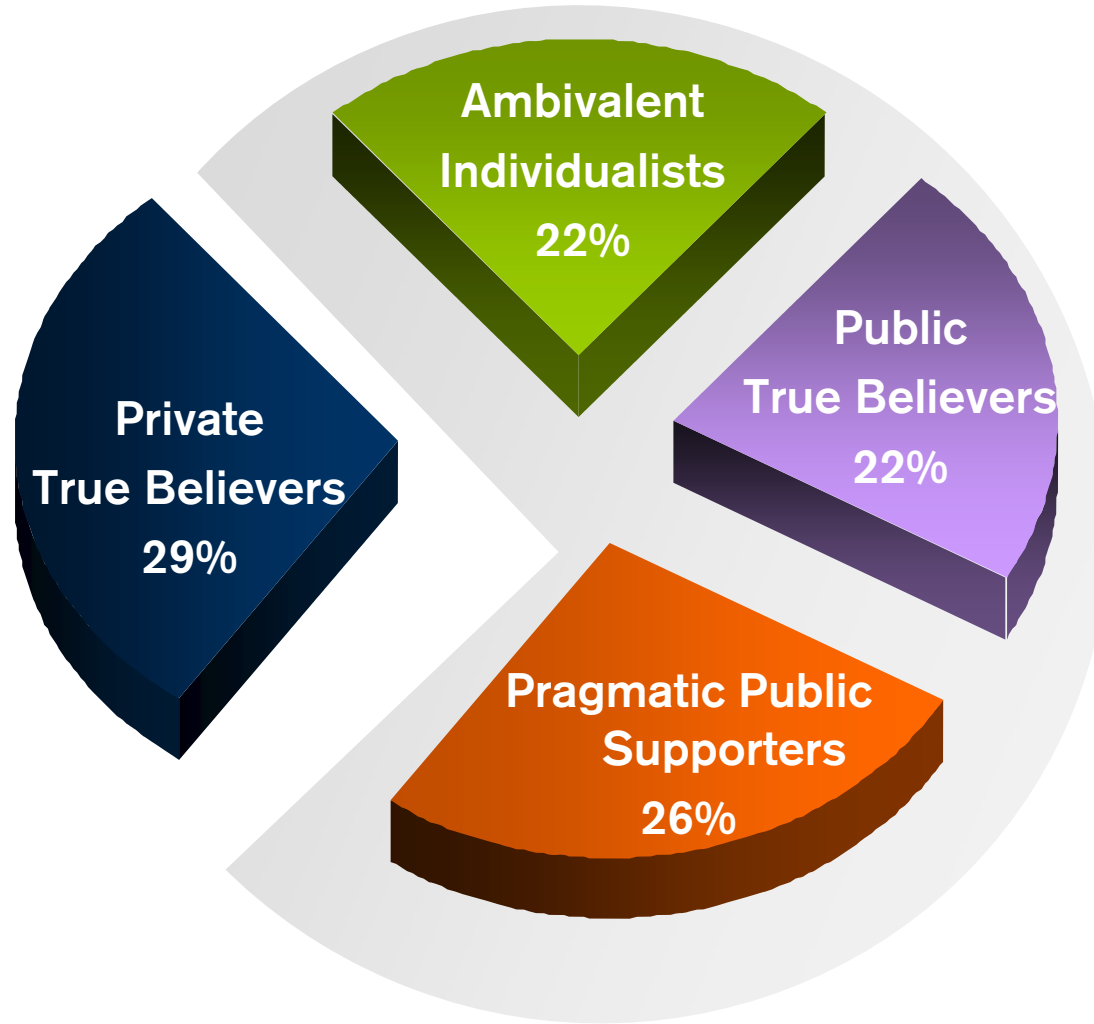
Strongly agree Somewhat agree
Neither Somewhat disagree
Strongly disagree



Wave 8, Election Study: Jan. 26-31, 2006.



Canadians more open to talk about private health care



Wave 8, Election Study: Jan. 26-31, 2006.

Clusters defined by attitudes

| % Agree | Public True Believers | Pragmatic Public Supporters | Ambivalent Egalitarians | Private True Believers |
|--|------------------------------|------------------------------------|--------------------------------|-------------------------------|
| Have the right to spend own money | -- | -- | 100% | 100% |
| Don't care so long as government pays | -- | 78% | 50% | 73% |
| Good way to relieve pressure off public system | 3% | 19% | 62% | 89% |
| Wrong because it would allow a two-tier health care system | 98% | 85% | 42% | 5% |
| Wrong to make a profit providing health care | 94% | 63% | 73% | 3% |

Wave 8, Election Study: Jan. 26-31, 2006.

Clusters defined by demographics

| | Public True Believers | Pragmatic Public Supporters | Ambivalent Individualists | Private True Believers | Average |
|------------------------|-----------------------|-----------------------------|---------------------------|------------------------|---------|
| Gender (% Male) | 40% | 42% | 44% | 63% | 48% |
| Region (% PQ) | 22% | 26% | 32% | 24% | 26% |
| Age (% 65+) | 14% | 13% | 15% | 20% | 15% |
| Union Member | 40% | 36% | 34% | 28% | 34% |
| Hard to make ends meet | 45% | 45% | 34% | 28% | 37% |



Count seats, not votes



Ontario key stumbling block for private sector advocates AND Conservative majority

| | BC | AB | MB/SK | ON | QC | Atlantic |
|-----------------------------|-----|-----|-------|-----|-----|----------|
| Public True Believers | 19% | 25% | 20% | 26% | 19% | 23% |
| Pragmatic Public Supporters | 25% | 22% | 24% | 29% | 26% | 26% |
| Ambivalent Individualists | 22% | 18% | 17% | 18% | 28% | 31% |
| Private True Believers | 34% | 35% | 39% | 27% | 27% | 21% |



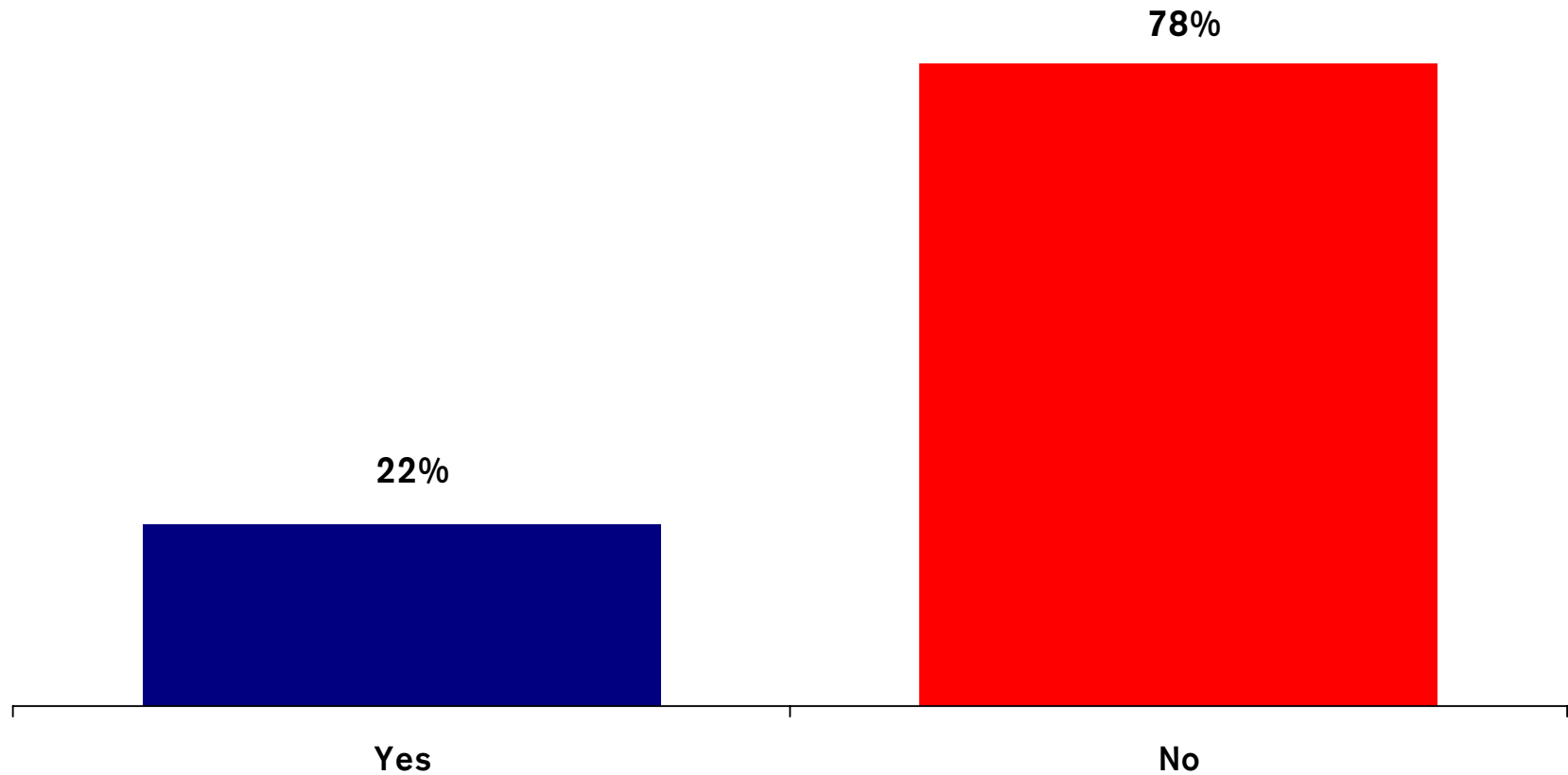
Wave 8, Election Study: Jan. 26-31, 2006.

Emerging willingness to pay for insured services



One-in-five already have access to private health care in Canada

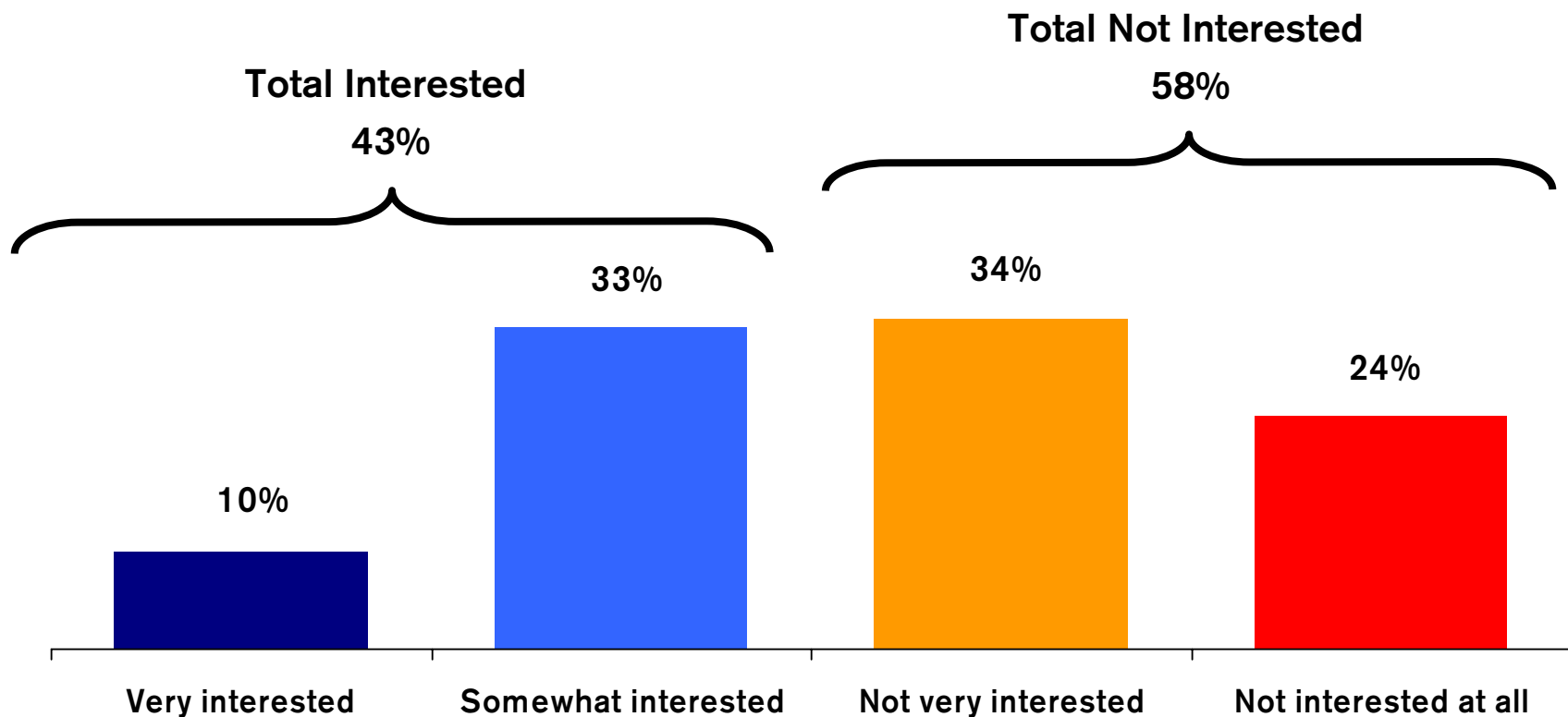
Q Do you currently have any health insurance that allows you to access private health care in Canada or abroad if you or a family member are seriously ill and have to wait for care in Canada?



Canada this Month, March 2006

Two-fifths interested in access to private health care

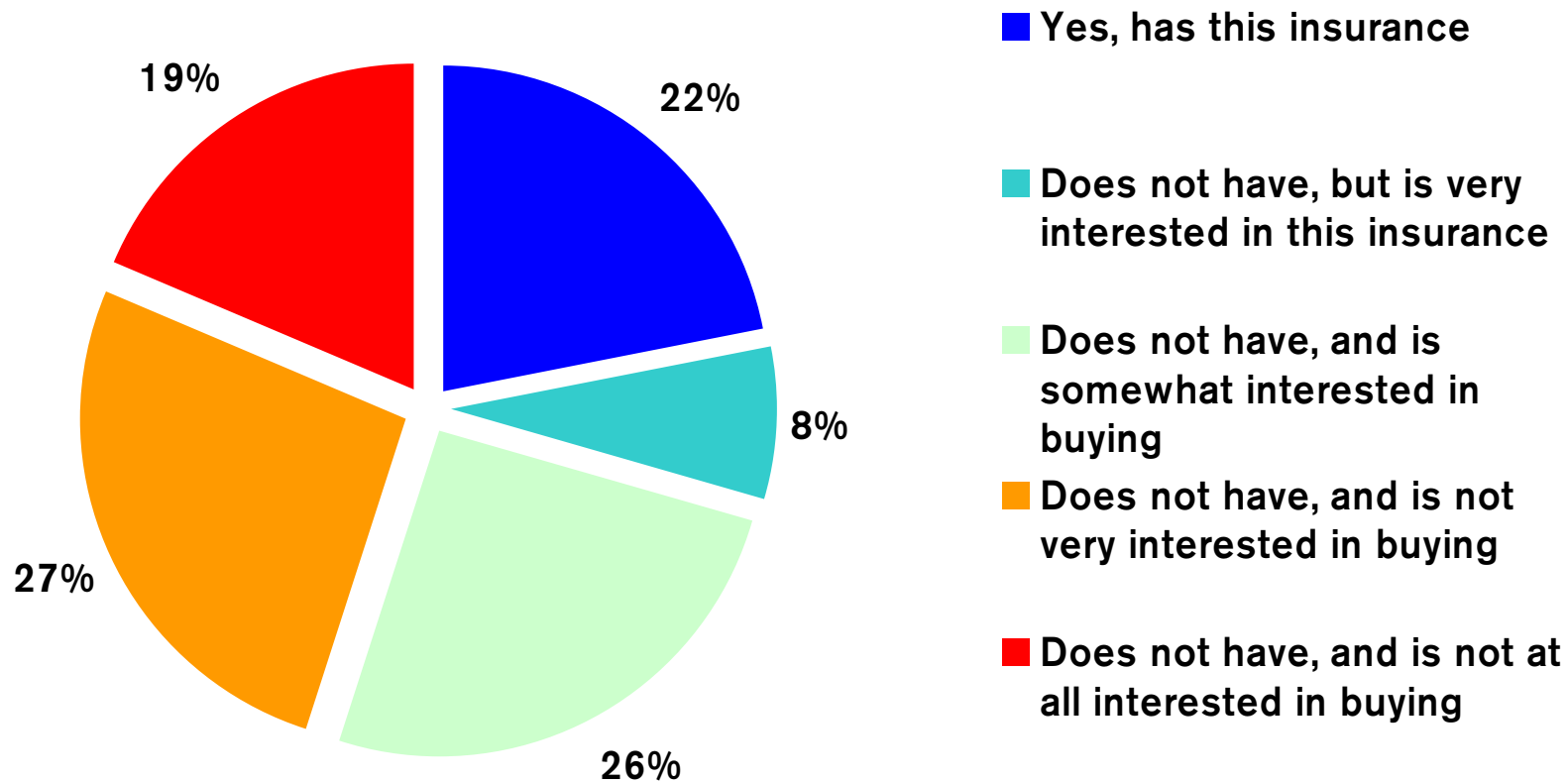
Q How interested would you be in buying insurance that allows you to access private health care in Canada or abroad if you or a family member are seriously ill and have to wait for care in Canada? (Base: Those who do not currently have access to private health care N=2,394)



Canada this Month, March 2006

Slightly more than half have or are interested in insurance that allows access to private care

Q Do you currently have any health insurance that allows you to access private health care in Canada or abroad if you or a family member are seriously ill and have to wait for care in Canada? (If No, then: How interested would you be in buying insurance that allows you to access private health care in Canada or abroad if you or a family member are seriously ill and have to wait for care in Canada?)



Canada this Month, March 2006

What it means for medical clinics



Slightly more favour private clinics than oppose them



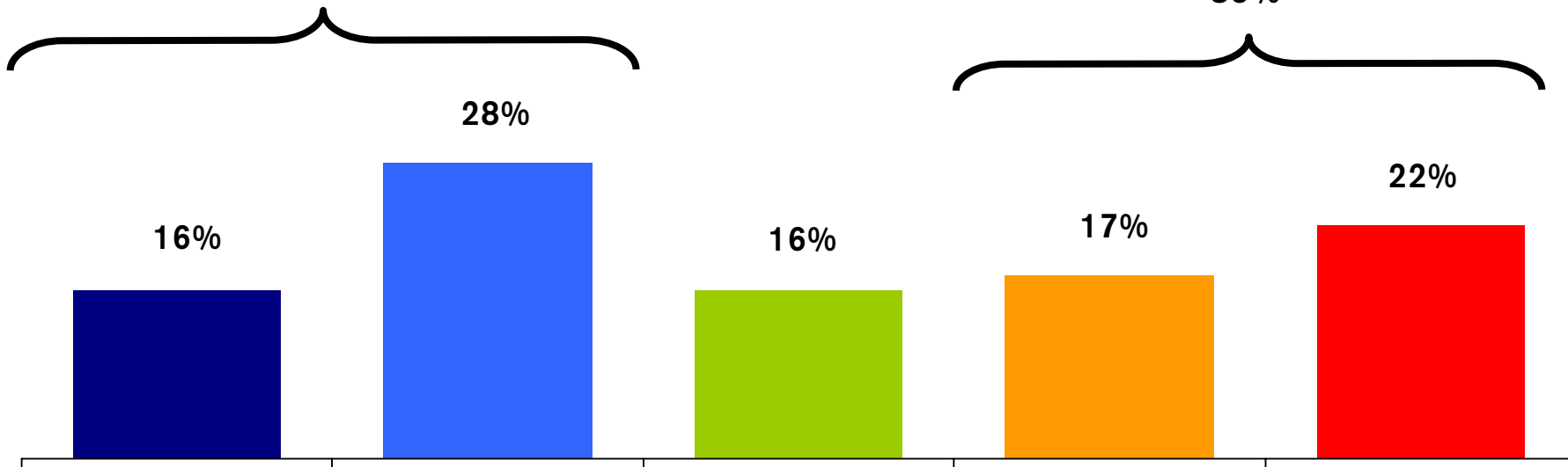
Do you support or oppose the general idea of allowing private medical clinics in your province? And do you feel strongly or just somewhat strongly about that?

Total Support

44%

Total Oppose

39%



Strongly support

Somewhat support

Neither

Somewhat oppose

Strongly oppose

Neither support/oppose

Note: Don't know / Refused (1%) not shown



Canada this Month, March 2006



Support for government improving on public health care very strong

For each of the following statements, I'd like you to tell me if you strongly agree, somewhat agree, somewhat disagree or strongly disagree?

Government should focus on making the public health care system better so no one feels any need to pay for private health care.



Private health clinics are a useful safety valve to take pressure off the public system



Private health clinics are a good way to give Canadians more choice and control over their own health care



It's wrong to allow some Canadians to buy better health care than other Canadians.



Government should make private health clinics illegal



■ Strongly agree ■ Somewhat agree
■ Neither ■ Somewhat disagree
■ Strongly disagree



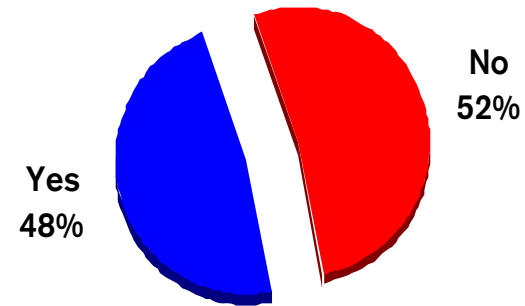
Wave 8, Election Study: Jan. 26-31, 2006.

Private and public supporters draw on public debate

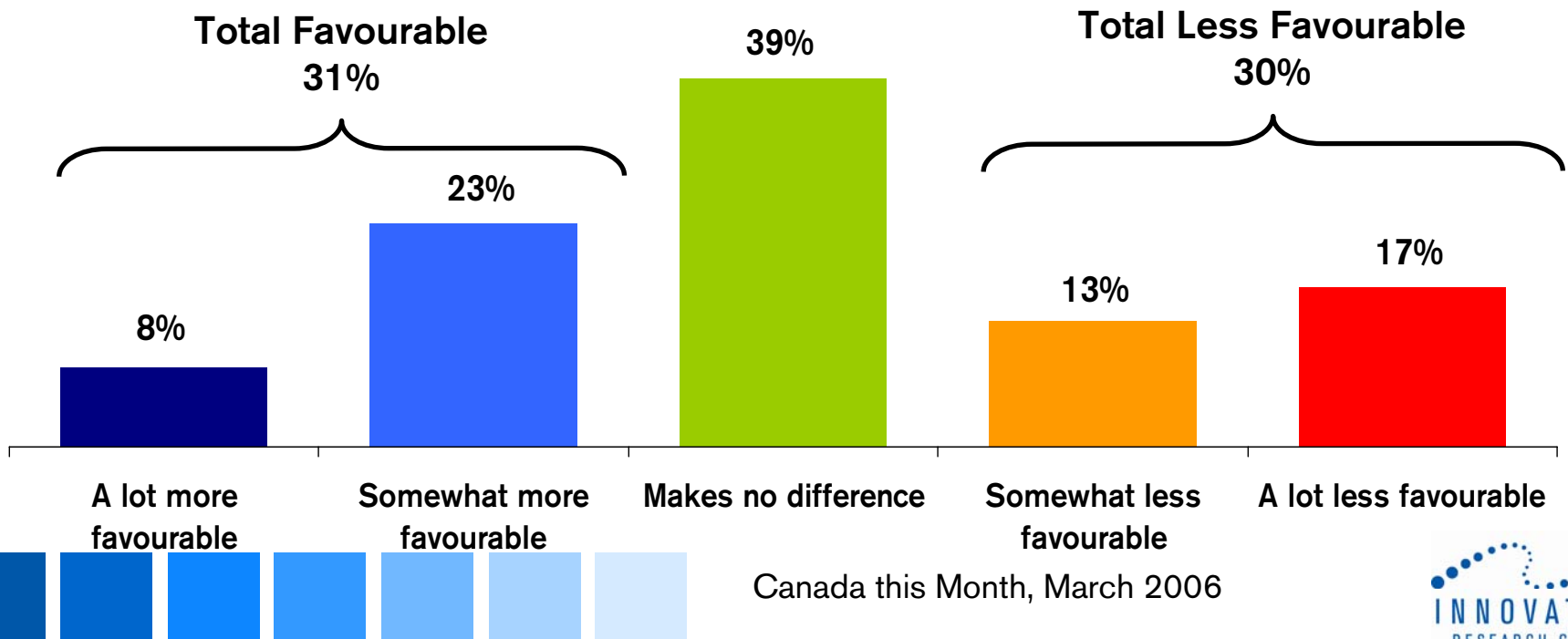


Canadians remain split after hearing about private ²⁸ health care clinics

Q Have you read, seen or heard anything recently about the opening of private health care clinics in your province?



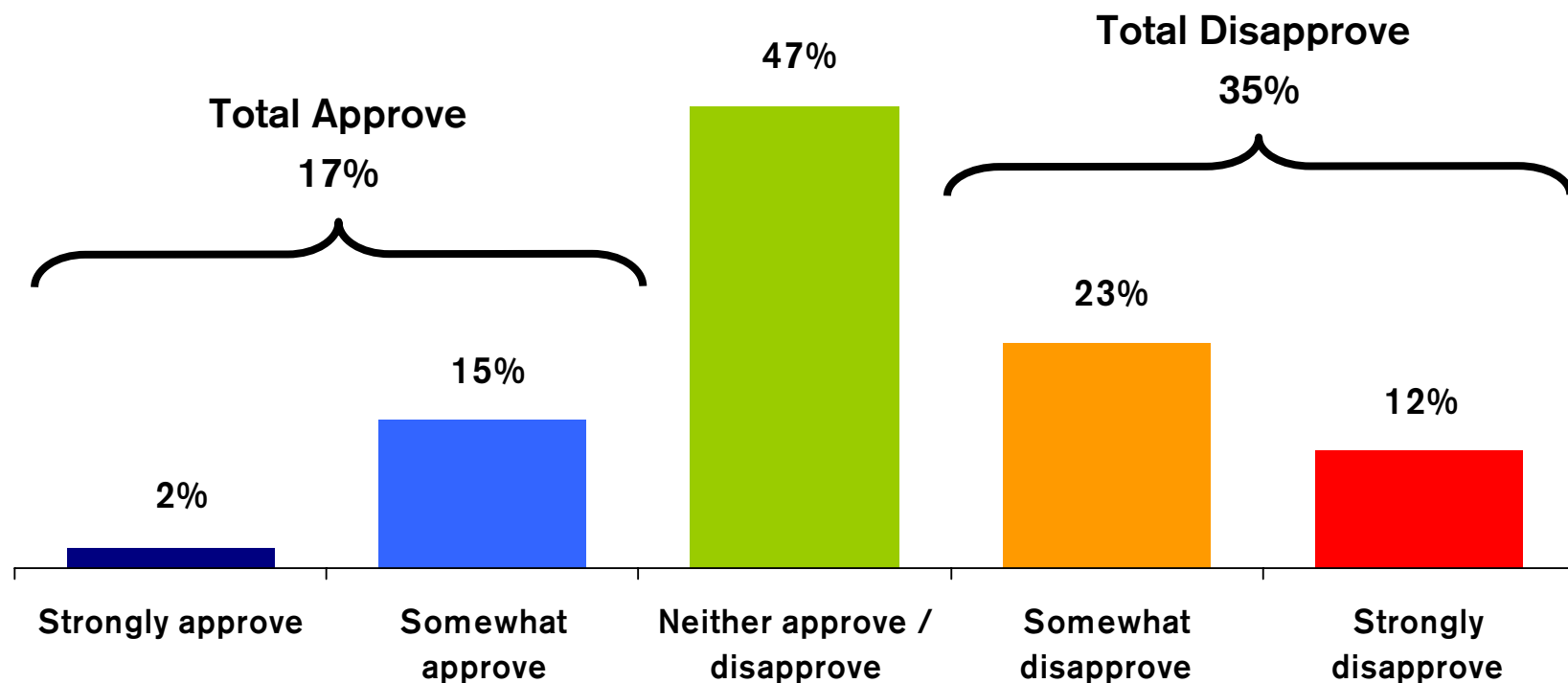
Q Did what you read, saw or heard leave you feeling a lot more favourable, somewhat more favourable, somewhat less favourable or a lot less favourable towards private health care clinics? (N=1,452)



One-third disapproves of federal government's handling of private clinics issue

Q

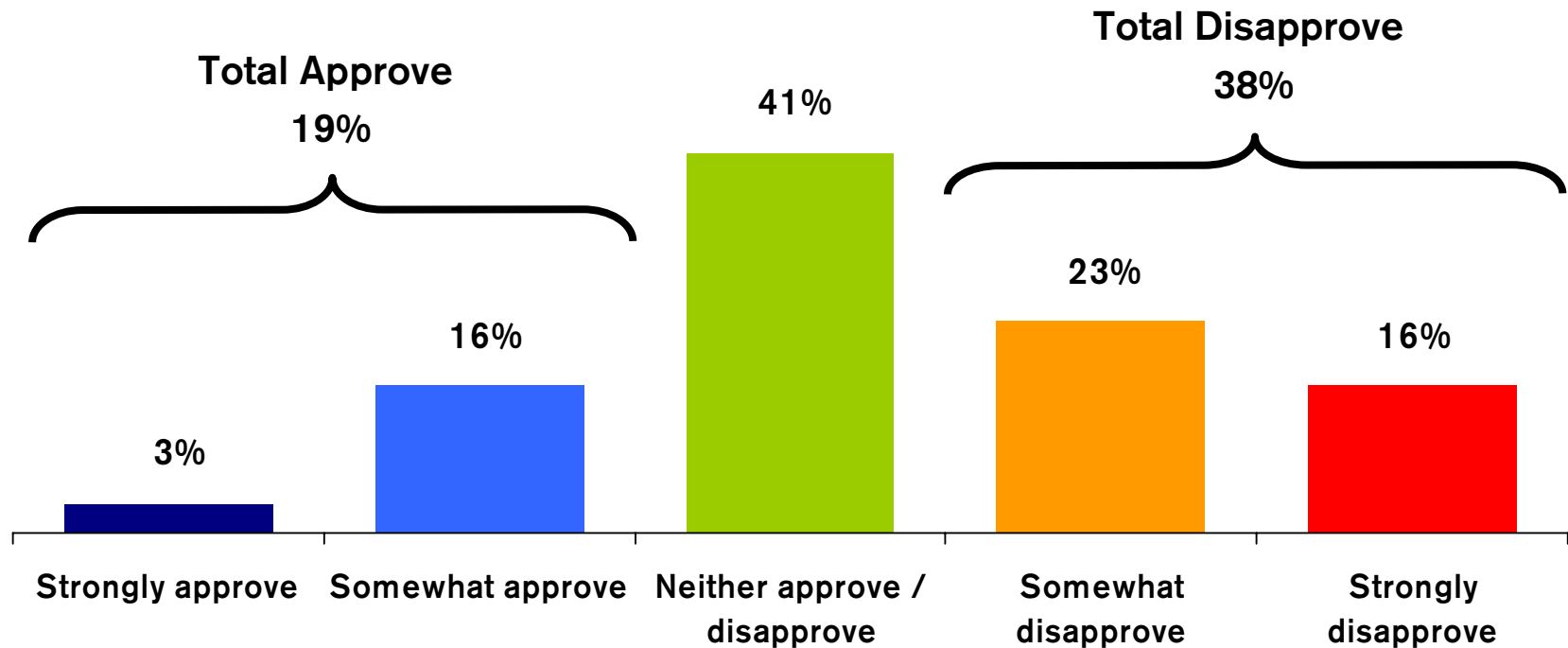
Do you approve or disapprove of the way the federal government is handling the issue of private health care clinics? And do you feel strongly or just somewhat strongly about that?



Canada this Month, March 2006

Two-fifths disapprove of provincial government's handling of private clinics issue

Q Do you approve or disapprove of the way your provincial government is handling the issue of private health care clinics? And do you feel strongly or just somewhat strongly about that?



Canada this Month, March 2006

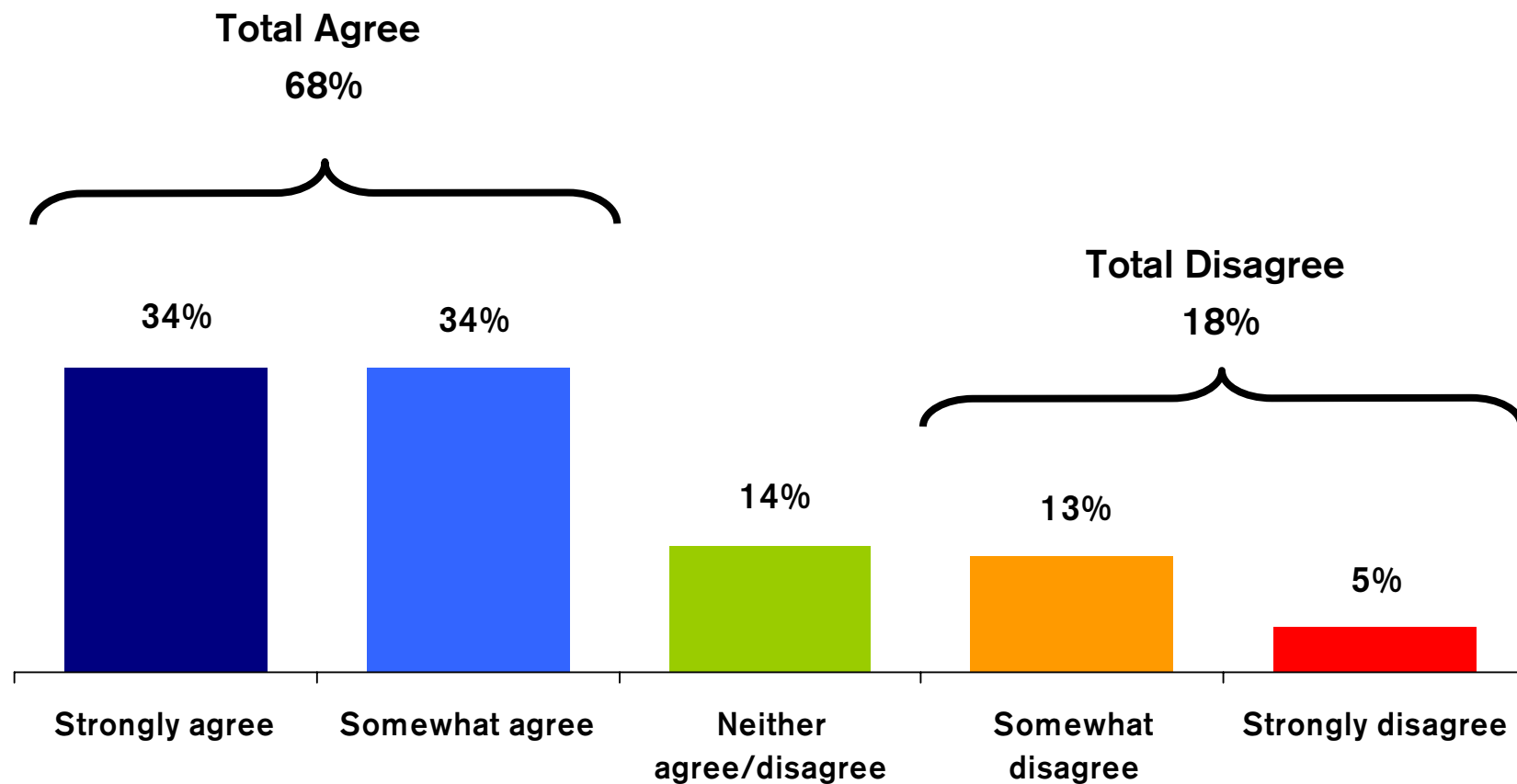
Dark cloud on the horizon: Limits to physician choice



Two-thirds worry doctors will abandon public system for private system

Q

I worry that if we allow a parallel private system, the best doctors will chose to work in the private system and not the public system.



Canada this Month, March 2006

Conclusions

- Privates advocates can take comfort in growing willingness to consider private options.
 - The right to spend your own money when government fails is key to private acceptability.
 - Remember that Canadians feel competing loyalties between equal access and right to spend money. Pragmatism also a complicating factor.
- Public advocates can take comfort in enduring support of a strong majority for equal access to care.
 - The public challenge to Medicare advocate is simple – make the system work so they won't want to spend money on a quality service they can get for free.
 - Public advocates need to pump up their volume in public debate to increase pressure on government.

Thank you

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