

# AWAITING ROMANOW: PRIORITIES FOR HEALTHCARE SPENDING

*Top Priorities For Healthcare are Waiting Lists for MRIs/CAT-Scans (63%), Homecare (49%), Primary Healthcare Services (44%), and Prevention Services (42%) According to Canadians*



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*Top Priorities For Healthcare are Waiting Lists for MRIs/CAT-Scans (63%), Homecare (49%), Primary Healthcare Services (44%), and Prevention Services (42%) According to Canadians*

**Toronto, ONTARIO (Sunday, November 24<sup>th</sup>, 2002)** – On the eve of the release of the Romanow Commission Report on the future of the Canadian healthcare system, a new Ipsos-Reid/CTV/Globe and Mail poll released today indicates that according to six in ten (63%) Canadians reducing waiting lists for diagnostic services like MRIs and CAT-Scans should be a top priority for more healthcare spending, followed by a new national homecare program (49%), investing in new more efficient methods for providing primary healthcare services (44%), investing in prevention services to make Canadians in general healthier (42%), creating a new national pharmacare program (33%), money for nurses (31%), and money for doctors (18%).

When asked to choose which of these areas should be the single top spending priority, the ranking remains in almost identical order – reduced waiting lists (27%), a homecare program (15%), prevention services (15%), more efficient methods for primary healthcare (13%), a pharmacare program (7%), more money for nurses (5%), and finally more money for doctors (4%).

*These are the findings of an Ipsos-Reid/CTV/Globe and Mail poll conducted between November 20<sup>th</sup> and November 22<sup>nd</sup>, 2002. The poll is based on a randomly selected sample of 1,002 adult Canadians.*

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*With a sample of this size, the results are considered accurate to within  $\pm 3.1$  percentage points, 19 times out of 20, of what they would have been had the entire adult Canadian population been polled. The margin of error will be larger within regions and for other sub-groupings of the survey population. These data were statistically weighted to ensure the sample's regional and age/sex composition reflects that of the actual Canadian population according to the 2001 Census data.*

When asked how much of a spending priority a selection of services should be, two-thirds (63%) of Canadians believe reducing waiting lists for diagnostic services like MRIs and CAT-Scans should be a top priority for more healthcare spending. This is followed by a new national homecare program (49%), investing in new more efficient methods for providing primary healthcare services (44%), investing in prevention services to make Canadians in general healthier (42%), creating a new national pharmacare program (33%), money for nurses (31%), and money for doctors (18%) as areas that should be a top priority for healthcare spending.

- Women are more likely than men to indicate that reducing waiting lists (66% versus 61% of men), a home care program (52% versus 45% of men) and more money for doctors (21% versus 15% of men) should be a top spending priority for healthcare.
- Reducing waiting lists is seen as a top priority by a higher proportion of middle aged (66%) and older (65%) Canadians than by younger (59%) Canadians.
- The view of a national homecare program as a top priority is strongest in Atlantic Canadians (58%), followed by Ontario (52%), Quebec (47%), British Columbia (44%), Alberta (43%), and Saskatchewan/Manitoba (40%). This view is also stronger among older (60%) and middle aged (50%) Canadians than among younger (36%) Canadians.

- More efficient delivery of primary healthcare is seen as a top spending priority by those in Atlantic Canada (59%) followed by Ontario (47%), British Columbia (44%), Alberta (40%), Quebec (39%) and Saskatchewan/Manitoba (32%). As well, this view is stronger among older (48%) and middle aged (46%) Canadians than their younger (37%) counterparts.
- Preventative health services as top priority is stronger among older (47%) Canadians compared to middle aged (41%) and younger (38%) Canadians.
- Atlantic Canadians (41%) are more likely than their counterparts in Quebec (27%) or Alberta (27%) to believe a new national pharmacare program is a top spending priority in healthcare. This view is shared by more Canadians in lower income households (44%) than those in middle (34%) or upper (25%) income households.
- Atlantic Canadians (43%) are also more likely than those in Quebec (28%), British Columbia (28%), Saskatchewan/Manitoba (24%) or Alberta (22%) to indicate that more money for nurses should be a top healthcare priority. Older (37%) Canadians are more likely than their middle aged (27%) counterparts to share this view. Canadians in lower income households (38%) are more likely than their counterparts in upper income households (28%) to express this view.
- As for more money for doctors, the highest level of support for this as a top priority is found among Atlantic Canadians (29%), followed by those in Ontario (21%), Saskatchewan/Manitoba (18%), British Columbia (16%), Quebec (14%) and Alberta (12%). Older (22%) Canadians are also more likely to view this as a top spending priority compared to middle aged (16%) or younger (16%) Canadians. This view is also more likely held by those in lower (22%) and middle (20%) income households compared to upper income households (13%).



Asked to choose which specific area should be the single top spending priority, the ranking remains almost identical – reduced waiting lists (27%), a national homecare program (15%), prevention services (15%), more efficient methods for primary healthcare (13%), a national pharmacare program (7%), more money for nurses (5%), and finally more money for doctors (4%).

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*For more information on this news release, please contact:*

*Darrell Bricker  
President and COO  
Ipsos-Reid Public Affairs  
(416) 324-2900*

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