



The Canadian Health Care System: Views and Experiences of Adults with Health Problems

Findings from the Commonwealth Fund 2002 International Health Policy Survey

The Commonwealth Fund 2002 International Health Policy Survey finds that one of four Canadians with health problems believes that the quality of care in their country has deteriorated in the past two years—a higher proportion than found for sicker adults in Australia, New Zealand, the United Kingdom, and the United States. This five-nation survey further found that Canadians with health problems were more concerned than their counterparts in the other countries about access to specialist physicians, with more than half saying it is “very difficult” or “somewhat difficult” to see a specialist when needed.

Canadians with health problems also are at substantial risk for medical or medication errors, a concern repeated by survey respondents in the other four countries. One of four Canadian respondents reported a medical mistake or medication error in the past two years, the majority saying that the error had caused serious health problems.

Many sicker Canadians have encountered care coordination problems—nearly one-quarter received conflicting information from different doctors and one fifth reported duplicate tests. Canadians with health problems also indicated deficiencies in doctor–patient communication. Within the five-nation survey, Canadian rates of errors, coordination of care, and failures in doctor–patient communication often ranked in the middle, neither the worst nor the best.

Sicker Canadians were notably less likely, however, to report going without needed medical or diagnostic care due to costs than their counterparts in Australia, the United States, or New Zealand. In addition, on all cost-related access problems, Canadian rates were significantly lower than those reported in the U.S.

The Commonwealth Fund 2002 International Health Policy Survey consisted of interviews with a sample of adults in each of the five countries who rated their health as fair or poor, who reported having a recent hospitalization or major surgery, or who had a serious illness or injury that required intensive medical care in

the previous two years. These adults are among the highest users of health care, and they are particularly vulnerable to variations in quality of care and to cost and access barriers. Comparative findings from the survey were reported in the May/June 2003 issue of *Health Affairs*.¹

Patient Safety: Medical/Medication Errors

Canadians with health problems are at risk for medical or medication errors, based on patient reports.

- One-quarter (25%) of respondents reported that either a medication error or medical mistake was made in their care in the past two years (Figure 1).

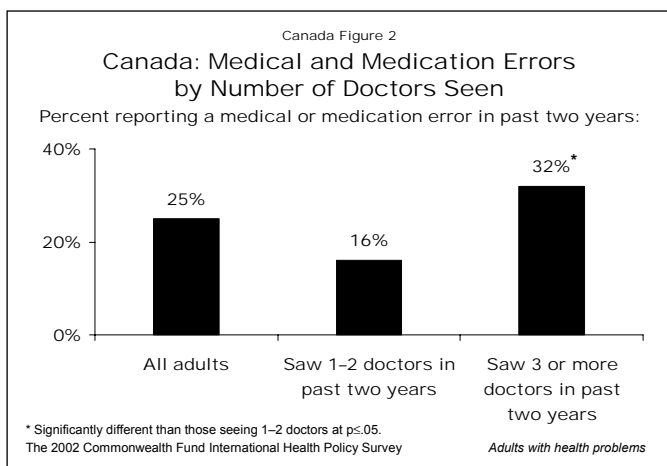
Canada Figure 1
Medication and Medical Errors

Percent in the past two years:	AUS	CAN	NZ	UK	US
Given the wrong medication or wrong dose by a doctor, hospital, or pharmacist	11	11	13	10	12
Believed a medical mistake was made in your treatment or care	19	20	18	13	23
Either error: medication error or medical mistake	23	25	23	18	28

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- Among those who experienced an error, 60 percent said that it caused a serious health problem. Including all respondents surveyed, 15 percent—about one of seven—said the medical error had caused a serious health problem.
- Error rates were significantly higher among people who see three or more doctors than among those who see fewer doctors (32% vs. 16%) (Figure 2).
- Error rates reported by Canadians with health problems were similar to rates reported in three of the four other countries.

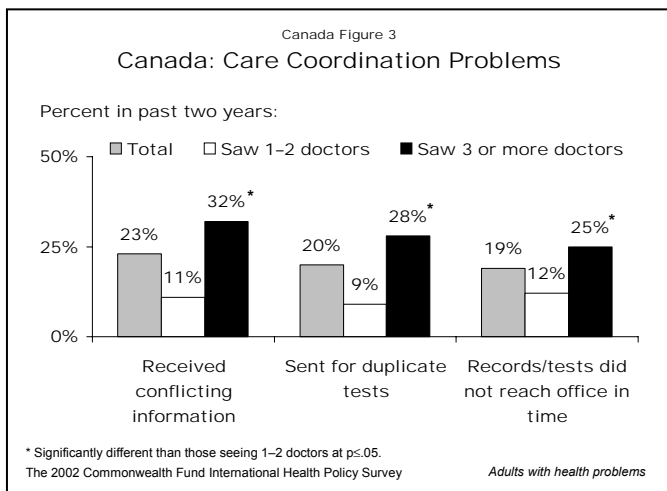
¹ R. J. Blendon, C. Schoen, C. DesRoches, R. Osborn, and K. Zapert, “Common Concerns Amid Diverse Systems: Health Care Experiences in Five Countries,” *Health Affairs* 22 (May/June 2003): 106–21.



Care Coordination

All Canadians in the survey had either current or recent health problems. The survey found that these adults typically see multiple physicians and frequently encounter problems with coordination of care.

- Nearly a quarter (23%) of Canadians received conflicting information from different doctors (Figure 3).



- One of five (20%) reported they had been sent for duplicate tests or procedures by different doctors. A similar proportion (19%) said there was an instance when their records or results did not reach the doctor's office in time for an appointment.
- Canadians who had seen three or more physicians (57% of those surveyed) were significantly more likely than those who had seen fewer physicians to indicate care coordination problems.

- Canadian responses on coordination indicators generally fell within the range of the five countries (Figure 4).

Canada Figure 4
Care Coordination Problems

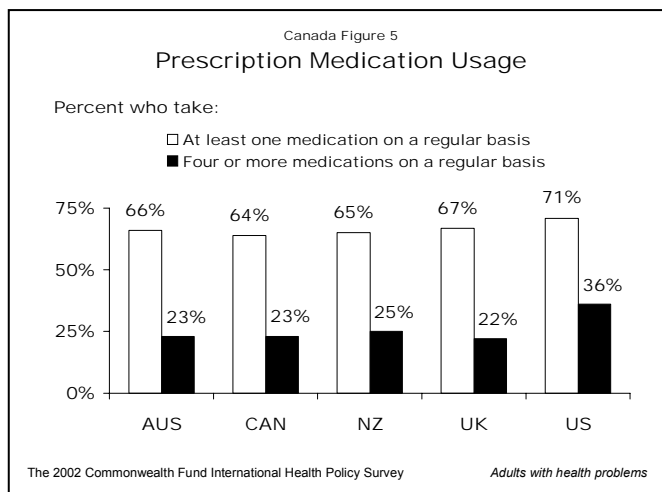
Percent in the past two years:	AUS	CAN	NZ	UK	US
Had to tell the same story to multiple health professionals	49	50	47	49	57
Received conflicting information from different health professionals	23	23	24	19	26
Sent for duplicate tests by different health professionals	13	20	17	13	22
Records/tests didn't reach office in time for appointment	14	19	16	23	25

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Adults with health problems

Prescription Drugs

Nearly two-thirds of Canadians with health problems use prescription drugs regularly, often multiple medications. However, many have not talked with their doctor about all of the prescription drugs they are taking.

- Sixty-four percent of Canadian respondents said they use prescription drugs on a regular basis. One of four (23%) takes four or more prescription drugs (Figure 5).



- When respondents were asked if their regular doctor kept track of their prescription medications, 28 percent who were taking medications regularly said that the doctor they rely on the most had not reviewed and discussed all of the drugs they were taking. Even among those taking four or more medicines, 22 percent said their doctor had not reviewed all of them.

- Side effects are of concern. Seventeen percent said that they had stopped taking a prescription medication without their doctor’s advice because of side effects, and 9 percent said that they were taking a medication that had serious side effects that the doctor did not tell them about.
- Canadian experiences related to prescription medications were similar to those reported in the other four countries.

Doctor–Patient Communication and Physician Ratings

Involving patients in care decisions and communicating treatment goals have the potential to improve care. The survey findings indicate that there are missed opportunities for information exchange between Canadian patients and their physicians.

- One-half (49%) of Canadians with health problems reported that their regular physician does not ask for their ideas or opinions about treatment and care, and 21 percent said their doctor does not make clear the specific goals for treatment.
- Twenty-eight percent reported that their doctor does not keep them motivated to do the things they need to do for their health, while 14 percent said their doctor does not help them understand what they need to do to promote their health.
- One-quarter of respondents reported there was a time when they left the doctor’s office without getting important questions answered (Figure 6).

Canada Figure 6
Communication with Doctors

Percent in the past two years:	AUS	CAN	NZ	UK	US
Left a doctor’s office without getting important questions answered	21	25	20	19	31
Did not follow a doctor’s advice	31	31	27	21	39

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- Nearly one-third (31%) recalled an instance when they did not follow their doctor’s advice or treatment plan. The leading reasons given for not following a doctor’s recommendation were: they dis-

agreed with the doctor (38%); it was too difficult to follow (35%); and it cost too much (24%).

- Patients with serious and chronic illnesses often experience emotional strain. Yet 55 percent of Canadian respondents said that in the previous two years their regular physician had not discussed the emotional burden of coping with their condition.

Despite these communication problems, Canadians with health problems gave their regular doctors positive ratings on five dimensions of care (ability to diagnose problems, spending enough time, being accessible, listening to their health concerns, and treating them with dignity and respect). Canadians’ average ratings of their doctors ranked in the middle of the five countries surveyed.

- On average, 62 percent rated their doctors as “excellent” or “very good” (N.Z. 73%; AUS 68%; U.K. 60%; U.S. 59%).

Waiting Times

Canadians with health problems reported having substantial difficulty in seeing specialists and waiting for admission to hospitals. Rates of access problems due to waiting times were among the highest in the survey.

- More than half (53%) of Canadians said it was “very” (24%) or “somewhat” (29%) difficult to see a specialist when needed—a larger proportion than that reported in the other countries surveyed. The overwhelming majority (86%) cited long waiting times as the reason (Figure 7).

Canada Figure 7
Difficulty Seeing a Specialist and Waiting Problems

Percent reporting:	AUS	CAN	NZ	UK	US
Very or somewhat difficult to see specialist	41	53	36	38	40
The following were “big problems” in the past two years:					
Long waits for hospital admission	20	28	21	19	13
Long waits for doctor’s appointment	17	24	5	21	14
Delay of scheduled surgery or procedure due to cancellation	10	16	9	10	5

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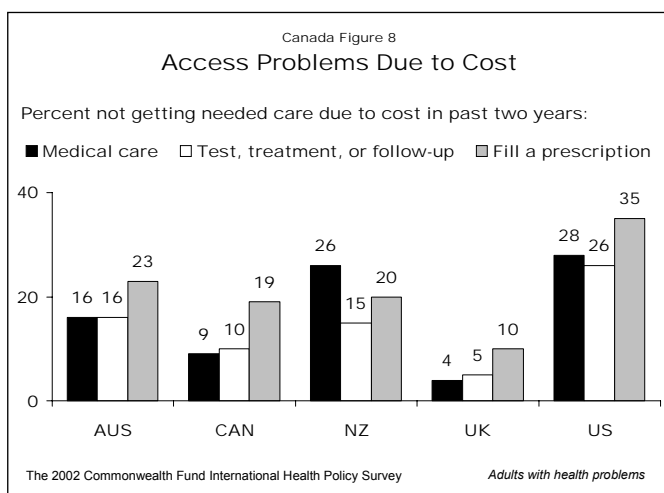
- More than one-quarter (28%) of Canadian respondents reported that long waits to be admitted to the hospital had been a “big problem” in the past two years, the highest rate in the survey.

- One-quarter (24%) said that long waits to get an appointment with their regular physician were a big problem, a significantly higher proportion than in Australia, New Zealand, and the U.S.
- Canadians with health problems were also more likely to report that a delay in a scheduled surgery or other medical procedure because of a cancellation had been a big problem in the previous two years.
- Among those who had used or tried to use emergency rooms in the previous two years, more than one-third (37%) reported that delays were a big problem.

Access Problems Due to Cost

Canadians with health problems were less likely than those in Australia, New Zealand, and the U.S. to report that they went without care from doctors or follow-up medical treatment because of cost. Cost-related access problems in Canada were the highest for prescription medicines and dental care—services that are not universally covered by Canada’s Medicare program.

- About one of 10 Canadian respondents did not see a doctor because of cost, or did not have a recommended test, treatment, or follow-up visit because of cost, in the past two years. This proportion is smaller than in any other country except the U.K. and is notably lower than in the U.S. (Figure 8).



- One of five (19%) reported a time in the past two years when they did not fill a prescription due to cost.
- Over a third (35%) of Canadians said they did not get needed dental care due to cost. Adults in the other countries (except the U.K.) also reported high

rates of dental access problems (N.Z. 47%; AUS 44%; U.S. 40%; U.K. 21%).

Views of the Health Care System

- One-third of Canadians with health problems said they were dissatisfied with the Canadian care system. This rate is comparable to percentages in Australia (35%) and the U.K. (31%), and well below those in the United States (44%) and New Zealand (48%). In no nation did the proportion of “very satisfied” exceed 25 percent (U.K. 25%; CAN 21%; U.S. 18%; AUS 15%; N.Z. 14%).
- One-quarter (24%) of Canadians said that quality of care was worse than it was two years ago, a higher proportion than in the other four countries.
- When asked to name the two biggest problems with the Canadian health system, respondents said shortages of health professionals or hospital beds (54%) and long waiting times (27%). In contrast, the top two problems cited in the U.S. were costs of care (48%) and inadequate coverage (25%).
- Asked what the single most important thing the government could do to improve health care would be, the leading answer by Canadians was to spend more money (32%).

Survey Methods

The Commonwealth Fund 2002 International Health Policy Survey consisted of interviews with adults with health problems in Australia, Canada, New Zealand, the United Kingdom, and the United States. The survey screened initial random samples of adults 18 or older to identify those who met at least one of four criteria: reported their health as fair or poor; or in the past two years had serious illness that required intensive medical care, major surgery, or hospitalization for something other than a normal birth. These questions resulted in final survey samples of: AUS 844; CAN 750; N.Z. 750; U.K. 750; and U.S. 755. These samples represent one-fourth to one-third of the adults initially contacted. Harris Interactive, Inc., and country affiliates conducted the interviews by telephone between March and May 2002. Please see the [Health Affairs](#) article for significant differences among each country.

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