8th Annual National Report Card on Health Care

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Introduction

This is the eighth 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 mental health care, ranging from their understanding of what mental health care is and how it impacts the economy to questions around the diagnosis of mental illness, funding for mental health care and personal experience with mental illness.

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 mental health.

Telephone Research

Between June 10 and June 12, 2008, Ipsos-Reid surveyed 1,002 Canadian adults. This sample provides ±3.2 percentage point margin of error for the overall national findings at a 95% confidence interval. Slight weights by region, age and gender were applied to the data to ensure 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 (%)
2008	1,002	± 3.2
2007	1,001	± 3.2
2006	1,007	± 3.2
2005	1,006	± 3.2
2004	1,057	± 3.1
2003	1,055	± 3.1



Online Research

Between June 13 and June 25, 2008, Ipsos Reid surveyed 2,024 Canadian adults online. A sample of this size is associated with a ± 2.2 percentage point margin of error. Respondents were randomly selected from the Ipsos Household Panel. Slight weights by region, age and gender were applied to the data to ensure the sample accurately reflects the population according to Census data.

Key Findings

Overall Views of Canada's Health Care System

- Two in three Canadians (66%) grade the overall quality of the health care services they receive in the A (23%) or B (43%) range, marking an improvement of fours points since 2007 (62%) and a return to the level measured in 2006 (67%).
- Similarly, over two in three (68%) Canadians grade their most recent experience with the health care system in their community as either an A (32%) or a B (36%), virtually unchanged since 2007 (69%).
- A majority of Canadians (58%) grade the choice of health services in their community as either an A (21%) or B (37%).
- Nearly three in four (73%) grade cooperation among health professionals in their community, including doctors, pharmacists and nurses, as either an A (28%) or a B (45%). This represents a four-point improvement over 2007 (69%).
- Fifty-four percent grade health care providers and their associations as either A (14%) or B (40%) for their performance in dealing with health care in Canada.
- Grades for access to several tested health services have remained largely stable since 2007.
 - The proportion who grade access to a family doctor as an A remains significantly lower than when first measured in 2003 (29% in 2008 vs. 35% in 2003).
 - Slight improvement was measured in the proportion giving A grades to access to emergency room services (to 20% from 18% in 2007), access to health care services for seniors (to 19% from 17% in 2007) and access to health care services on evenings and weekends (to 13% from 11% 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, 26 percent of those with a family physician grade the overall quality of available health care services A grade, as compared to only 9 percent of those without a family physician.
- The disparity between those who have and those who do not have a family physician appears to have widened between 2008 and 2007. In 2008, those with a family physician were 17 points more likely than those without a family physician to give an A grade to the overall quality of the health care system (26% vs. 9% among those without a family physician) while in 2007 this difference was 11 points (23% vs. 12% with no family physician).



Rating the Performance of Government

- Thirty-four percent of Canadians grade the federal government's performance in dealing with health care as either an A (6%) or a B (28%), largely unchanged from 33 percent in 2006.
- Two in five Canadians (40%) graded their provincial government's performance in dealing with health care as an A (7%) or a B (33%). This marks a five-point improvement over 2007, when 35 percent graded their provincial government's performance as an A or a B, but this level remains lower than 2006 (43%).
- In all regions, with the exception of Alberta, provincial governments received more A grades in dealing with health care than the federal government. Most notably Quebec, where 35 percent give the provincial government A or B grades compared to 25 percent giving the federal government A or B grades.

Perspectives on the Future of Health Care and the Constraints the System Faces

- The public remains divided as to whether health care services will get better or worse
 over the next two or three years with 49 percent saying health care services will get
 better and 48 percent saying they will get worse.
- Four in five Canadians (81%) say health care in Canada is centered around financial constraints, while an additional nine percent say health care is centered on the needs of health care workers. Just one in ten (10%) say health care in Canada is centered on the needs of the patients themselves.

Views on Mental Health Care in Canada

Canadians were asked a series of questions about mental health care, ranging from their understanding of what mental health care is and how it impacts the country to questions around the diagnosis of mental illness, funding for mental health care and personal experience with mental illness.

Our research finds that personal experience with mental illness is fairly prevalent. For example, 15 percent of Canadians report that they have been diagnosed by a doctor as being clinically depressed, while significant numbers report experience with many issues associated with mental illness, such as stress (36%) and feelings of helplessness or worthlessness (23%).

Is mental illness an important issue? A majority of Canadians (59%) expect the number of people with mental illnesses to increase over the next 10 years. Furthermore, three in ten believe that mental illness is hurting Canada's economy.

Our results suggest that, in the view of most Canadians, mental health is not given the priority it ought to have in the health care system. A majority of Canadians (60%) agree that the diagnosis and treatment of mental illness are under funded, while a greater majority agrees that funding for mental health issues ought to be on par with funding for physical health issues, like cancer and diabetes (72%).



Stigma Associated with Mental Illness

A traditional barrier to the effective diagnosis and treatment of mental illness has been the stigma associated with it. Several findings in this research suggest that this stigma persists among a significant proportion of the public. In particular:

- Just half of Canadians would tell friends or co-workers that they have a family member suffering from a mental illness (50%), as compared to wide majorities who would discuss diagnoses of cancer (72%) or diabetes (68%) in the family.
- Of those who indicated that they have experienced at least three of the nine tested issues associated with mental illness in the past year, one in five (21%) say they did not seek any help.
- While Canadians are more apt to disagree than to agree that they would feel fearful being around someone with a serious mental illness, one in four Canadians say they would be fearful (50% disagree vs. 27% agree).
- Nearly half of Canadians (46%) think people use the term mental illness as an excuse for bad behaviour.
- While the majority of Canadians (58%) indicate that they would socialize with a friend who has a mental illness, the remaining two in five Canadians (42%) are less certain they would do so.
- While the majority (58%) say they would socialize with a friend who has a mental illness, the proportion who say they would socialize with a friend who has an alcohol (32%) or drug addiction (26%) is significantly lower suggesting that the stigma of addiction is significantly greater than that associated with mental illness.
- The majority of Canadians say they would be unlikely to hire a person with a mental illness as a lawyer (58%), child care worker (58%), financial advisor (58%) or family doctor (61%).
- The majority of Canadians (55%) say they would be unlikely to enter into a spousal relationship with someone who has a mental illness.

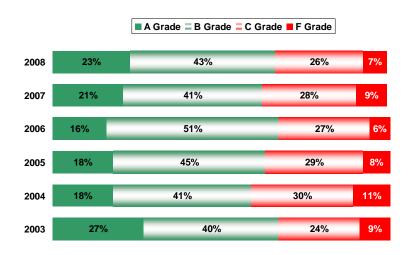


Detailed Findings

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 (66%) grade overall quality in the A (23%) or B (43%) range, marking an improvement of fours points since 2007 (62%) and a return to the level measured in 2006 (67%).

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:

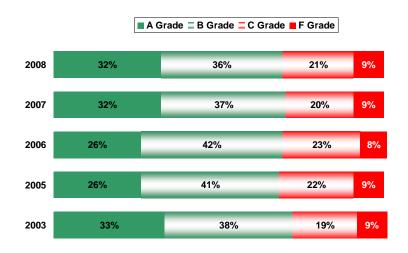
- Residents of Ontario (28%) and Saskatchewan/Manitoba (28%) compared to Atlantic Canada (19%) and Quebec (19%); and,
- Those with less than a high-school education (32%).



Over 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 (32%) or a B (36%), virtually unchanged since 2007 (69%).

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:

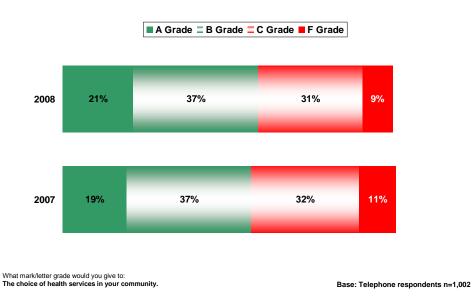
- Residents of Saskatchewan and Manitoba (40%) and Atlantic Canada (39%) compared to Quebec (26%);
- Those 18-34 years of age (38%) and 55 years and older (36%) compared to those 35-54 years (25%); and,
- Those with a University degree (38%).



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

A majority of Canadians (58%) grade the choice of health services in their community as either an A (21%) or B (37%). This marks a three-point increase in the level 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



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

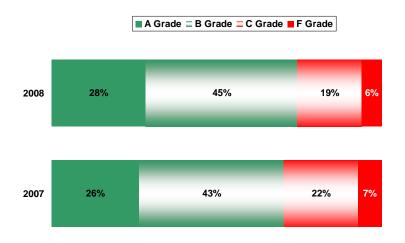
- Residents of Ontario (26%) compared to residents of Quebec (16%); and,
- Urban respondents (39%) compared to rural respondents (29%).



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

Nearly three in four (73%) grade cooperation among health professionals in their community, including doctors, pharmacists and nurses, as either an A (28%) or a B (45%). This represents a four-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:

Base: Telephone respondents n=1,002
The level of cooperation between various health professionals like doctors, pharmacists and nurses in your community.

Those more likely to grade cooperation among health care professionals as an A include:

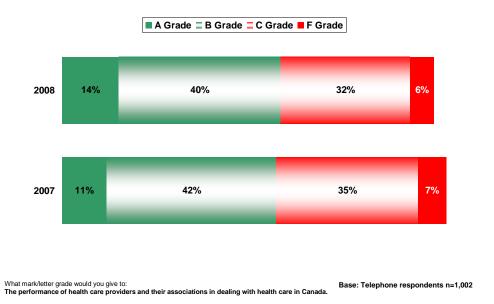
- Residents of Alberta (39%) and Ontario (34%) compared to Quebec (19%); and,
- Those with less than a high school education (36%) compared to those with a university degree (19%).



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

Fifty-four percent grade health care providers and their associations as either A (14%) or B (40%) for their performance in dealing with health care in Canada. The proportion who given an A grade to health care providers and their associations improved by three points since the question was first asked in 2007 (from 11% to 14% in 2008).

Just over Half Give Health Care Providers and Their Associations "A" or "B" Grades



Those more likely to give health care providers and their associations an A grade include:

- Residents of Ontario (19%) and Atlantic Canada (17%) as compared to Quebec (7%);
 and.
- Those 18-34 years of age (19%) compared to those 55 years and older (11%).



Grading Access to Health Care Services

Canadians were asked to grade access to ten health care services as an A, B, C or F, where an A is the highest grade and an F is a failing grade. Five out of the ten services tested received an A grade more often than an F grade while four out of the ten services more often received an F grade than and A grade.

Those services where an A grade was more often received include:

- Access to a family doctor (29% A grades vs. 18% F grades);
- Access to walk-in clinics (25% A grades vs. 16% F grades);
- Access to health care services for children (23% A grades vs. 7% F grades);
- Access to emergency room services (20% A grades vs. 18% F grades);
- Access to health care services for seniors (19% A grades vs. 9% F grades).

Those services where an F grade was more often received include:

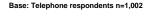
- Access to modern diagnostic equipment (21% F grades vs. 14% A grades);
- Access to health care services on evenings and weekends (20% F grades vs. 13% A grades);
- Access to medical specialists (18% F grades vs. 13% A grades);
- Access to mental health care services (14% F grades vs. 11% A grades).

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

Access to Health Care Services

	A Grade	B Grade	C Grade	F Grade
Access to a family doctor in your community	29%	27%	24%	18%
Access to walk in clinics in your community	25%	35%	22%	16%
Access to health care services for children in your community	23%	38%	19%	7%
Access to emergency room services	20%	33%	27%	18%
Access to health care services for seniors in your community	19%	39%	23%	9%
Access to modern diagnostic equipment such as MRIs and CT scans	14%	30%	29%	21%
Access to medical specialists	13%	31%	34%	18%
Access to health care services on evenings and weekends in your community	13%	30%	34%	20%
Access to home health care service	13%	32%	25%	13%
Access to mental health care services in your community	11%	30%	27%	14%

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





No Improvement in A Grades for Access to Services

A grades for access to several tested health services have remained largely stable since 2007. The proportion who grade access to a family doctor as an A remains significantly lower than when first measured in 2003 (29% in 2008 vs. 35% in 2003). Slight improvement was measured in the proportion giving A grades to access to emergency room services (to 20% from 18% in 2007), access to health care services for seniors (to 19% from 17% in 2007) and access to health care services on evenings and weekends (to 13% from 11% in 2007).

Tracking Access to Health Care Services

% "A" Letter Grade

	2008	2007	2006	2005	2003
Access to a family doctor in your community	29%	29%	30%	32%	35%
Access to walk in clinics in your community	25%	26%	29%	26%	28%
Access to health care services for children in your community	23%	22%	-	-	-
Access to emergency room services	20%	18%	20%	19%	23%
Access to health care services for seniors in your community	19%	17%	-	-	-
Access to modern diagnostic equipment such as MRIs and CT scans	14%	13%	14%	11%	14%
Access to medical specialists	13%	14%	13%	13%	16%
Access to health care services on evenings and weekends in your community	13%	11%	15%	12%	14%
Access to home health care service	13%	13%	-	-	-
Access to mental health care services in your community	11%	9%	-	-	-

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

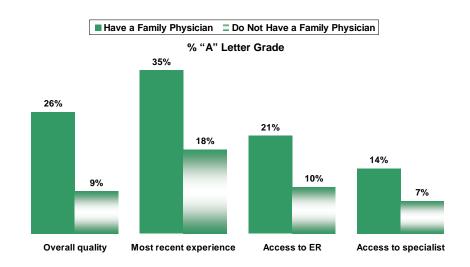
Base: Telephone respondents n=1,002



Those with a Family Physician Are More Positive

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, 26 percent of those with a family physician grade the overall quality of available health care services A grade, as compared to only 9 percent of those without a family physician.

Those 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)

The disparity between those who have and those who do not have a family physician appears to have widened between 2008 and 2007. In 2008, those with a family physician were 17 points more likely than those without a family physician to give an A grade to the overall quality of the health care system (26% vs. 9% among those without a family physician) while in 2007 this difference was 11 points (23% vs. 12% with no family physician). The difference between those with and those without a family physician also grew wider with respect to the most recent experience with health care (17 points in 2008 vs. 11 points in 2007), access to emergency room services (11 points in 2008 vs. 7 points in 2007) and access to medical specialists (7 points in 2008 vs. 5 points in 2007).

Tracking Percentage Point Difference in A Grades Between Those who Have and Those Who Do Not Have a Family Physician

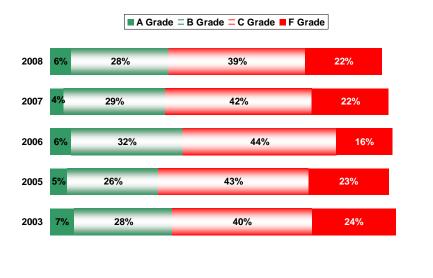
	2008	2007
Overall quality of health care	17 points (26% vs. 9%)	11 points (23% vs. 12%)
Most recent experience with	17 points	13 points
health care	(35% vs. 18%)	(34% vs. 21%)
Access to ER	11 points	7 points
	(21% vs. 10%)	(19% vs. 12%)
Access to specialist	7 points	5 points
	(14% vs. 7%)	(14% vs. 9%)



Rating Federal Government's Performance

Canadians were asked to grade the performance of the federal government in dealing with health care in Canada. Thirty-four percent grade the federal government's performance either A (6%) or B (28%), largely unchanged from 33 percent in 2006.

Federal Performance on Health Care Unchanged with About One in Three 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:

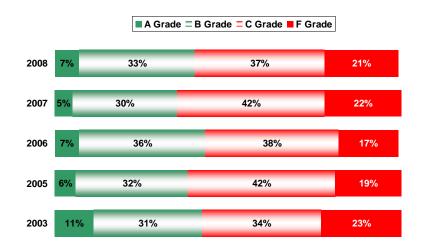
- Respondents 18-34 years (43%) compared to those 25-34 years (29%) and those 55 years and older (34%); and,
- Men (39%) compared to women (30%).



Rating Provincial Government's Performance

Two in five Canadians (40%) graded their provincial government's performance in dealing with health care as an A (7%) or a B (33%). This marks a five-point improvement over 2007, when 35 percent graded their provincial government's performance as an A or a B, but remains lower than 2006 (43%).

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



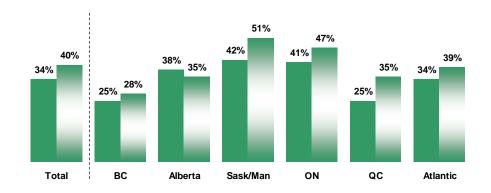
Provincial Governments Receive More "A" and "B" Grades than Federal Government Everywhere – Except Alberta

In all regions, with the exception of Alberta, provincial governments received more A grades in dealing with health care than the federal government. Most notably Quebec, where 35 percent give the provincial government A or B grades compared to 25 percent giving the federal government A or B grades. The difference is nearly as great in Saskatchewan and Manitoba, where 51 percent gave their provincial governments A or B grades compared to 42 percent giving the federal government A or B grades. Alberta was the only region where perceptions of federal performance slightly outpace perceptions of provincial government performance (with 38% grading the federal government as an A or B compared to 35% for the provincial government).

Provincial Governments Receive More "A" and "B" Grades than Federal Government Everywhere – Except Alberta

% "A" & "B" Grade

■ Federal Government = Provincial Government



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

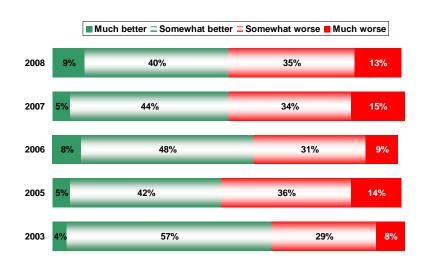
Base: All respondents n=1,002



Views Remain Divided on Whether Health Care Will Improve

The public remains divided as to whether health care services will get better or worse over the next two or three years with 49 percent saying health care services will get better and 48 percent saying they will get worse. This result is largely unchanged from 2007 (49% better vs. 49% worse). The proportion who expects health care services to get *much* worse continues to outweigh the proportion who says they will get much better (13% much worse vs. 9% much better). However, the proportion saying health care services will get *much* better has improved since 2007 (9% vs. 5% in 2007).

Views Remain Divided on Whether Health Care Will Improve Over Next Two or Three Years



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

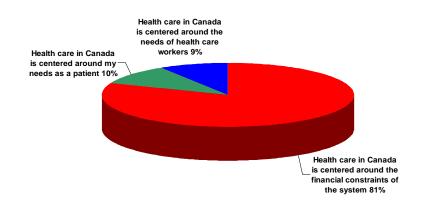
- Residents of Ontario (53%) and Quebec (51%) compared to residents of British Columbia (41%) and Alberta (41%);
- Those 18-34 years of age (63%) compared to those 35-54 years (43%) and those 55 years and older (45%); and,
- Those with less than a high school education (53%) compared to those with a university degrees (44%).



Four in Five Say Health Care in Canada Centered Around Financial Constraints

Four in five Canadians (81%) say health care in Canada is centered around financial constraints, while an additional nine percent say health care is centered around the needs of health care workers. Just one in ten (10%) say health care in Canada is centered around the needs of the patients themselves.

Four in Five Say Health Care in Canada Centered Around Financial Constraints; One in Ten Say Centered Around Patient Need



Which of the following best describes how you perceive the health care system in Canada?

Base: Online respondents n=2,024



Views on Mental Health Care in Canada

Canadians were asked a series of questions about mental health care, ranging from their understanding of what mental health care is and how it impacts the economy to questions around the diagnosis of mental illness, funding for mental health care and personal experience with mental illness.

Our research finds that personal experience with mental illness is fairly prevalent. For example, 15 percent of Canadians report that they have been diagnosed by a doctor as being clinically depressed, while significant numbers report experience with many issues associated with mental illness, such as stress (36%) and feelings of helplessness or worthlessness (23%).

Is mental illness an important issue? A majority of Canadians (59%) expect the number of people with mental illnesses to increase over the next 10 years. Furthermore, three in ten believe that mental illness is hurting Canada's economy.

Our results suggest that, in the view of most Canadians, mental health is not given the priority it ought to have in the health care system. A majority of Canadians (60%) believe that the diagnosis and treatment of mental illness are under funded, while a greater majority suggests that funding for mental health issues ought to be on par with funding for physical health issues, like cancer and diabetes (72%).

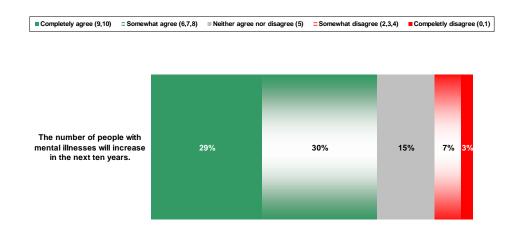


Three in Five Think Number of People with Mental Illness Will Increase in Next 10 Years

Canadians were asked on a scale of zero to 10, where zero means completely disagree and 10 means completely agree, whether they agree or disagree that the number of people with mental illness will increase or decrease in the next ten years.

On this basis about three in five Canadians agree that the number of people with mental illness will increase in the next 10 years (59% rating as 6-10 on the scale), including 29 percent who completely agree (rating as 9 or 10 on the scale). Just one in ten disagrees (10% rating as 0-4 on the scale).

Three in Five Think Number of People with Mental Illness Will Increase in Next 10 Years



Indicate whether you agree or disagree with the following statements using a scale of 0 to 10 where 0 means that you completely disagree and 10 means that you completely agree.

Base: Online respondents n=2,024

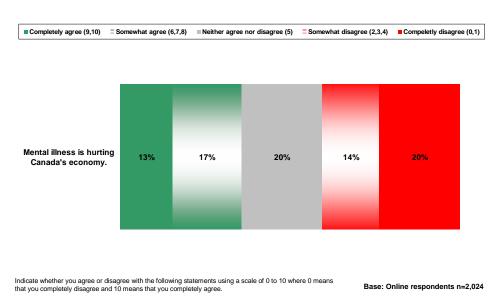


Three in Ten Agree Mental Illness is Hurting Canada's Economy

Canadians were asked on a scale of zero to 10, where zero means completely disagree and 10 means completely agree, whether they agree or disagree that mental illness is hurting Canada's economy.

Canadians are slightly more likely to disagree (34% rating as 0-4 on the scale) than to agree (30% rating as 6-10 on the scale) that mental illness is hurting Canada's economy.

Three in Ten Agree Mental Illness is Hurting Canada's Economy



Residents of Vancouver (24%) are more likely to strongly agree (rating as 9 or 10 on the scale) that mental illness is hurting Canada's economy.



Views on Classifying Conditions as Mental Illnesses

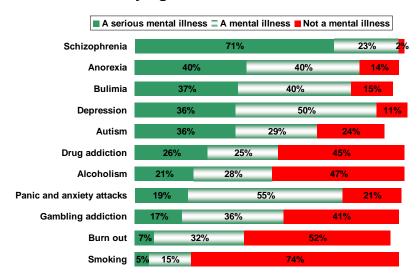
Canadians were asked whether they feel several different conditions should be classified as serious mental illnesses, mental illnesses or not mental illnesses at all. Among the tested conditions, schizophrenia was most often seen as a serious mental illness (71%) with only two percent saying this condition is not a mental illness.

Substantial majorities view anorexia (80%), depression (86%), bulimia (77%), panic and anxiety attacks (74%) and autism (65%) to be either serious mental illnesses or mental illnesses.

Canadians are divided as to whether drug addiction and alcoholism are mental illnesses, with about half saying drug addiction (51%) or alcoholism (49%) are either serious mental illnesses or mental illnesses compared to 45 and 47 percent, respectively, who say these conditions are not mental illnesses. A slight majority (53%) consider a gambling addiction to be either a serious mental illness or a mental illness, while two in five (41%) say gambling addiction is not a mental illness.

Burn out (39%) and smoking (20%) are least often considered to be either serious mental illnesses or mental illnesses.

Views on Classifying Conditions as Mental Illnesses



Indicate whether you feel this item should be categorized as a mental illness, a serious mental illness, or if you feel it is not a mental illness.

Base: Online respondents n=2,024

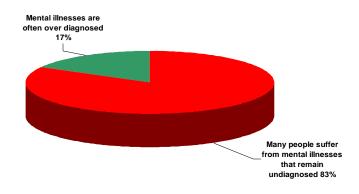
It is interesting to note that younger respondents (18 to 34 years of age) are more likely than older respondents (55 years and older) to consider smoking to be either a mental illness or a serious mental illness (25% compared to 16% respectively).



Four in Five Think Many People Suffer Mental illnesses that Remain Undiagnosed

Asked to choose between two alternative statements, just over four in five Canadians say that many people suffer from mental illnesses that remain undiagnosed (83%), while just fewer than one in five say that mental illnesses are often over diagnosed (17%).

Four in Five Think Many People Suffer Mental Illnesses That Remain Undiagnosed



Which of the following two statements is closest to your own personal view?

Base: Online respondents n=2,024

Those more apt to believe that many people suffer from mental illnesses that remain undiagnosed include:

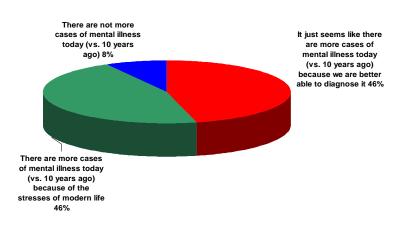
- Residents of British Columbia (88%);
- Those 55 years and older (89%) compared to those 18-34 years (75%); and,
- Women (86%) compared to men (79%).



Views Split on Whether Increase in Mental Illness the Result of Stresses of Modern Life or Better Diagnosis

Asked to choose which of three statements best reflect their views, Canadians are divided between the view that more cases of mental illness are the result of better diagnosis (46%) and the view that more cases are the result of the stresses of modern life (46%). Only eight percent take the view that there are not more cases of mental illness than 10 years ago.

Views Split on Whether Increase in Mental Illness the Result of Stresses of Modern Life or Better Diagnosis



Which of the following two statements is closest to your own personal view?

Base: Online respondents n=2,024

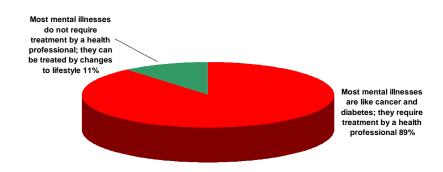
Those with a university degree (52%) are more apt to attribute the increase in mental illness to better diagnosis, while those with less than a high school education (56%) are more apt to attribute the increase to the stresses of modern life.



Four in Five Believe Mental Illness Requires Treatment by Health Professional

Asked to choose between two statements, nearly nine in ten respondents (89%) say mental illnesses are like cancer and diabetes in that they require treatment by a health professional. One in ten (11%) choose the alternate statement, that most mental illnesses do not require treatment by a health professional, but can be treated by lifestyle changes.

Four in Five Believe Mental Illness Requires Treatment by Health Professional



Which of the following two statements is closest to your own personal view?

Base: Online respondents n=2,024

Those more apt to say that most mental illnesses require treatment by a health professional include:

- Residents of Quebec (92%, and particularly Montreal, 95%); and,
- Those 55 years and older (95%) compared to those 18-34 years (80%).



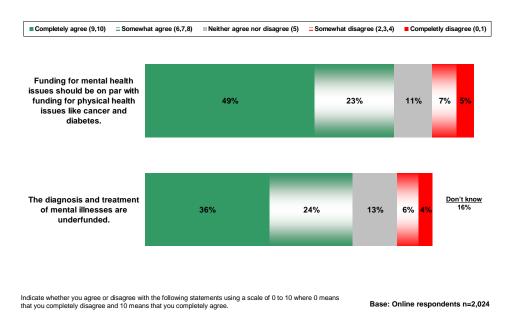
Majority Thinks Funding for Mental Health Should Be on Par with Physical Health Issues

Canadians were asked on a scale of zero to 10, where zero means completely disagree and 10 means completely agree, whether funding for mental health issues should be on par with funding for physical health issues like cancer and diabetes and whether the diagnosis and treatment of mental illnesses are under funded.

On this basis, over seven in ten respondents agree that funding for mental health issues should be on par with funding for physical health issues like cancer and diabetes (72% rating as 6-10 on the scale), while just over one in ten disagree (12% rating as 0-4 on the scale).

Three in five agree that the diagnosis and treatment of mental illnesses are under funded (60%), while one in ten disagrees (10%).

Majority Thinks Funding for Mental Health Should Be on Par with Physical Health Issues



Older respondents (55 years and older), women and lower income respondents (earning less than \$30,000 a year) are more apt to agree that mental health issues should be funded on par with physical illnesses and also that the diagnosis and treatment of mental illnesses are underfunded.

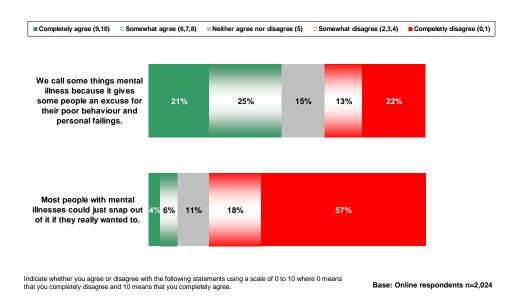


More Agree than Disagree That Mental Illness Used to Excuse Poor Behavior, But Few Think People with Mental Illness Could "Snap Out of It"

Canadians were asked on a scale of zero to 10, where zero means completely disagree and 10 means completely agree, whether some things that are described as mental illness give people an excuse for poor behaviour and personal failings and also whether most people with mental illnesses could just snap out of it if they wanted.

More Canadians agree (46% rating as 6-10 on the scale) than disagree (35% rating as 0-4 on the scale) that some things described as mental illness offer an excuse for poor behaviour and personal failings. Just one in ten Canadians agrees (10%) that most people with mental illness could just snap out of it if they wanted. Three in four disagree with this notion (75%), including 57 percent who completely disagree (rating as 0 or 1 on the scale).

More Agree than Disagree That Mental Illness Used to Excuse Poor Behaviour, But Few Think People with Mental Illness Could "Snap Out of It"



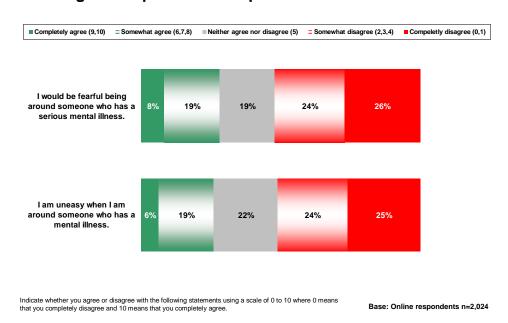


Feelings on Exposure to People with Mental Illness

Canadians were asked on a scale of zero to 10, where zero means completely disagree and 10 means completely agree, whether they would be fearful being around someone who has a serious mental illness and whether they are uneasy when they are around someone with a mental illness.

By two to one Canadians are more apt to disagree than agree that they would be fearful being around someone with a serious mental illness (50% disagree, rating 0-4 on the scale, compared to 27% agree, rating as 6-10 on the scale) or that they would feel uneasy when around someone who has a mental illness (25% agree compared to 49% disagree).

Feelings on Exposure to People with Mental Illness





Likelihood of Interacting with People Who Have a Mental Illness or Addiction

Canadians were asked on a scale of zero to 10, where zero means not at all likely and 10 means very likely, how likely they would be to interact in any of several ways with individuals who have a serious mental illness, a mental illness, clinical depression, alcohol addiction or drug addiction.

A majority of respondents say they would socialize with a friend who has a mental illness (58%) or is clinically depressed (56%), while just fewer than half (49%) would socialize with a friend who had a serious mental illness. One third of Canadians or fewer say they would be likely to socialize with a friend who has an alcohol (32%) or drug addiction (26%).

While the majority would socialize with a friend who has a mental illness (58%), Canadians are somewhat less apt to say they would socialize with a colleague who is mentally ill (49%). The proportion who would hire a landscaper with a mental illness drops to fewer than one in three (31%), and fewer than one in five say they would enter a spousal relationship with a mentally ill person (16%) or hire a financial advisor (15%), child care worker (14%), lawyer (12%) or have a family doctor (11%) who has a mental illness.

The table below details how likely respondents would be to interact with individuals who have any of the tested forms of mental illness.

Likelihood of Interacting with People Who Have a Mental Illness or an Addiction

% Reporting 6-10 on 10 point scale (likely to take action)

Activity	Mental Illness n=404	Clinically Depressed n=407	Serious Mental Illness n=401	Alcohol Addiction n=403	Drug Addiction n=409
Socialize with a friend who has/is	58%	56%	49%	32%	26%
Socialize with a colleague at work who has/is	49%	43%	35%	21%	21%
Hire a landscaper who has/is	31%	19%	17%	11%	7%
Enter spousal relationship with someone who has/is	16%	11%	10%	4%	2%
Hire financial advisor who has/is	15%	8%	8%	5%	3%
Have someone take care of my children who has/is	14%	8%	10%	4%	2%
Hire a lawyer who has/is	12%	7%	7%	4%	2%
Have a family doctor who has/is	11%	8%	8%	5%	2%

Rate each activity on a scale of 0 to 10 where 0 means you are not at all likely to do this, 5 means you are neither more likely nor less likely to do this and 10 means that you are very likely to do this activity.

Base: Online respondents n=2,024

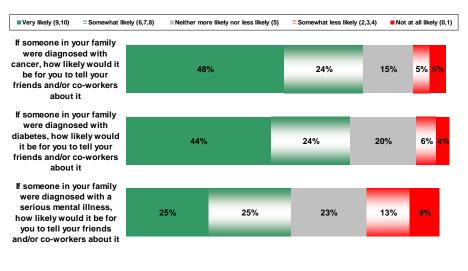


Likelihood of Telling Friends, Co-workers about Cancer, Diabetes or Mental Illness in the Family

Canadians were asked on a scale of zero to 10, where zero means not at all likely and 10 means very likely, how likely they would be to tell friends or co-workers if someone in their family were diagnosed with cancer, diabetes or a mental illness.

Majorities say they would be likely to tell their friends and co-workers about a cancer (72% rating as 6-10 on the scale) or diabetes diagnosis (68%). Fewer, though still half of respondents (50%), say they would be likely to tell friends or co-workers about a family member who was diagnosed with a serious mental illness.

Likelihood of Telling Friends, Co-workers about Cancer Diabetes or Mental Illness in the Family



If someone in your family were diagnosed with diabetes, how likely would it be for you to tell your friends and/or coworkers about it? / If someone in your family were diagnosed with a serious mental illness, how likely would it be for you to tell your friends and/or co-workers about it?

Base: Online respondents n=2,024

Those more likely to tell (rating as 9 or 10 on the scale) friends and co-workers about a family member diagnosed with a serious mental illness include:

- Those 35-54 years of age (29%) or 55 years and older (27%) compared with those 18-34 years of age (19%);
- Women (32%) compared to men (18%); and,
- Those with less than a high school education (31%).



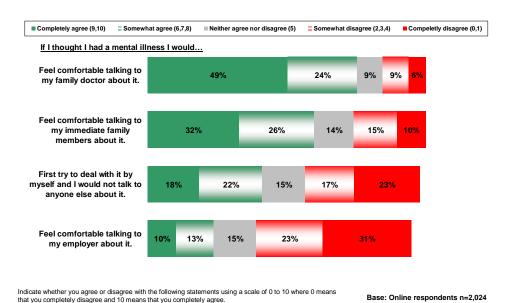
Nearly Three in Four Say They Would Feel Comfortable Talking to Family Doctor about Mental Illness

Canadians were asked on a scale of zero to 10, where zero means completely disagree and 10 means completely agree, whether they would feel comfortable talking to different individuals if they suspected they had a mental illness.

Nearly three in four respondents say they would feel comfortable talking to their family doctor if they suspected they had a mental illness (73% rating as 6-10 on the scale). Just fewer than three in five (58%) say they would feel comfortable talking with immediate family members about it. Fewer than one in four (23%) say they would feel comfortable talking to their employer if they thought they had a mental illness.

Respondents are evenly divided on whether they would deal with their mental illness themselves and not talk to anyone else about it. Two in five agree they would try to deal with it themselves (40% rating 6-10 on the scale), while an equal proportion disagree with this course of action (40% rating as 0-4 on the scale).

Nearly Three in Four Say They Would Feel Comfortable Talking to Family Doctor about Mental Illness



Those more likely to say they would feel very comfortable (rating as 9 or 10 on the scale) talking with their family doctor about a suspected family illness include:

- Those 55 years of age and older (60%) compared to those 35-54 years of age (48%) and those 18-34 years of age (36%); and,
- Women (54%) compared to men (43%).



Personal Experience with Issues Related to Mental Health in the Past Year

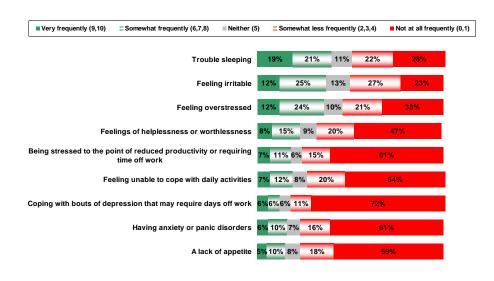
Canadians were asked on a scale of zero to 10, where zero means not at all frequently and 10 means very frequently, how frequently they had experienced each of nine issues related to mental health in the past year.

Among the tested issues, respondents most often say they experienced trouble sleeping (40% rating as 6-10 on the scale), followed by feeling irritable (37%) or overstressed (36%). Just fewer than one in four (23%) say they experienced feelings of helplessness or worthlessness on a frequent basis in the past year, while fewer than one in five report feeling unable to cope with daily activities (19%) or frequently experiencing extreme stress reducing productivity or requiring time off of work (18%).

Sixteen percent report frequently having anxiety or panic disorders, fifteen percent frequently experienced a lack of appetite, and twelve percent frequently coped with bouts of depression requiring days off of work.

One in three respondents (34%) say they experienced three or more of these issues with at least some degree of frequency (rating as six or higher) in the past year.

Personal Experience with Issues Related to Mental Health in Past Year



To what degree, if any, have you experienced any of the following in the last 12 months? Please use a scale of 0 to 10, where 0 means that you have not experienced this at all and 10 means that you have experienced this frequently.

Base: Online respondents n=2,024



Actions Taken as Result of Experience with Mental Health Issues

The 34 percent of respondents who experienced three or more indicators of mental illness in the past year were asked how they dealt with the issues they experienced.

One in five of these respondents say they dealt with the problem on their own, either by dealing with the problem on their own (16%), by ignoring the problem (2%) or a combination of the two (3%).

The remaining 79% of respondents who experienced indicators of mental illness say they talked about it with someone else, most commonly their family doctor (48%), but nearly as often with a spouse or parents (45%) or a friend or other family member (43%). Few said they talked to their employer (12%).

Actions Taken as Result of Experience with Mental Health Issues

