ALBERTANS' VIEWS ON ADVANCE CARE PLANNING & PALLIATIVE CARE

Public Poll Report

May 6, 2024

Covenant Health
Palliative Institute

Ipsos

Contents

Background

Low public awareness of palliative care and advance care planning constitutes a major barrier to the uptake of palliative care and advance care planning initiatives.

- A lack of awareness, and/or understanding, of what palliative care entails can lead to negative impressions of palliative care, and reduce clinicians' willingness to recommend such care, and/or the likelihood of individuals accepting such care if offered.
- Similarly, low awareness of, and engagement in, advance care planning can result in individuals and families being unprepared for dealing with illness or injuries.

In late 2020, the Covenant Health Palliative Institute undertook a multi-year, multi-sectoral Compassionate Communities initiative to increase public awareness and understanding of palliative care and advance care planning. Public education tools have been adapted to the local context and implemented in collaboration with community partners.

In March 2024, the Covenant Health Palliative Institute commissioned Ipsos Canada to conduct a public poll of Albertans to:

- collect data on Albertans' awareness of palliative care and advance care planning;
- gather data around awareness of the concept of compassionate communities;
- inform future work by better understanding how and where Albertans would like to receive information about palliative care and advance care planning.

Methodology

- The survey includes 802 adult (18+) Albertans and was fielded online from March 13-20, 2024.

- Data have been weighted to reflect the Alberta population age 18+ based on Census data for region, age, gender and education.

- The precision of Ipsos polls containing online data is measured using a credibility interval. In this case, the overall poll is accurate to within +/-4.0 percentage points, 19 times out of 20, had all Alberta adults been polled.
  - The credibility interval will be wider among subsets of the population. All sample surveys and polls may be subject to other sources of error, including, but not limited to coverage error, and measurement error.

- Due to rounding:
  - Not all charts and tables in this report will add to exactly 100%.
  - Not all summary statistics will be exactly equal to the sum of their component parts.

Weighted Sample Profile

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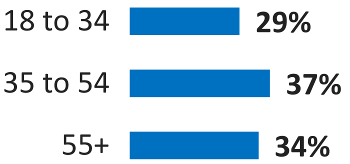
GENDER

49% Male

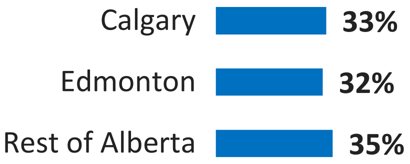
50% Female

1% Other/Prefer not to answer

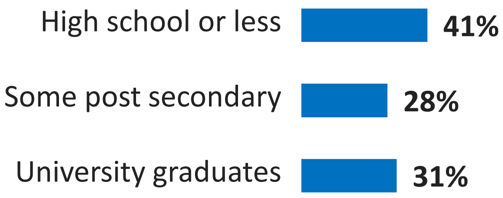
AGE



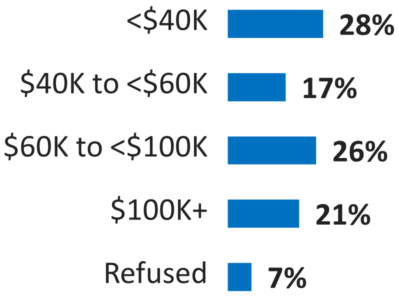
REGION



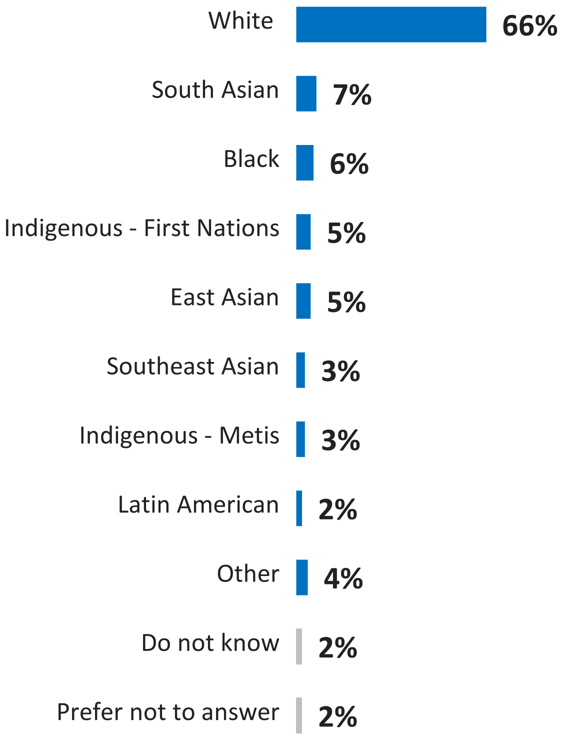
EDUCATION



HOUSEHOLD INCOME



RACE-BASED IDENTITY



Base: All respondents (n=802)

SUMMARY OF KEY FINDINGS

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KEY FINDINGS

Four-in-ten (39%) Albertans have heard of the term ‘advance care planning’. This figure has been increasing over the past 10 years, with awareness at 26% in 2013 and 31% in 2019.

Albertans are most likely to have had advance care planning conversations with family (55%), a proportion that is consistent with previous years.

Most Albertans do not have personal planning documents: 44% have a will, 28% have a personal directive, and 27% have an enduring power of attorney.

The majority of Albertans believe in the benefits of advance care planning, in terms of helping others know what matters most to you, preparing for decision-making, and improving care.

Healthcare providers are Albertans’ preferred source for information on advance care planning and palliative care.

KEY FINDINGS CONT'D

Nearly three-quarters (73%) of Albertans are either "very aware" (27%) or "somewhat aware" (47%) of palliative care. This is a substantial increase from 2016, when just over half (58%) of Canadians* were "very aware" (16%) or "somewhat aware" (43%) of palliative care.

Not unexpectedly, relatively **few (13%) Albertans have heard of the term Compassionate Communities**.

Nearly **two-thirds (63%) of Albertans agree that caring for people with serious illness is everyone's responsibility**, but only 35% were aware of supports available in their community, and 43% would know how to support someone with a serious illness.

Two-thirds (67%) of Albertans are comfortable talking about death, dying or grieving with a family member or close friend, but only 8% report 'often' discussing this topic with their family.

Albertans want information about palliative care and/or advance care planning via **email (43%), print materials (42%), the internet (37%), and presentations (34% in-person vs. 25% online/virtual).**

*Albertans' views were representative

DETAILED FINDINGS

Covenant Health
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Preamble:

The next few questions are about advance care planning, palliative care, and community support for people living with a serious illness. By "serious illness", we mean any illness, disease or condition that cannot be cured and will ultimately shorten a person's life.

ADVANCE CARE PLANNING

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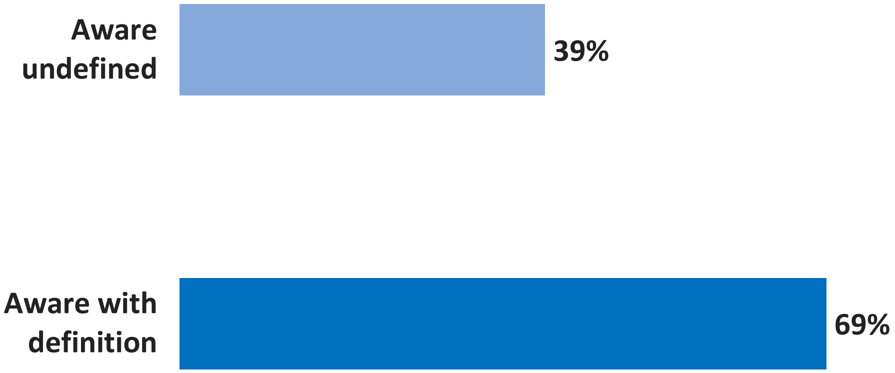
Awareness of Advance Care Planning

Four-in-ten (39%) Albertans have heard of advance care planning (undefined). With the benefit of a definition, awareness rises to seven-in-ten (69%) Albertans.



Definition provided: *Advance care planning is a process of thinking about, talking about, and sometimes documenting the kinds of care you would want, and who you would like to speak for you, if you were too ill or injured to speak for yourself.*

Q1. *Have you ever heard of 'advance care planning'?*

Q2. *Advance care planning is a process of thinking about, talking about, and sometimes documenting the kinds of care you would want, and who you would like to speak for you, if you were too ill or injured to speak for yourself. Based on this definition, have you heard of advance care planning?*

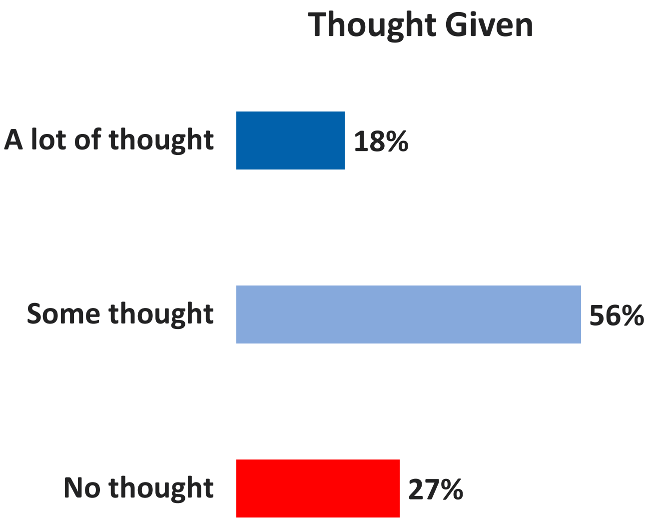
Base: All respondents (n=802)

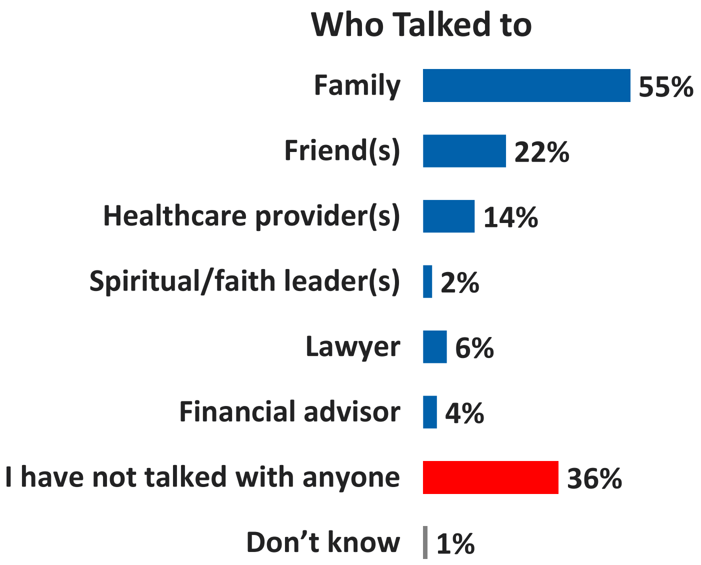
Advance Care Planning Thoughts and Conversations

Covenant Health
Palliative Institute

Only about two-in-ten (18%) Albertans say they have given “a lot of thought” to what kind of health and personal care they would like to receive if they became seriously ill.

A majority (55%) of Albertans say they have talked to family about what kind of health and personal care they would like to receive if they became too ill or injured to speak for themselves. Nearly four-in-ten (36%) have not talked to anyone.


Thought Given


Who Talked to

Q3. *How much thought have you given to what kind of health and personal care you would like to receive if you became seriously ill?*

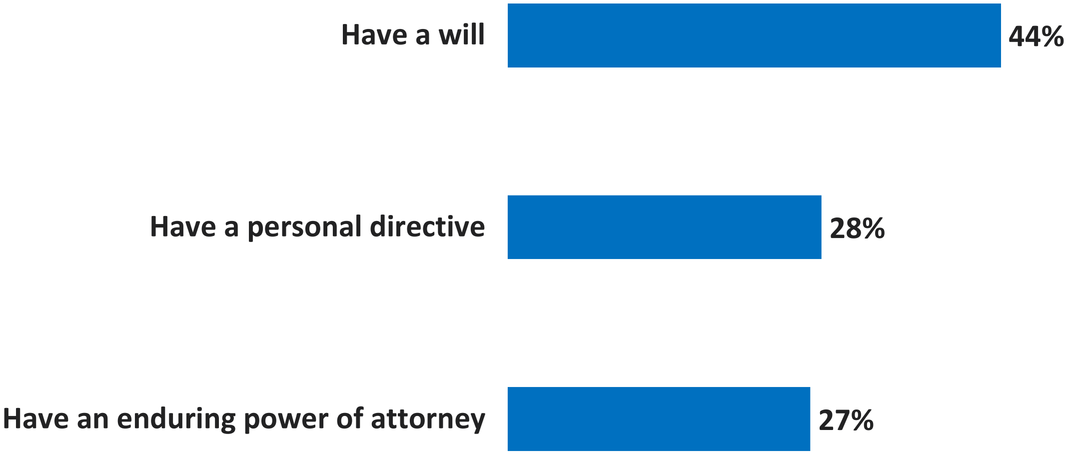
Q4. *Have you talked with anyone about what kind of health and personal care you would like to receive if you became too ill or injured to speak for yourself? Select all that apply.*

Base: All respondents (n=802)

Ipsos

Personal Planning Documents

Most Albertans do not have a will (44% have one), a personal directive (28% have one) or an enduring power of attorney (27% have one).



Definition provided: *A will is a document that outlines how you would like your property and possessions distributed after your death. It also allows you to name a guardian for any children who are minors at the time of your death.*

Definition provided: *A personal directive is the legal document in Alberta that records who you want to make personal and healthcare decisions for you if you are unable.*

Definition provided: *An enduring power of attorney is a legal document that gives another person the authority to make financial decisions on your behalf.*

Q5. *Do you have a personal directive? (A personal directive is the legal document in Alberta that records who you want to make personal and healthcare decisions for you if you are unable.)*

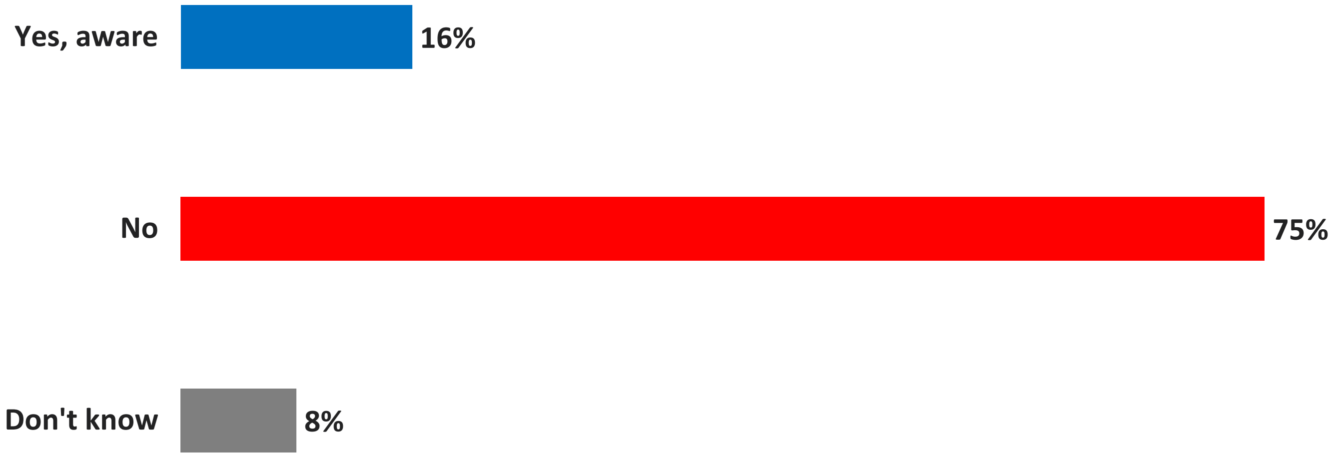
Q6. *Do you have an enduring power of attorney? (An enduring power of attorney is a legal document that gives another person the authority to make financial decisions on your behalf.)*

Q7. *Do you have a will? (A will is a document that outlines how you would like your property and possessions distributed after your death. It also allows you to name a guardian for any children who are minors at the time of your death.)*

Base: All respondents (n=802)

Awareness of MyAHS Connect

Only about one-in-six (16%) Albertans is aware they can upload their advance care planning documents to their MyAHS Connect account.

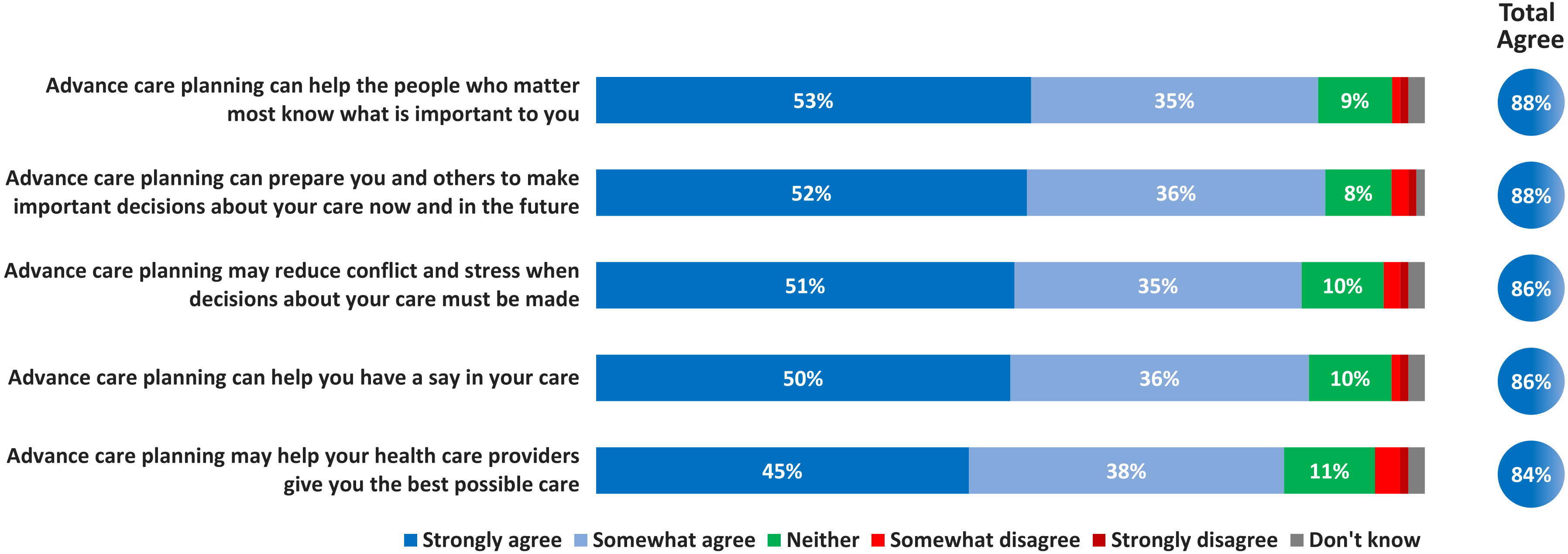


Q8. *Did you know that you can upload your advance care planning documents, such as your personal directive, to your MyAHS Connect account? (MyAHS Connect is a secure, online, interactive tool, provided by Alberta Health Services, that lets you see some of your personal health information.)*

Base: All respondents (n=802)

Beliefs About Advance Care Planning

Most Albertans show a belief that advance care planning helps themselves and others be prepared for future care decisions.

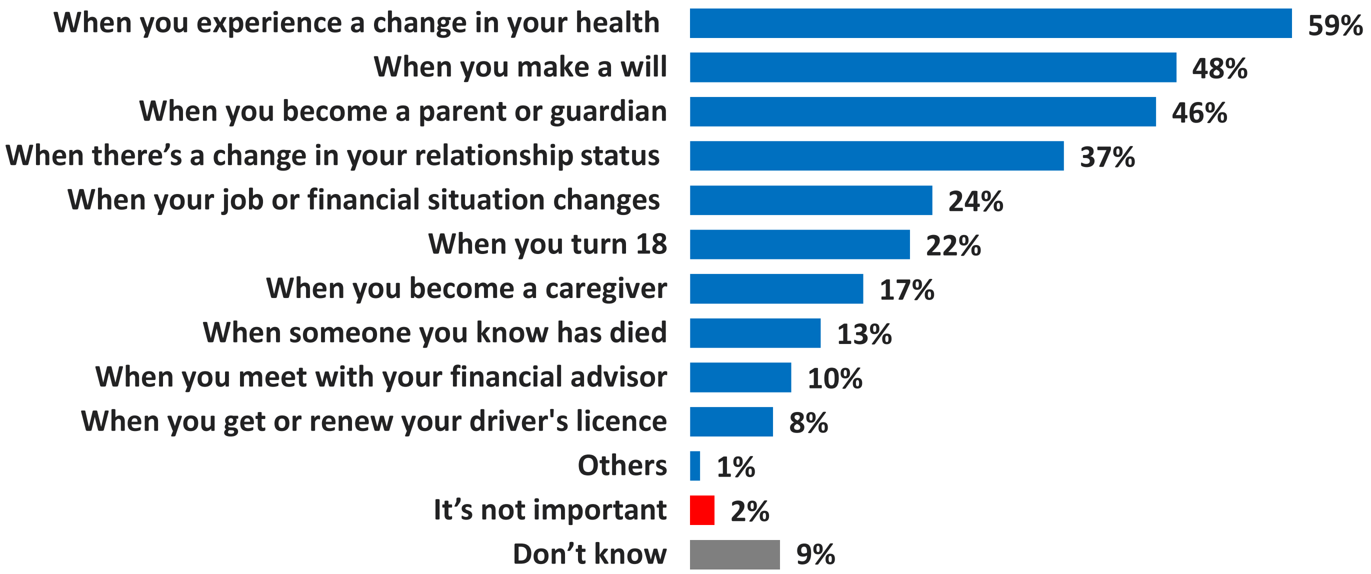


Q9. *Please rate how much you agree/disagree with the following statements. For reference: Advance care planning is a process of thinking about, talking about, and sometimes documenting the kinds of care you would want, and who you would like to speak for you, if you were too ill or injured to speak for yourself.*

Base: All respondents (n=802)

When Important to do Advance Care Planning

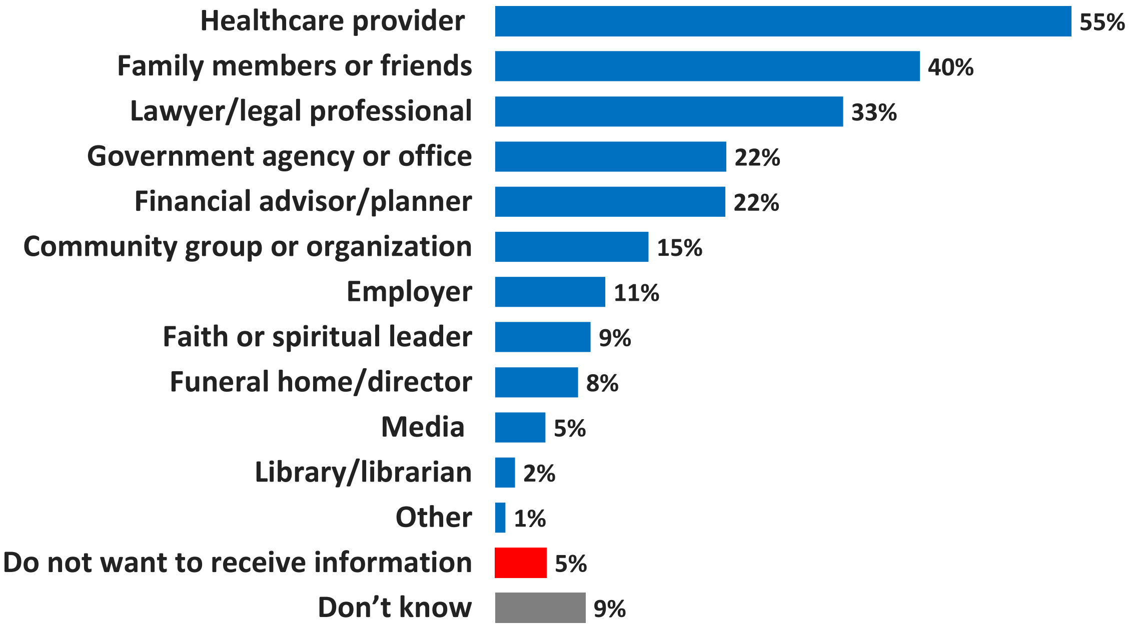
Albertans are most likely to say that advance care planning is important to do when you experience a change in your health (59%). They are next most likely to say advance care planning is important when you make a will (48%), when you become a parent or guardian (46%) and when there's a change in your relationship status (37%). Only 2% of respondents do not think it is important to do advance care planning.



Q10. *Thinking of the following situations, when do you think it is important to do advance care planning? Select all that apply.*
Base: All respondents (n=802)

Preferred Sources of Advance Care Planning Information

Albertans would most like to receive information about advance care planning from their healthcare provider (55%). Other top mentioned sources include family/friends (40%) and lawyers/legal professionals (33%). Only 5% of respondents would not want to receive information on advance care planning.



Q11. *From whom would you prefer to receive information about advance care planning? Select all that apply.*
Base: All respondents (n=802)

PALLIATIVE CARE

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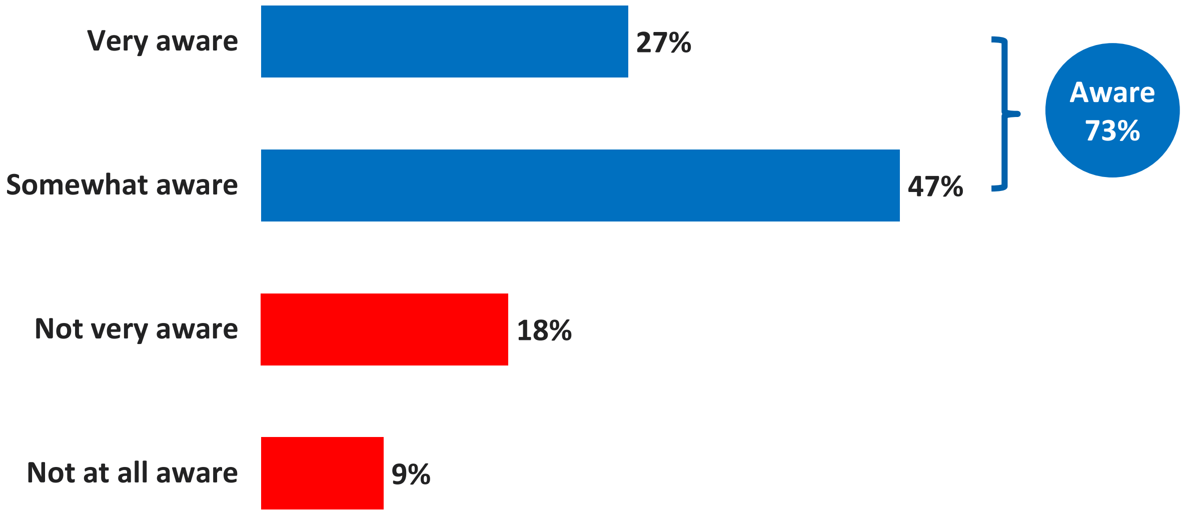
Preamble:

The following questions are about palliative care. Palliative care is care to relieve the symptoms and stress of living with a serious illness. The goal of palliative care is to help people live as well as possible.

Awareness of Palliative Care

Nearly three-quarters (73%) of Albertans say they are either “very aware” (27%) or “somewhat aware” (47%) of palliative care.

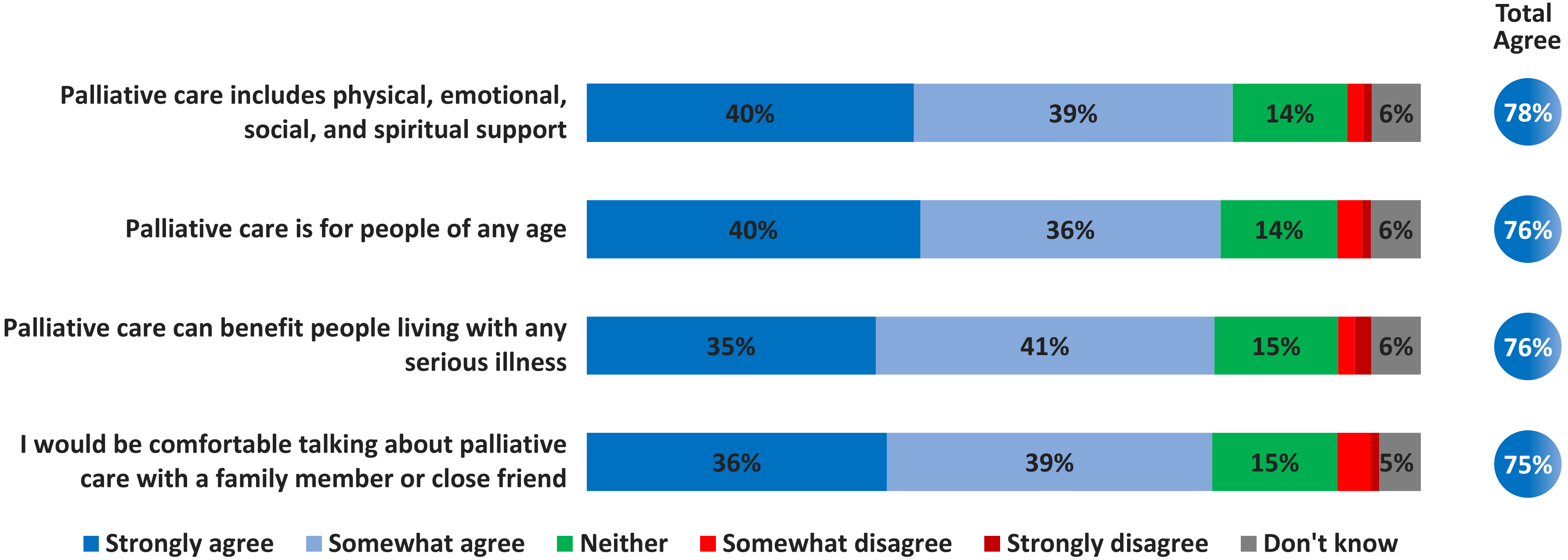


Q12. How would you describe your awareness of palliative care?
Base: All respondents (n=802)

Knowledge and Attitudes Toward Palliative Care (slide 1 of 2)

Covenant Health Palliative Institute

Roughly three-quarters of Albertans agree that palliative care includes physical, emotional, social, and spiritual support (78%), that it is for people of any age (76%) and that it can benefit people living with any serious illness (76%). Three-quarters (75%) also agree that they would be comfortable talking about palliative care with a family member or close friend.



Q13. *Please rate how much you agree/ disagree with the following statements.*
Base: All respondents (n=802)

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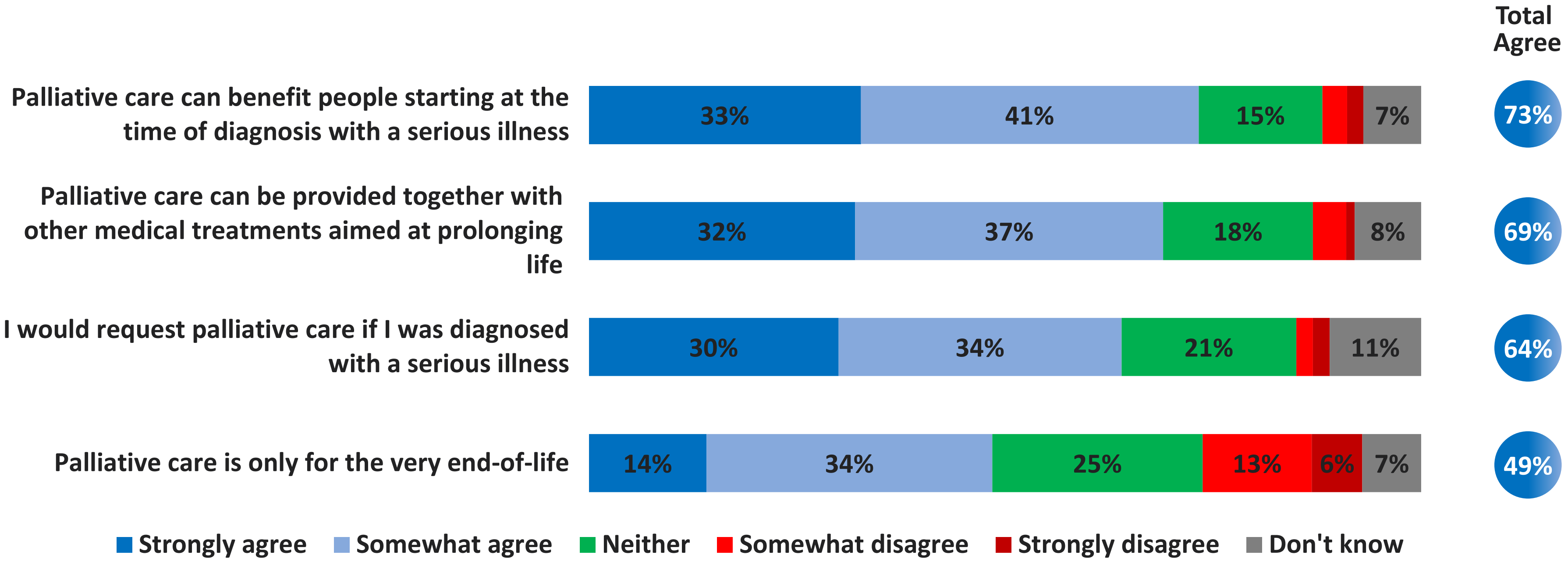
Knowledge and Attitudes Toward Palliative Care (slide 2 of 2)

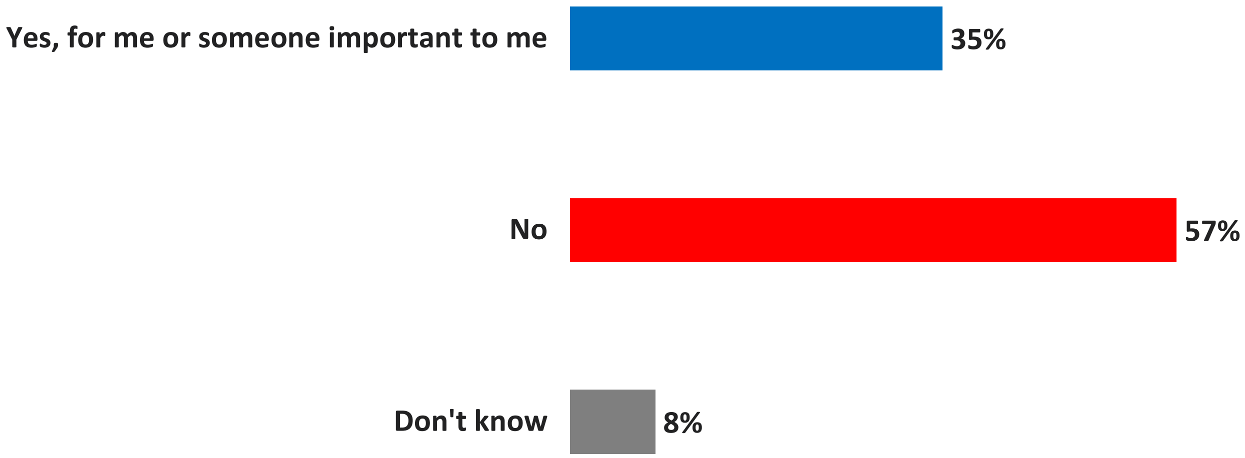
Roughly seven-in-ten Albertans agree that palliative care can benefit people starting at diagnosis (73%) and can be provided with other treatments aimed at prolonging life (69%). Two-thirds (64%) of Albertans agree they would request palliative care if they were diagnosed with a serious illness. About half (49%) of Albertans agree that palliative care is only for the very end-of-life.



Q13. *Please rate how much you agree/ disagree with the following statements.*
Base: All respondents (n=802)

Personal Experience with Palliative Care in Past 10 Years

About one-in-three (35%) Albertans say they or someone important to them has received palliative care within the past 10 years.

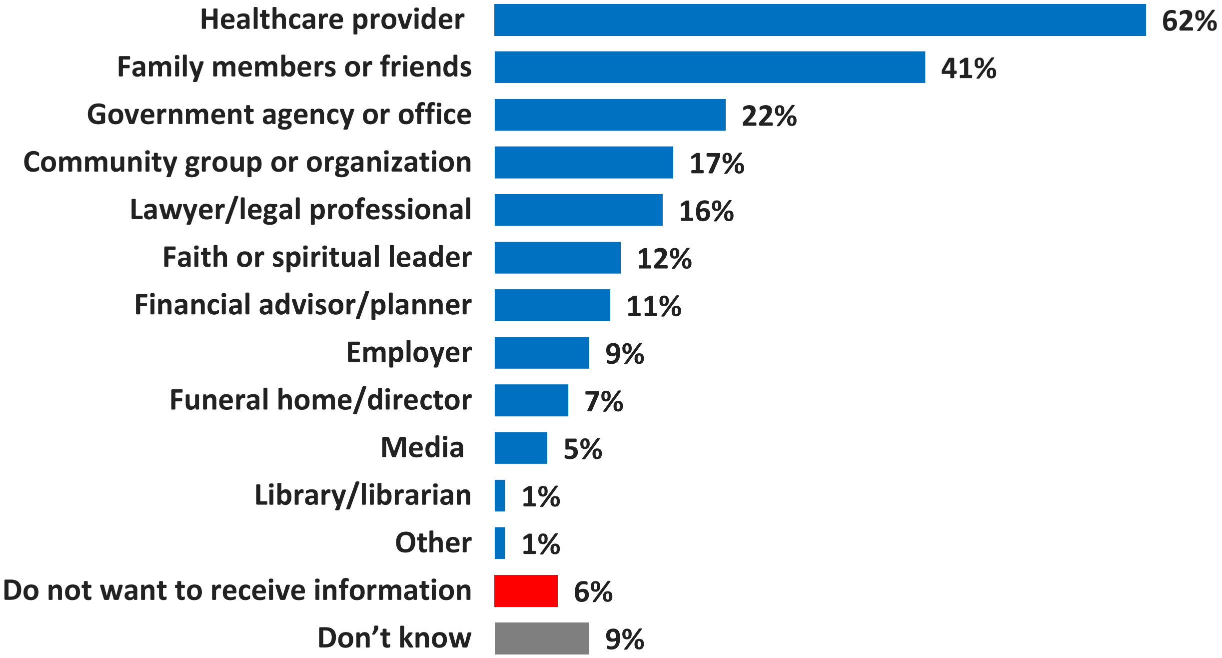


Q14. *Within the past 10 years, have you or someone important to you received palliative care?*
Base: All respondents (n=802)

Preferred Sources of Palliative Care Information

Covenant Health Palliative Institute

The top two preferred sources of information about palliative care include healthcare providers (62%) and family/friends (41%). Only 6% of respondents would not want to receive information about palliative care.



Q15. *From whom would you prefer to receive information about palliative care? Select all that apply.*
Base: All respondents (n=802)

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COMMUNITY SUPPORT FOR LIVING WITH A SERIOUS ILLNESS

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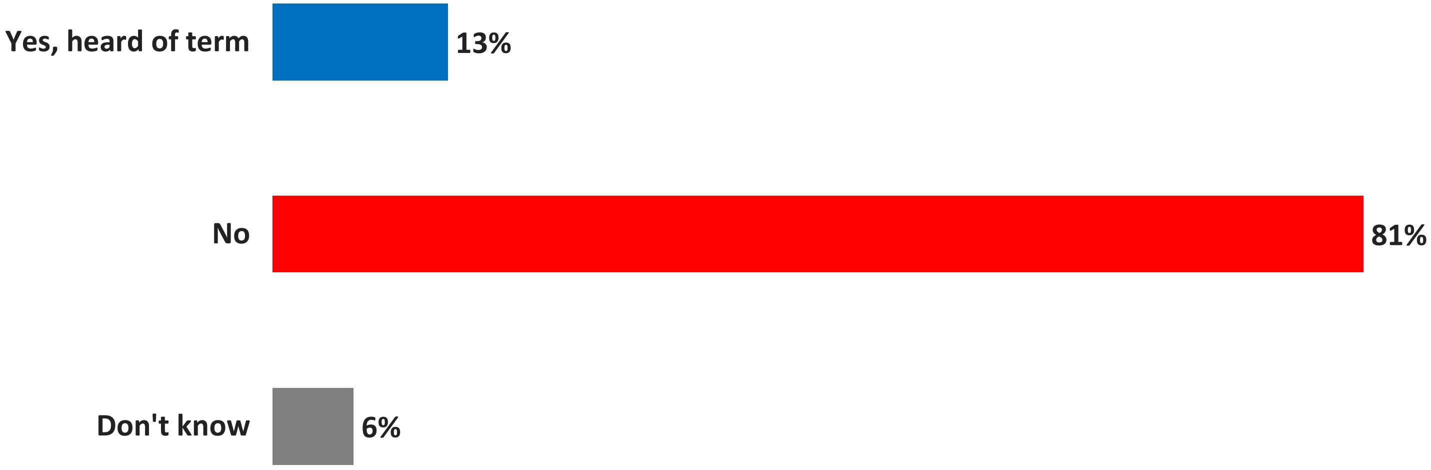
Preamble:

The following questions are about community support for people living with a serious illness. By “serious illness” we are referring to illnesses, diseases or conditions that cannot be cured and will ultimately shorten a person’s life. By “community” we mean those with whom you have a relationship and share interests, such as those in your neighbourhood, faith group, or a social or cultural organization.

Awareness of Compassionate Communities

Covenant Health Palliative Institute

Only 13% of Albertans say they have heard of the term Compassionate Communities.



Q16. Have you heard of the term Compassionate Communities?
Base: All respondents (n=802)

Community Support for People Living with a Serious Illness

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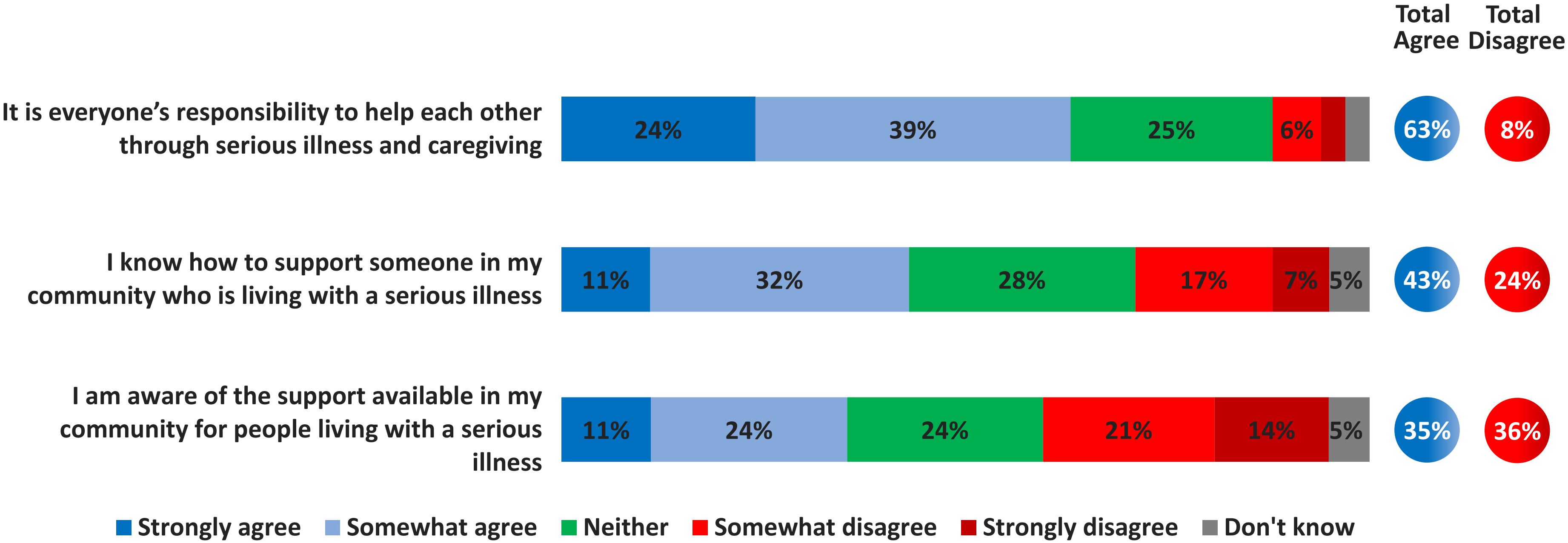
More than six-in-ten (63%) Albertans agree it is everyone's responsibility to help each other through serious illness and caregiving. Fewer Albertans agree they know how to support someone in their community who is living with a serious illness (43%) or are aware of the support available in their community for people living with a serious illness (35%).



Q17. *Please rate how much you agree/disagree with the following statements.*
Base: All respondents (n=802)

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Likelihood to Access Community Supports (slide 1 of 2)

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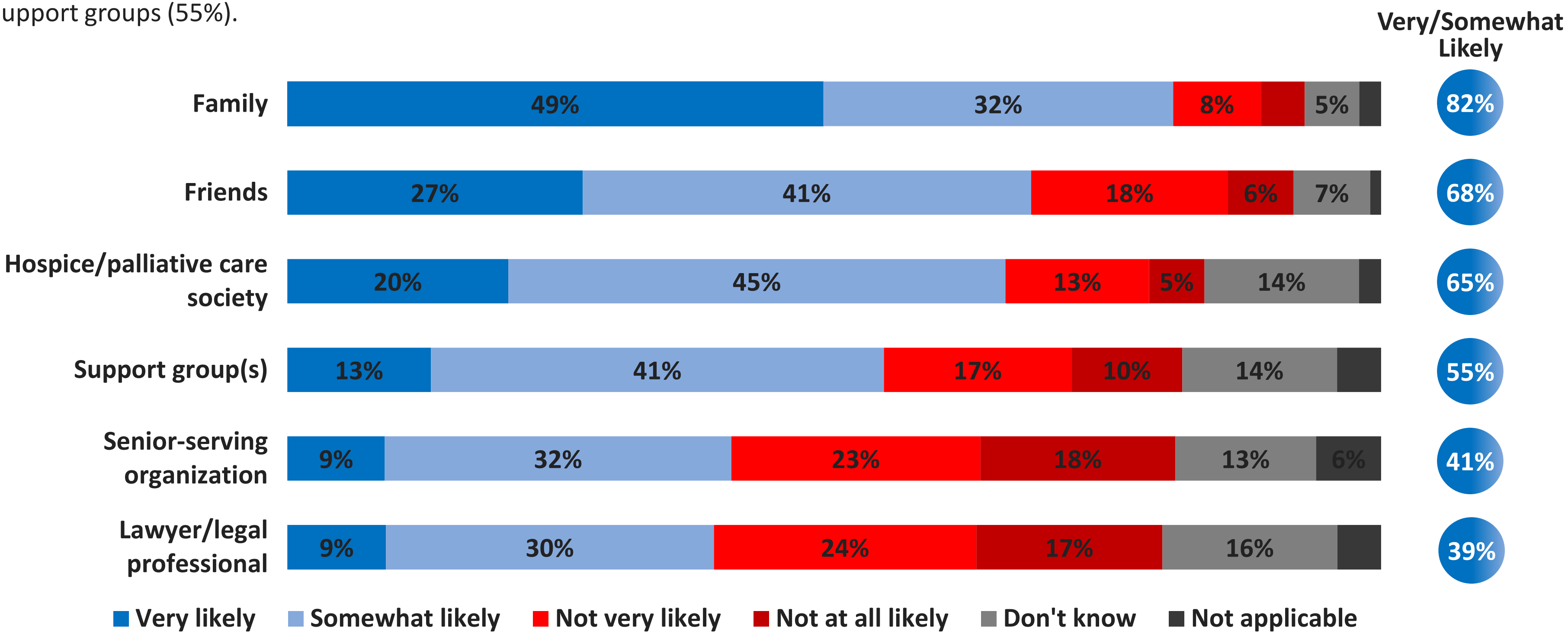
Albertans say they would be most likely to access support from family (82% very or somewhat likely) if they or a loved one were diagnosed with a serious illness. Other top sources of support include friends (68%), a hospice/palliative care society (65%) and support groups (55%).

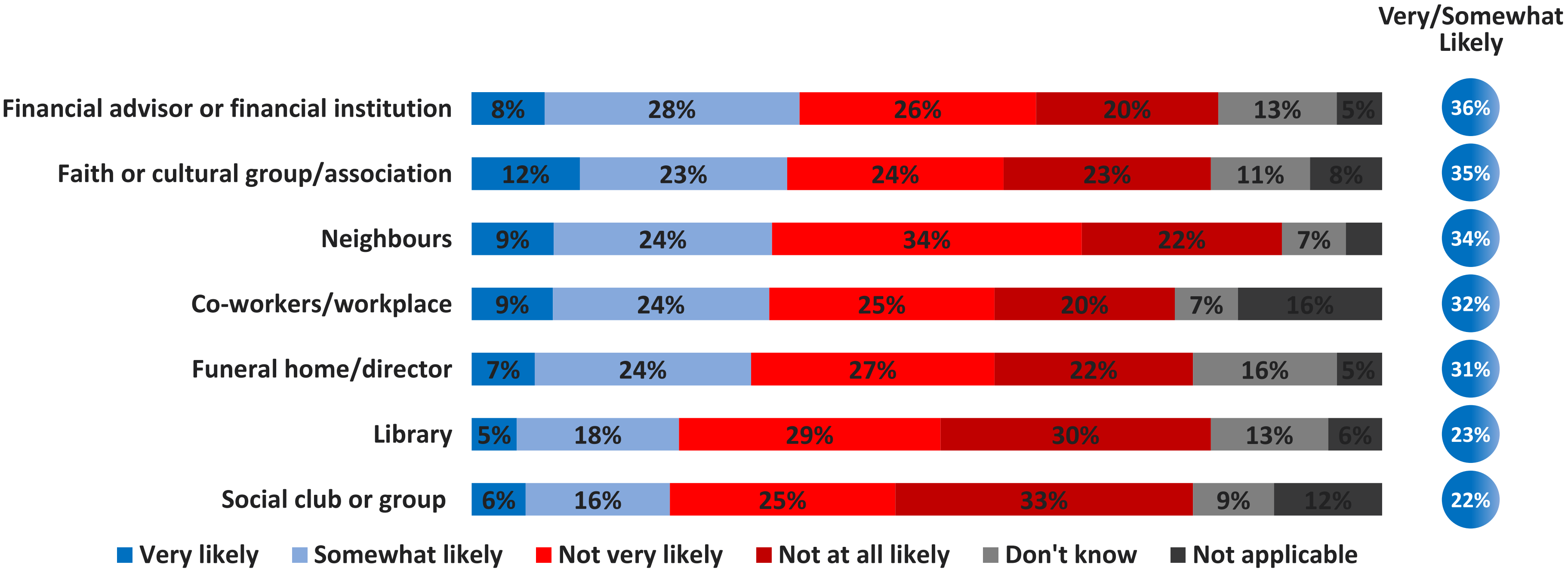


Q18. *If you or a loved one were diagnosed with a serious illness, how likely would you be to access support (e.g., emotional support, spiritual support, or day-to-day support for things like meal preparation, childcare, or transportation) from the following?*

Base: All respondents (n=802)

Likelihood to Access Community Supports (slide 2 of 2)

Roughly one-third or fewer Albertans would access support through each of the groups listed below.



Q18. *If you or a loved one were diagnosed with a serious illness, how likely would you be to access support (e.g., emotional support, spiritual support, or day-to-day support for things like meal preparation, childcare, or transportation) from the following?*

Base: All respondents (n=802)

COMFORT TALKING ABOUT DEATH AND DYING

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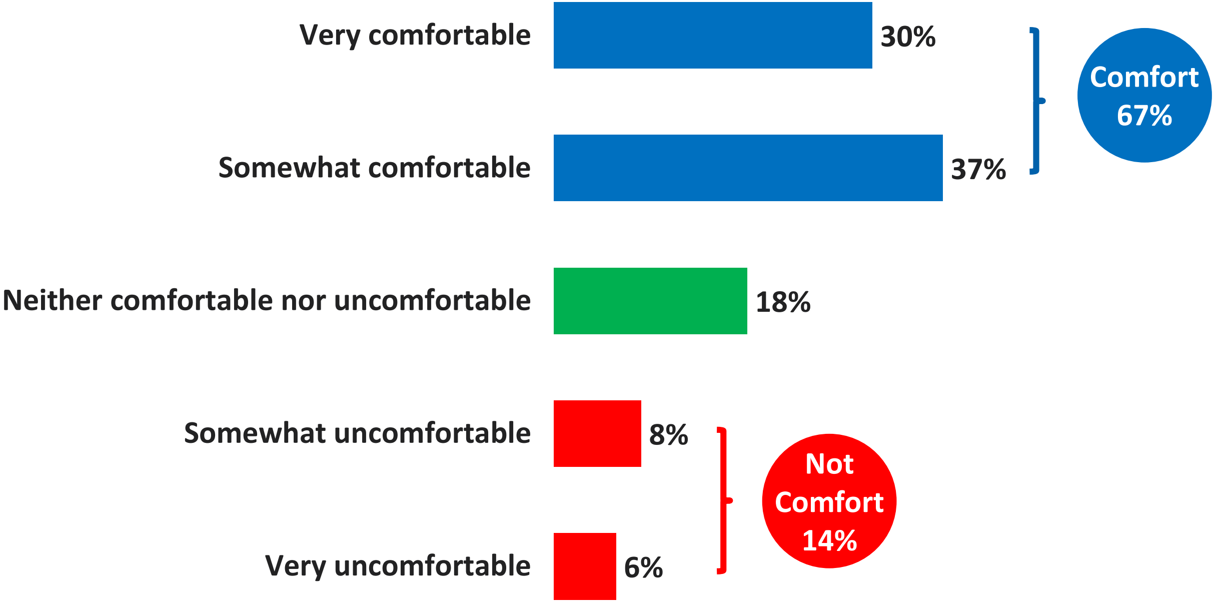
Comfort Talking About Death, Dying or Grieving

Two-thirds (67%) of Albertans say they would be comfortable (very or somewhat) talking about death, dying or grieving with a family member or close friend.



Q19. How comfortable do you, or would you, feel talking about death, dying or grieving with a family member or close friend?

Base: All respondents (n=802)

Frequency of Discussing Death and Dying

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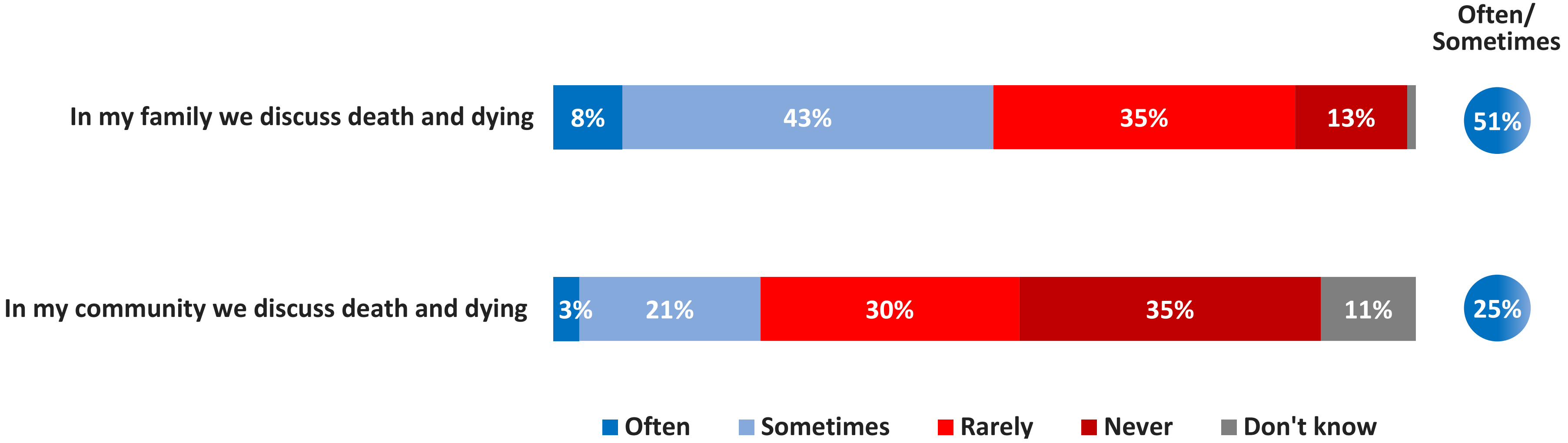
Half (51%) of Albertans say they "often" or "sometimes" discuss death and dying in their family. About one-quarter (25%) say they "often" or "sometimes" discuss death and dying in their community.



Q20. *Please indicate how often you do each of the following.*

Base: All respondents (n=802)

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PREFERRED INFORMATION FORMATS

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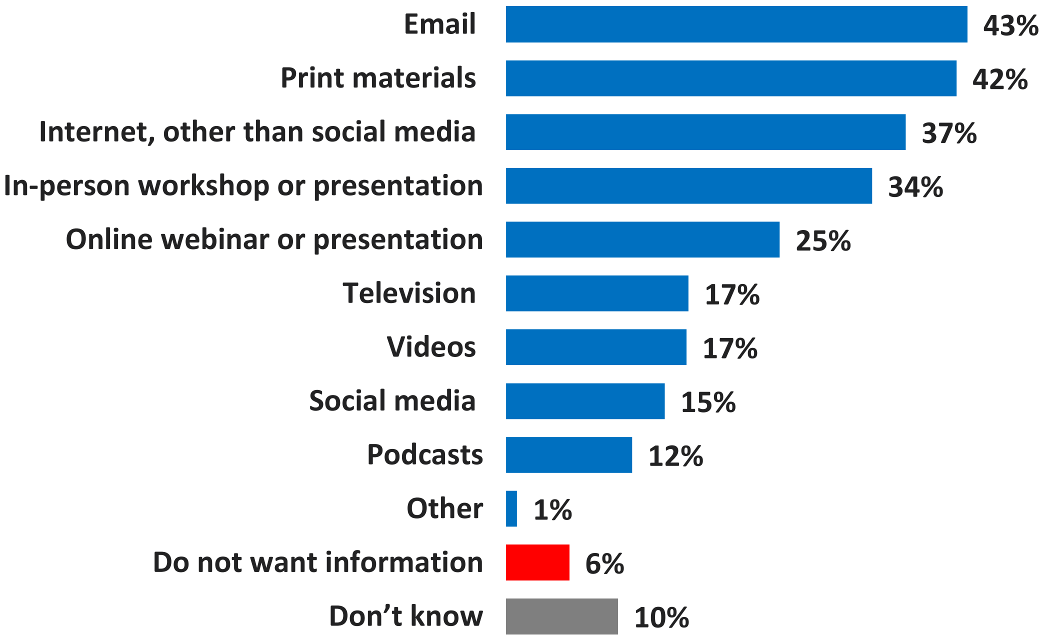
Preferred Information Formats

The most preferred formats for information about palliative care and/or advance care planning include email (43%), print materials (42%), internet (37%), in-person workshop/presentation (34%) and online webinar/presentation (25%).



Q21. *In what format would you prefer to receive information about palliative care and/or advance care planning? Select all that apply.*
Base: Excluding those who earlier said they do not want this information (n=772)

SUBGROUP DIFFERENCES

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Differences Among Subgroups*

AGE

Compared to respondents aged 18-34, respondents aged 55+:

- Had lower awareness of advance care planning when undefined
- Were more likely to have all three advance care planning documents
- Had lower awareness of MyAHS Connect
- Were more likely to believe in the benefits of advance care planning
- Had higher awareness of palliative care
- Were more likely to have had personal experience with palliative care in the past 10 years
- Had lower awareness of the term ‘Compassionate Communities’
- Were less likely to know how to support someone living with a serious illness
- Had a higher preference for information in the form of print materials and online presentations or webinars, and a lower preference for websites, television, videos, social media, and podcasts

**Few differences were observed by region of Alberta. Refer to Detailed Tables.*

Differences Among Subgroups Cont'd

GENDER

Compared to men, women:

- Were more likely to have a personal directive and enduring power of attorney
- Were more likely to believe in the benefits of advance care planning
- Had a higher preference for information in the form of print materials and a lower preference for websites and videos

EDUCATION

Compared to respondents with high school education or less, university graduates:

- Had higher awareness of advance care planning (defined and undefined)
- Were more likely to have had advance care planning conversations
- Had a higher preference for information in the form of email, websites, and online presentations or webinars

Differences Among Subgroups Cont’d

RACE-BASED IDENTITY

Compared to non-white respondents, white respondents:

- Had higher awareness of advance care planning when defined
- Were less likely to have had advance care planning conversations
- Were more likely to have all three advance care planning documents
- Had lower awareness of MyAHS Connect
- Were more likely to believe in the benefits of advance care planning
- Had higher awareness of palliative care
- Were more likely to have had personal experience with palliative care in the past 10 years
- Had lower awareness of the term ‘Compassionate Communities’
- Were less likely to know how to support someone living with a serious illness
- Were more comfortable talking about death, dying or grieving with family or friends
- Had a higher preference for information in the form of print materials, and a lower preference for websites, television, videos, and social media

DETAILED TABLES

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Awareness of Advance Care Planning by Demographic Subgroups

On both an aided and unaided basis, awareness of advance care planning is higher among university graduates.

		Region			Sex		Age			Education			Race	
	Total	**CAL**	**EDM**	**Rest of AB**	**Male**	**Female**	**18-34**	**35-54**	**55+**	**HS or Less**	**Some PostSec**	**Univ Grad**	**White**	**Non-White**
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Aware unaided	39%	36%	42%	40%	41%	38%	48%	39%	32%	35%	39%	45%	38%	42%
Aware with definition	69%	70%	68%	68%	66%	71%	68%	68%	69%	64%	70%	73%	73%	62%

Statistically higher **Statistically lower**

Q1. *Have you ever heard of 'advance care planning'?*

Q2. *Advance care planning is a process of thinking about, talking about, and sometimes documenting the kinds of care you would want, and who you would like to speak for you, if you were too ill or injured to speak for yourself. Based on this definition, have you heard of advance care planning?*

Base: All respondents (n=802)

Advance Care Planning Thoughts and Conversations by Demographic Subgroups

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University graduates and non-white residents are more likely to have given “a lot of thought” to these issues.

Albertans with high school or less education, those in the 35-54 year age group and white residents are the least likely to have talked to someone about these issues.

		Region			Sex		Age			Education			Race	
	Total	CAL	EDM	Rest of AB	Male	Female	18-34	35-54	55+	HS or Less	Some PostSec	Univ Grad	White	Non-White
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Thought Given														
A lot of thought	18%	18%	18%	17%	17%	19%	22%	17%	15%	12%	19%	24%	14%	25%
Some thought	56%	53%	54%	61%	55%	57%	56%	51%	61%	58%	54%	56%	59%	51%
No thought	27%	29%	28%	23%	29%	24%	22%	32%	24%	31%	28%	20%	28%	24%
Who Talked To														
Family	55%	52%	51%	62%	53%	58%	56%	51%	58%	47%	59%	63%	56%	56%
Friend(s)	22%	23%	26%	17%	26%	18%	39%	17%	13%	20%	23%	24%	18%	31%
Healthcare provider(s)	14%	12%	13%	16%	17%	11%	21%	14%	7%	13%	14%	14%	9%	22%
Spiritual/faith leader(s)	2%	3%	1%	3%	2%	3%	4%	3%	1%	3%	2%	2%	1%	5%
Lawyer	6%	7%	7%	6%	5%	7%	5%	3%	11%	4%	7%	9%	7%	4%
Financial advisor	4%	5%	3%	4%	4%	3%	6%	4%	2%	3%	5%	4%	3%	6%
I have not talked with anyone	36%	40%	37%	31%	35%	36%	29%	43%	35%	45%	31%	28%	39%	30%

Statistically higher **Statistically lower**

Q3. *How much thought have you given to what kind of health and personal care you would like to receive if you became seriously ill?*

Q4. *Have you talked with anyone about what kind of health and personal care you would like to receive if you became too ill or injured to speak for yourself? Select all that apply.*

Base: All respondents (n=802)

Ipsos

Personal Planning Documents by Demographic Subgroups

Older Albertans are the most likely to have all three planning documents. Women are more likely than men to have a personal directive and an enduring power of attorney. White respondents are more likely than non-white respondents to have all three documents.

		Region			Sex		Age			Education			Race	
	Total	CAL	EDM	Rest of AB	Male	Female	18-34	35-54	55+	HS or Less	Some PostSec	Univ Grad	White	Non-White
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Have a will	44%	42%	43%	49%	43%	45%	27%	33%	71%	39%	45%	52%	52%	30%
Have a personal directive	28%	24%	27%	34%	24%	32%	21%	20%	44%	26%	30%	31%	31%	22%
Have an enduring power of attorney	27%	23%	28%	31%	24%	31%	21%	20%	40%	25%	27%	30%	29%	22%

Statistically higher **Statistically lower**

Q5. *Do you have a personal directive? (A personal directive is the legal document in Alberta that records who you want to make personal and healthcare decisions for you if you are unable.)*

Q6. *Do you have an enduring power of attorney? (An enduring power of attorney is a legal document that gives another person the authority to make financial decisions on your behalf.)*

Q7. *Do you have a will? (A will is a document that outlines how you would like your property and possessions distributed after your death. It also allows you to name a guardian for any children who are minors at the time of your death.)*

Base: All respondents (n=802)

Awareness of MyAHS Connect by Demographic Subgroups

Younger and non-white residents are the most aware that they can upload their advance care planning documents to their MyAHS Connect account.

		Region			Sex		Age			Education			Race	
	Total	**CAL**	**EDM**	**Rest of AB**	**Male**	**Female**	**18-34**	**35-54**	**55+**	**HS or Less**	**Some PostSec**	**Univ Grad**	**White**	**Non-White**
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Yes, aware	16%	19%	15%	15%	19%	14%	25%	19%	6%	17%	14%	18%	11%	27%

Statistically higher **Statistically lower**

Q8. *Did you know that you can upload your advance care planning documents, such as your personal directive, to your MyAHS Connect account? (MyAHS Connect is a secure, online, interactive tool, provided by Alberta Health Services, that lets you see some of your personal health information.)*

Base: All respondents (n=802)

Beliefs About Advance Care Planning by Demographic Subgroups

Agreement with all the positive statements about advance care planning is higher among women and older respondents. It is also higher among white respondents for four of the five statements.

Total Agree

		Region			Sex		Age			Education			Race	
	Total	CAL	EDM	Rest of AB	Male	Female	18-34	35-54	55+	HS or Less	Some PostSec	Univ Grad	White	Non-White
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Advance care planning can help the people who matter most know what is important to you	88%	88%	87%	88%	85%	91%	82%	88%	92%	85%	91%	89%	92%	84%
Advance care planning can prepare you and others to make important decisions about your care now and in the future	88%	88%	88%	87%	83%	92%	83%	87%	93%	84%	90%	90%	91%	85%
Advance care planning may reduce conflict and stress when decisions about your care must be made	86%	85%	86%	87%	81%	90%	81%	85%	91%	83%	88%	87%	91%	79%
Advance care planning can help you have a say in your care	86%	84%	87%	86%	81%	91%	82%	85%	90%	85%	88%	86%	90%	81%
Advance care planning may help your health care providers give you the best possible care	84%	83%	82%	86%	80%	88%	78%	84%	89%	82%	87%	83%	87%	81%

Statistically higher **Statistically lower**

Q9. *Please rate how much you agree/disagree with the following statements. For reference: Advance care planning is a process of thinking about, talking about, and sometimes documenting the kinds of care you would want, and who you would like to speak for you, if you were too ill or injured to speak for yourself.*

Base: All respondents (n=802)

When Important to do Advance Care Planning by Demographic Subgroups

There are many differences in when Albertans think it is important to do advance care planning by sex, age, education and race. One of the biggest gaps is for planning when you make a will, with this being a much bigger trigger for older respondents and white respondents.

		Region			Sex		Age			Education			Race	
	Total	CAL	EDM	Rest of AB	Male	Female	18-34	35-54	55+	HS or Less	Some PostSec	Univ Grad	White	Non-White
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
When you experience a change in health	59%	61%	61%	57%	54%	65%	51%	59%	68%	52%	63%	66%	65%	52%
When you make a will	48%	48%	46%	50%	41%	56%	31%	49%	61%	43%	53%	50%	57%	32%
When you become a parent or guardian	46%	43%	47%	48%	43%	49%	48%	54%	37%	42%	47%	50%	50%	41%
When a change in relationship status	37%	35%	41%	35%	30%	43%	31%	42%	36%	30%	41%	42%	42%	29%
When your job/financial situation changes	24%	27%	25%	19%	24%	24%	25%	27%	20%	23%	24%	25%	23%	26%
When you turn 18	22%	19%	21%	25%	24%	19%	29%	23%	14%	23%	23%	19%	19%	24%
When you become a caregiver	17%	19%	16%	16%	17%	17%	16%	22%	13%	14%	20%	19%	17%	19%
When someone you know has died	13%	12%	14%	12%	11%	14%	17%	14%	9%	16%	10%	11%	11%	16%
When you meet your financial advisor	10%	11%	11%	8%	9%	11%	8%	13%	8%	11%	11%	8%	10%	10%
When you get/renew your driver's licence	8%	7%	10%	8%	7%	10%	11%	8%	6%	10%	7%	6%	8%	8%
I do not think it is important	2%	3%	2%	2%	3%	2%	1%	4%	2%	4%	2%	1%	2%	4%
Don't know	9%	6%	11%	10%	9%	8%	11%	7%	9%	13%	7%	5%	9%	7%

Statistically higher **Statistically lower**

Q10. *Thinking of the following situations, when do you think it is important to do advance care planning? Select all that apply.*
Base: All respondents (n=802)

Preferred Sources of Advance Care Planning Information by Demographic Subgroups

Covenant Health
Palliative Institute

Both healthcare providers and lawyers/legal professionals are mentioned more often by women, older respondents and white respondents.

		Region			Sex		Age			Education			Race	
	Total	**CAL**	**EDM**	**Rest of AB**	**Male**	**Female**	**18-34**	**35-54**	**55+**	**HS or Less**	**Some PostSec**	**Univ Grad**	**White**	**Non-White**
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Healthcare provider	55%	56%	55%	54%	49%	60%	48%	52%	64%	50%	57%	59%	59%	51%
Family members or friends	40%	41%	39%	41%	41%	40%	44%	39%	39%	41%	46%	35%	41%	41%
Lawyer/legal professional	33%	35%	35%	30%	26%	40%	24%	31%	43%	25%	34%	43%	38%	25%
Government agency or office	22%	24%	27%	16%	24%	21%	20%	22%	24%	17%	24%	27%	22%	24%
Financial advisor/planner	22%	21%	24%	20%	21%	23%	26%	21%	20%	21%	22%	24%	23%	21%
Community group or organization	15%	15%	13%	15%	14%	15%	20%	12%	13%	15%	12%	16%	12%	19%
Employer	11%	11%	12%	9%	11%	9%	16%	14%	2%	10%	10%	11%	9%	13%
Faith or spiritual leader	9%	9%	8%	10%	11%	8%	12%	10%	6%	10%	8%	8%	8%	13%
Funeral home/director	8%	8%	7%	8%	7%	9%	8%	8%	8%	8%	9%	7%	7%	9%
Media	5%	4%	6%	5%	5%	4%	7%	4%	3%	5%	3%	6%	4%	7%
Library/librarian	2%	3%	2%	1%	2%	2%	3%	2%	1%	1%	2%	3%	1%	3%
Do not want to receive information	5%	5%	5%	5%	5%	5%	1%	6%	7%	6%	4%	5%	6%	2%
Don’t know	9%	10%	5%	11%	7%	10%	9%	11%	6%	13%	6%	5%	8%	5%

Statistically higher **Statistically lower**

Q11. *From whom would you prefer to receive information about advance care planning? Select all that apply.*
Base: All respondents (n=802)

Ipsos

Awareness of Palliative Care by Demographic Subgroups

Covenant Health
Palliative Institute

Awareness of palliative care is higher among older respondents and white respondents. It is also higher among Edmonton respondents compared to Calgary respondents.

		Region			Sex		Age			Education			Race	
	Total	**CAL**	**EDM**	**Rest of AB**	**Male**	**Female**	**18-34**	**35-54**	**55+**	**HS or Less**	**Some PostSec**	**Univ Grad**	**White**	**Non-White**
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Very aware	27%	23%	26%	32%	24%	30%	23%	28%	29%	21%	32%	30%	28%	23%
Somewhat aware	47%	45%	52%	44%	47%	46%	39%	43%	57%	47%	47%	46%	52%	36%
Not very aware	18%	20%	15%	19%	21%	15%	23%	20%	11%	20%	16%	17%	14%	24%
Not at all aware	9%	14%	7%	6%	9%	9%	15%	9%	4%	12%	6%	7%	6%	16%
Very/Somewhat Aware	*73%*	*67%*	*78%*	*75%*	*71%*	*76%*	*62%*	*71%*	*85%*	*68%*	*78%*	*76%*	*80%*	*60%*

Statistically higher **Statistically lower**

Q12. How would you describe your awareness of palliative care?
Base: All respondents (n=802)

Ipsos

Knowledge and Attitudes Toward Palliative Care by Demographic Subgroups (slide 1 of 2)

Older respondents and white respondents are more likely to agree that palliative care includes physical, emotional, social, and spiritual support and that it is for people of any age. These same groups are also more likely to be comfortable talking about palliative care with a family member or close friend.

Total Agree

		Region			Sex		Age			Education			Race	
	Total	CAL	EDM	Rest of AB	Male	Female	18-34	35-54	55+	HS or Less	Some PostSec	Univ Grad	White	Non-White
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Palliative care includes physical, emotional, social, and spiritual support	78%	78%	80%	77%	79%	79%	73%	77%	85%	74%	83%	81%	83%	72%
Palliative care is for people of any age	76%	76%	74%	78%	72%	80%	65%	76%	86%	72%	80%	78%	82%	67%
Palliative care can benefit people living with any serious illness	76%	77%	75%	75%	74%	77%	73%	76%	76%	73%	76%	78%	78%	73%
I would be comfortable talking about palliative care with a family member or close friend	75%	72%	76%	77%	74%	76%	69%	75%	80%	74%	77%	75%	79%	70%

Statistically higher **Statistically lower**

Q13. *Please rate how much you agree/ disagree with the following statements.*

Base: All respondents (n=802)

Knowledge and Attitudes Toward Palliative Care by Demographic Subgroups (slide 2 of 2)

Less educated respondents are less likely to agree they would request palliative care if they were diagnosed with a serious illness.

Total Agree

		Region			Sex		Age			Education			Race	
	Total	CAL	EDM	Rest of AB	Male	Female	18-34	35-54	55+	HS or Less	Some PostSec	Univ Grad	White	Non-White
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Palliative care can benefit people starting at the time of diagnosis with a serious illness	73%	76%	72%	72%	74%	72%	72%	72%	76%	68%	🟦 78%	76%	75%	73%
Palliative care can be provided together with other medical treatments aimed at prolonging life	69%	72%	67%	67%	69%	68%	67%	69%	70%	65%	71%	71%	69%	71%
I would request palliative care if I was diagnosed with a serious illness	64%	67%	64%	61%	64%	64%	63%	64%	66%	▨ 56%	🟦 70%	🟦 70%	64%	68%
Palliative care is only for the very end-of-life	49%	47%	50%	49%	48%	51%	▨ 36%	🟦 55%	53%	46%	🟦 55%	47%	🟦 54%	▨ 39%

🟦 **Statistically higher** ▨ **Statistically lower**

Q13. *Please rate how much you agree/ disagree with the following statements.*
Base: All respondents (n=802)

Personal Experience with Palliative Care in Past 10 Years by Demographic Subgroups

White respondents are more likely than non-white respondents to have had a palliative care experience within the past 10 years. Younger respondents are less likely to have had an experience within the past 10 years.

		Region			Sex		Age			Education			Race	
	Total	CAL	EDM	Rest of AB	Male	Female	18-34	35-54	55+	HS or Less	Some PostSec	Univ Grad	White	Non-White
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Yes, have experience	35%	33%	36%	36%	32%	38%	28%	38%	39%	30%	37%	39%	39%	27%

Statistically higher **Statistically lower**

Q14. *Within the past 10 years, have you or someone important to you received palliative care?*
Base: All respondents (n=802)

Preferred Sources of Palliative Care Information by Demographic Subgroups

Covenant Health Palliative Institute

A healthcare provider as a source of information about palliative care is especially preferred by women, older respondents, more educated respondents and white respondents.

		Region			Sex		Age			Education			Race	
	Total	CAL	EDM	Rest of AB	Male	Female	18-34	35-54	55+	HS or Less	Some PostSec	Univ Grad	White	Non-White
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Healthcare provider	62%	64%	67%	57%	54%	70%	51%	62%	73%	55%	68%	68%	68%	57%
Family members or friends	41%	43%	39%	41%	39%	42%	42%	41%	39%	41%	44%	38%	42%	41%
Government agency or office	22%	22%	29%	16%	25%	20%	19%	22%	25%	17%	26%	26%	24%	21%
Community group or organization	17%	16%	17%	18%	16%	17%	18%	18%	15%	16%	16%	19%	14%	24%
Lawyer/legal professional	16%	19%	17%	13%	14%	18%	16%	15%	18%	14%	17%	19%	20%	10%
Faith or spiritual leader	12%	12%	10%	12%	12%	12%	11%	14%	10%	9%	15%	12%	10%	16%
Financial advisor/planner	11%	12%	9%	11%	10%	11%	12%	14%	6%	9%	10%	14%	11%	12%
Employer	9%	10%	7%	9%	9%	7%	14%	10%	2%	9%	6%	10%	6%	15%
Funeral home/director	7%	6%	7%	6%	7%	7%	6%	8%	6%	7%	8%	5%	5%	10%
Media	5%	3%	4%	6%	6%	3%	8%	3%	3%	4%	3%	6%	4%	7%
Library/librarian	1%	2%	1%	1%	1%	2%	2%	2%	1%	0%	2%	3%	1%	1%
Do not want to receive information	6%	4%	7%	7%	6%	6%	3%	7%	6%	7%	4%	6%	6%	4%
Don't know	9%	12%	6%	11%	10%	9%	14%	10%	5%	14%	8%	5%	9%	6%

Statistically higher **Statistically lower**

Q15. *From whom would you prefer to receive information about palliative care? Select all that apply.*
Base: All respondents (n=802)

Ipsos

Awareness of Compassionate Communities by Demographic Subgroups

Awareness of the term Compassionate Communities is higher (but still low) among younger and non-white respondents.

		Region			Sex		Age			Education			Race	
	Total	**CAL**	**EDM**	**Rest of AB**	**Male**	**Female**	**18-34**	**35-54**	**55+**	**HS or Less**	**Some PostSec**	**Univ Grad**	**White**	**Non-White**
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Yes, heard of term	13%	12%	13%	14%	14%	12%	19%	14%	6%	10%	15%	16%	10%	17%

Statistically higher **Statistically lower**

Q16. Have you heard of the term Compassionate Communities?
Base: All respondents (n=802)

Community Support for People Living with a Serious Illness by Demographic Subgroups

Younger and non-white respondents are more likely to agree they know how to support someone in their community who is living with a serious illness and to agree that they are aware of the support available in their community for people living with a serious illness.

Total Agree

		Region			Sex		Age			Education			Race	
	Total	CAL	EDM	Rest of AB	Male	Female	18-34	35-54	55+	HS or Less	Some PostSec	Univ Grad	White	Non-White
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
It is everyone's responsibility to help each other through serious illness and caregiving	63%	63%	67%	60%	63%	64%	65%	63%	62%	59%	64%	68%	63%	65%
I know how to support someone in my community who is living with a serious illness	43%	41%	47%	41%	44%	42%	50%	44%	35%	39%	45%	46%	38%	54%
I am aware of the support available in my community for people living with a serious illness	35%	35%	36%	34%	40%	31%	49%	34%	25%	35%	35%	36%	28%	47%

Statistically higher **Statistically lower**

Q17. *Please rate how much you agree/disagree with the following statements.*
Base: All respondents (n=802)

Likelihood to Access Community Supports by Demographic Subgroups (slide 1 of 2)

Younger and non-white respondents are more likely to access support from family and friends.

Very/Somewhat Likely

		Region			Sex		Age			Education			Race	
	Total	**CAL**	**EDM**	**Rest of AB**	**Male**	**Female**	**18-34**	**35-54**	**55+**	**HS or Less**	**Some PostSec**	**Univ Grad**	**White**	**Non-White**
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Family	82%	79%	83%	83%	83%	80%	87%	77%	82%	78%	82%	85%	80%	87%
Friends	68%	69%	68%	67%	66%	71%	74%	71%	59%	61%	73%	72%	66%	75%
Hospice/palliative care society	65%	71%	59%	65%	63%	68%	63%	64%	67%	61%	66%	69%	67%	64%
Support group(s)	55%	55%	55%	54%	52%	59%	56%	56%	52%	49%	61%	56%	56%	54%
Senior-serving organization	41%	43%	40%	39%	44%	38%	40%	40%	42%	38%	44%	42%	39%	45%
Lawyer/legal professional	39%	41%	37%	39%	38%	40%	39%	41%	37%	36%	42%	40%	40%	38%

Statistically higher **Statistically lower**

Q18. *If you or a loved one were diagnosed with a serious illness, how likely would you be to access support (e.g., emotional support, spiritual support, or day-to-day support for things like meal preparation, childcare, or transportation) from the following?*

Base: All respondents (n=802)

Likelihood to Access Community Supports by Demographic Subgroups (slide 2 of 2)

Covenant Health
Palliative Institute

Younger and non-white respondents are more likely to access many of the lower ranked sources of support.

Very/Somewhat Likely

		Region			Sex		Age			Education			Race	
	Total	CAL	EDM	Rest of AB	Male	Female	18-34	35-54	55+	HS or Less	Some PostSec	Univ Grad	White	Non-White
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Financial advisor or financial institution	36%	37%	32%	39%	38%	33%	44%	39%	24%	34%	36%	39%	31%	46%
Faith or cultural group/association	35%	39%	30%	34%	36%	33%	41%	33%	30%	33%	36%	36%	30%	46%
Neighbours	34%	39%	33%	29%	34%	34%	40%	32%	29%	31%	35%	35%	28%	45%
Co-workers/workplace	32%	35%	30%	32%	33%	32%	45%	39%	13%	33%	32%	32%	27%	41%
Funeral home/director	31%	34%	28%	31%	33%	29%	35%	33%	25%	29%	35%	30%	29%	36%
Library	23%	25%	20%	25%	27%	21%	34%	24%	14%	24%	24%	22%	19%	33%
Social club or group	22%	25%	20%	19%	25%	19%	33%	26%	6%	20%	22%	24%	16%	33%

Statistically higher **Statistically lower**

Q18. *If you or a loved one were diagnosed with a serious illness, how likely would you be to access support (e.g., emotional support, spiritual support, or day-to-day support for things like meal preparation, childcare, or transportation) from the following?*

Base: All respondents (n=802)

Ipsos

Comfort Talking About Death, Dying or Grieving by Demographic Subgroups

White respondents are more comfortable than non-white respondents talking about death, dying or grieving with a family member or close friend.

		Region			Sex		Age			Education			Race	
	Total	**CAL**	**EDM**	**Rest of AB**	**Male**	**Female**	**18-34**	**35-54**	**55+**	**HS or Less**	**Some PostSec**	**Univ Grad**	**White**	**Non-White**
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
Very comfortable	30%	27%	32%	31%	28%	33%	31%	29%	32%	28%	31%	33%	32%	27%
Somewhat comfortable	37%	37%	37%	37%	37%	38%	31%	40%	39%	33%	41%	38%	39%	34%
Neither comfortable nor uncomfortable	18%	20%	18%	17%	20%	17%	24%	16%	17%	23%	15%	15%	17%	23%
Somewhat uncomfortable	8%	9%	9%	7%	9%	7%	7%	7%	11%	8%	9%	8%	8%	10%
Very uncomfortable	6%	6%	3%	9%	6%	6%	8%	8%	2%	8%	4%	5%	4%	7%
Very/Somewhat comfortable	*67%*	*65%*	*69%*	*68%*	*65%*	*71%*	*62%*	*69%*	*71%*	*61%*	*72%*	*71%*	*71%*	*61%*

Statistically higher **Statistically lower**

Q19. How comfortable do you, or would you, feel talking about death, dying or grieving with a family member or close friend?
Base: All respondents (n=802)

Frequency of Discussing Death and Dying by Demographic Subgroups

White respondents are more likely than non-white respondents to discuss death and dying in their family. However, non-white respondents are more likely than white respondents to have these discussions in their community.

Discuss Often/Sometimes

		Region			Sex		Age			Education			Race	
	Total	CAL	EDM	Rest of AB	Male	Female	18-34	35-54	55+	HS or Less	Some PostSec	Univ Grad	White	Non-White
Sample Size	802	308	288	206	356	441	211	313	278	170	291	341	524	254
In my family we discuss death and dying	51%	46%	51%	55%	44%	57%	49%	51%	53%	51%	51%	51%	55%	44%
In my community we discuss death and dying	25%	25%	26%	23%	28%	22%	32%	25%	19%	23%	24%	28%	21%	33%

Statistically higher **Statistically lower**

Q20. *Please indicate how often you do each of the following.*
Base: All respondents (n=802)

Preferred Information Formats by Demographic Subgroups

The biggest gap in preferred format is that older respondents have a much bigger preference for print materials.

		Region			Sex		Age			Education			Race	
	Total	CAL	EDM	Rest of AB	Male	Female	18-34	35-54	55+	HS or Less	Some PostSec	Univ Grad	White	Non-White
Sample Size	772	299	278	195	341	427	211	296	265	162	282	328	501	250
Email	43%	48%	42%	38%	43%	42%	35%	45%	46%	34%	48%	49%	41%	49%
Print materials	42%	37%	40%	47%	31%	51%	20%	43%	60%	38%	44%	44%	47%	32%
Internet, other than social media	37%	40%	33%	37%	41%	33%	38%	41%	32%	33%	34%	44%	35%	44%
In-person workshop or presentation	34%	34%	30%	37%	33%	35%	32%	35%	34%	28%	37%	38%	35%	33%
Online webinar or presentation	25%	28%	25%	23%	25%	26%	16%	29%	30%	17%	26%	36%	24%	30%
Television	17%	18%	17%	15%	18%	16%	18%	19%	13%	16%	15%	19%	15%	22%
Videos	17%	19%	17%	14%	20%	13%	14%	24%	11%	15%	16%	19%	14%	24%
Social media	15%	17%	15%	12%	14%	14%	21%	16%	7%	15%	13%	15%	12%	20%
Podcasts	12%	13%	13%	9%	14%	10%	12%	15%	7%	10%	13%	13%	11%	14%
Do not want information	6%	3%	7%	7%	6%	5%	10%	2%	6%	9%	4%	3%	6%	4%
Don't know	10%	7%	11%	13%	13%	8%	13%	12%	7%	13%	9%	8%	10%	7%

Statistically higher **Statistically lower**

Q21. *In what format would you prefer to receive information about palliative care and/or advance care planning? Select all that apply.*
Base: Excluding those who earlier said they do not want this information (n=772)

Conclusions and Next Steps

Public awareness of palliative care and advance care planning in Alberta appears to be trending in the right direction. However, more needs to be done to ensure that this awareness translates into actions such as having conversations about planning ahead, palliative care, death, dying or grieving, preparing personal planning documents, and building supportive communities. This survey also provides insight into when, where and how Albertans would like to receive information about advance care planning and palliative care – knowledge that can be leveraged to ensure education efforts are timely, relevant and accessible.

To complement the ongoing, outstanding work being done by many organizations to improve care and support for people who are sick, dying or grieving, the Palliative Institute has developed resources to help Albertans plan ahead, learn about palliative care, build community support for people living with serious illness, and talk about death and dying. Learn more at www.CompassionateAlberta.ca.

For more information on this report or to contact the Palliative Institute, please email: palliative.institute@covenanthealth.ca

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