ALBERTANS' VIEWS ON ADVANCE CARE PLANNING & PALLIATIVE CARE

Public Poll Report

September 15, 2025

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, and again in August 2025, 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

This survey includes 800 adult (18+) Albertans and was fielded online from August 11-21, 2025.

Survey results are compared to an identical survey of 802 Albertans fielded 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 (2025)

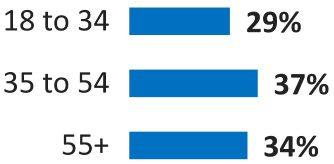
GENDER

49% Male

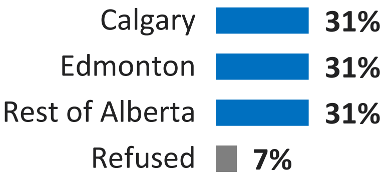
50% Female

1% Other/Prefer not to answer

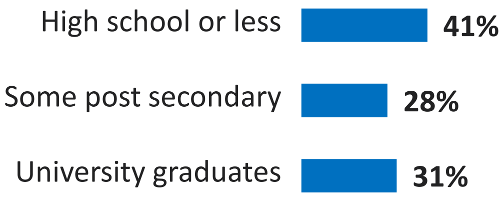
AGE



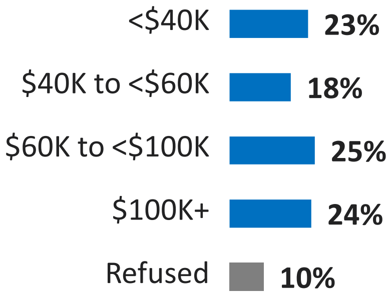
REGION



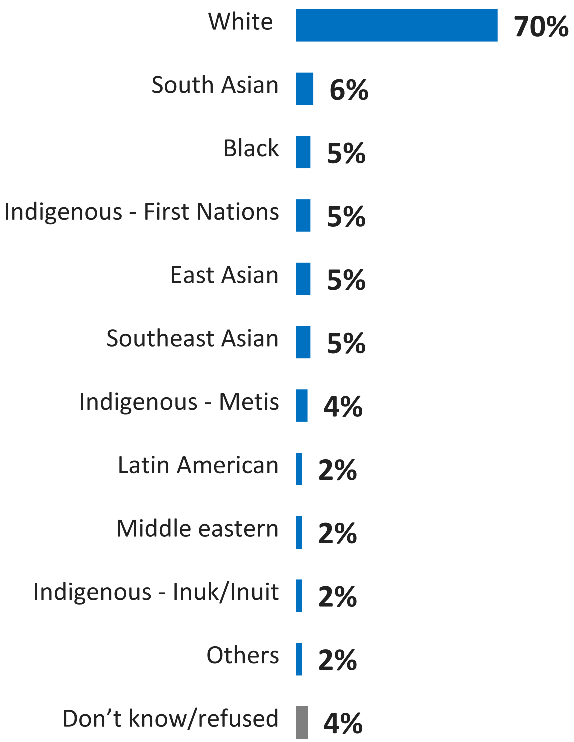
EDUCATION



HOUSEHOLD INCOME



RACE-BASED IDENTITY



Base: All respondents (n=800)

SUMMARY OF KEY FINDINGS

Covenant Health
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KEY FINDINGS

- **In 2025, four-in-ten (40%) Albertans have heard the term 'advance care planning'.** This figure is consistent with 2024 (39%), and has been increasing over the past decade, with awareness at 26% in 2013 and 31% in 2019.
- **Albertans are most likely to have had advance care planning conversations with family (51%),** a proportion that is consistent with previous years.
- **Most Albertans do not have personal planning documents**: 41% have a will, 28% have a personal directive, and 28% have an enduring power of attorney.
- Albertans think it is most important to do advance care planning **when you experience a change in your health (58%), when you make a will (47%), or when you become a parent or guardian (46%**).
- **Healthcare providers (47%) are Albertans' most preferred source for information on advance care planning and palliative care**, followed by family/friends (38%) and lawyers/legal professionals (30%).

KEY FINDINGS CONT'D

Covenant Health
Palliative Institute

- **Nearly three-quarters (73%) of Albertans are either "very aware" or "somewhat aware" of palliative care**. This is consistent with 2024 (73%), but much higher than in 2016 (58%).
- **Very few Albertans have heard the term Compassionate Communities** (15% in 2025, 13% in 2024).
- While **a majority (62%) of Albertans agree that caring for people with serious illness is everyone's responsibility**, only 33% are aware of supports available in their community, and 37% feel they would know how to support someone with a serious illness.
- If a loved one were diagnosed with a serious illness, **Albertans would be most likely to access support from family (81%), friends (67%) or a hospice/palliative care society (63%).**
- **More than 6 in 10 Albertans (61%) are comfortable talking about death, dying or grieving** with a family member or close friend, but only 9% report 'often' discussing this topic with their family.
- Albertans want information about palliative care and/or advance care planning **via email (43%), print materials (34%, down from 42% in 2024), the internet (32%) and through in-person workshops/presentations (32%)**.

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DETAILED FINDINGS

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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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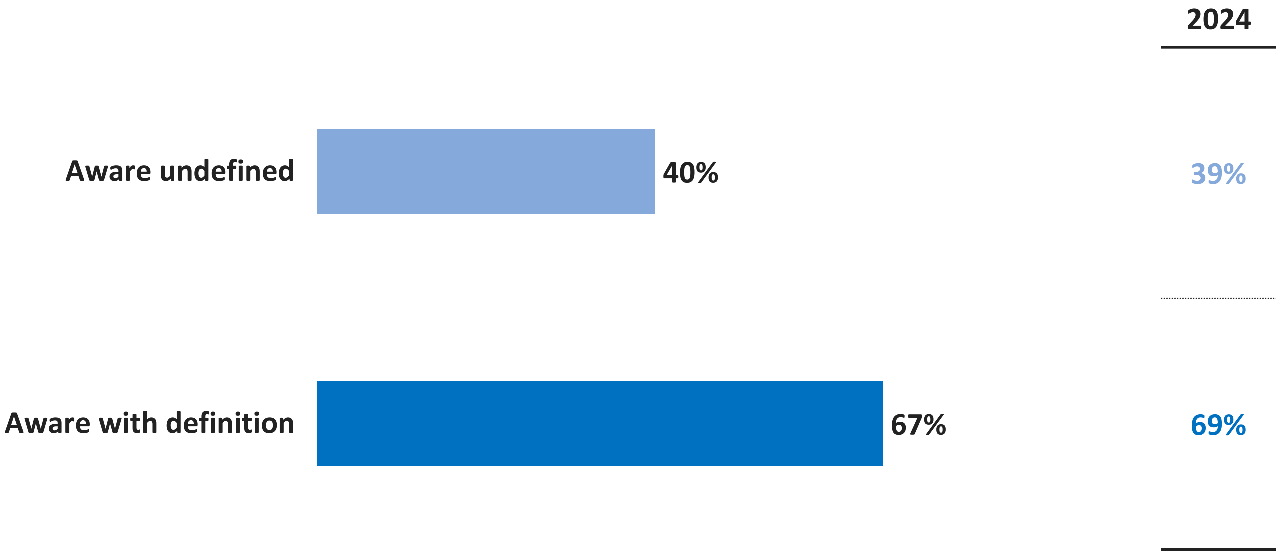
Awareness of Advance Care Planning

Four-in-ten (40%) Albertans have heard of advance care planning (undefined). With the benefit of a definition, awareness rises to two-thirds (67%) of 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?*

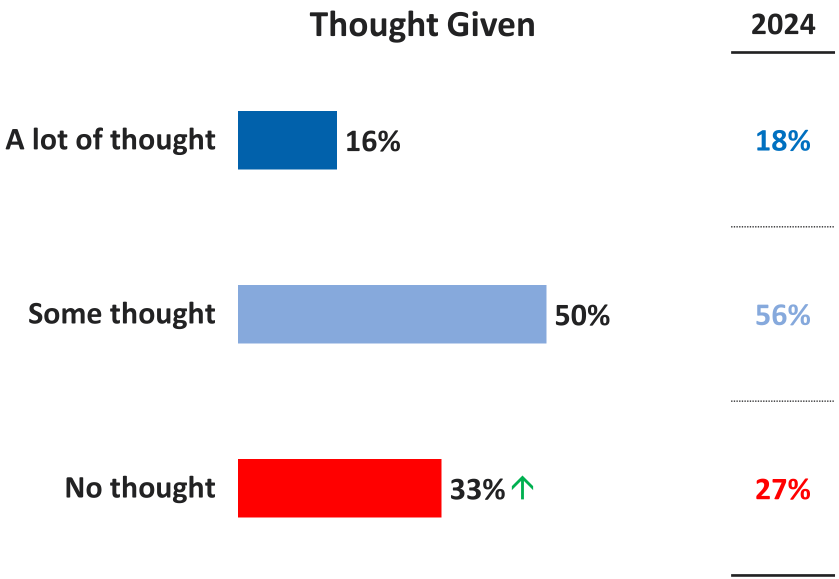
Base: All respondents 2025 (n=800), 2024 (n=802)

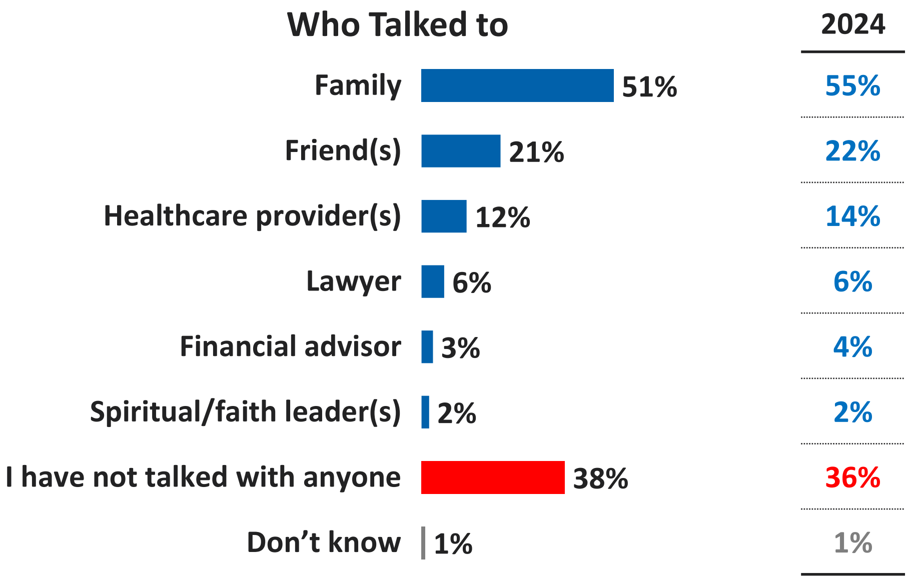
↑↓ statistically significant differences from 2024

Advance Care Planning Thoughts and Conversations

Two-thirds (66%) of Albertans say they have given at least “some thought” to what kind of health and personal care they would like to receive if they became seriously ill, although fewer than two-in-ten (16%) have given this “a lot of thought”.

About half (51%) 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 (38%) have not talked to anyone.





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?*

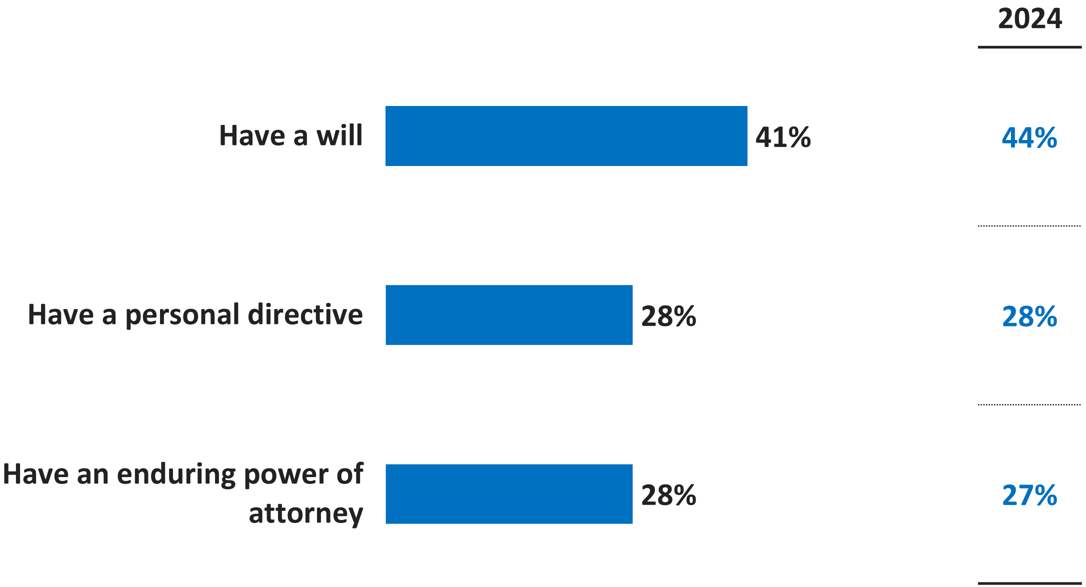
Q4. *Have you talked with anyone about what kind of health and personal care you would like to receive if you became too ill or injured to speak for yourself? Select all that apply.*

Base: All respondents 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

Personal Planning Documents

About four-in-ten (41%) Albertans say they have a will. Closer to three-in-ten have a personal directive (28%) and an enduring power of attorney (28%).



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 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

Awareness of MyAHS Connect

Very few (13%) Albertans are aware they can upload their advance care planning documents to their MyAHS Connect account.

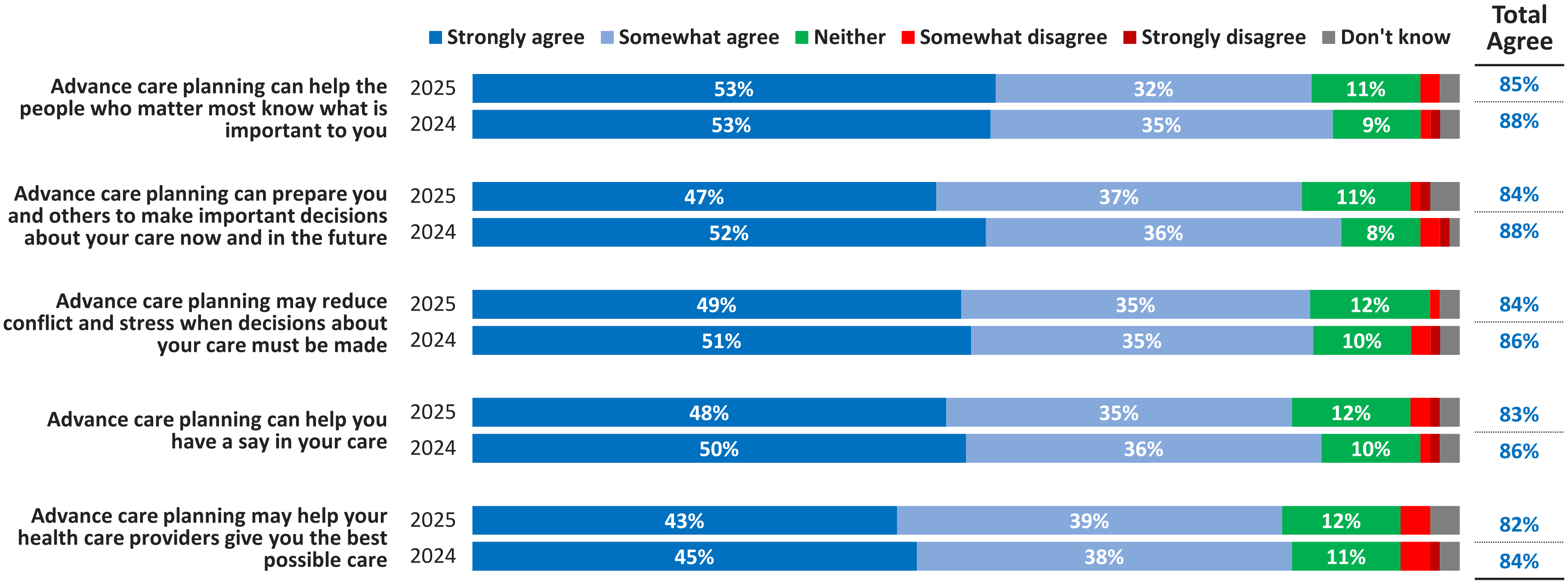
Q8. *Did you know that you can upload your advance care planning documents, such as your personal directive, to your MyAHS Connect account? (MyAHS Connect is a secure, online, interactive tool, provided by Alberta Health Services, that lets you see some of your personal health information.)*

Base: All respondents 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

Beliefs About Advance Care Planning

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



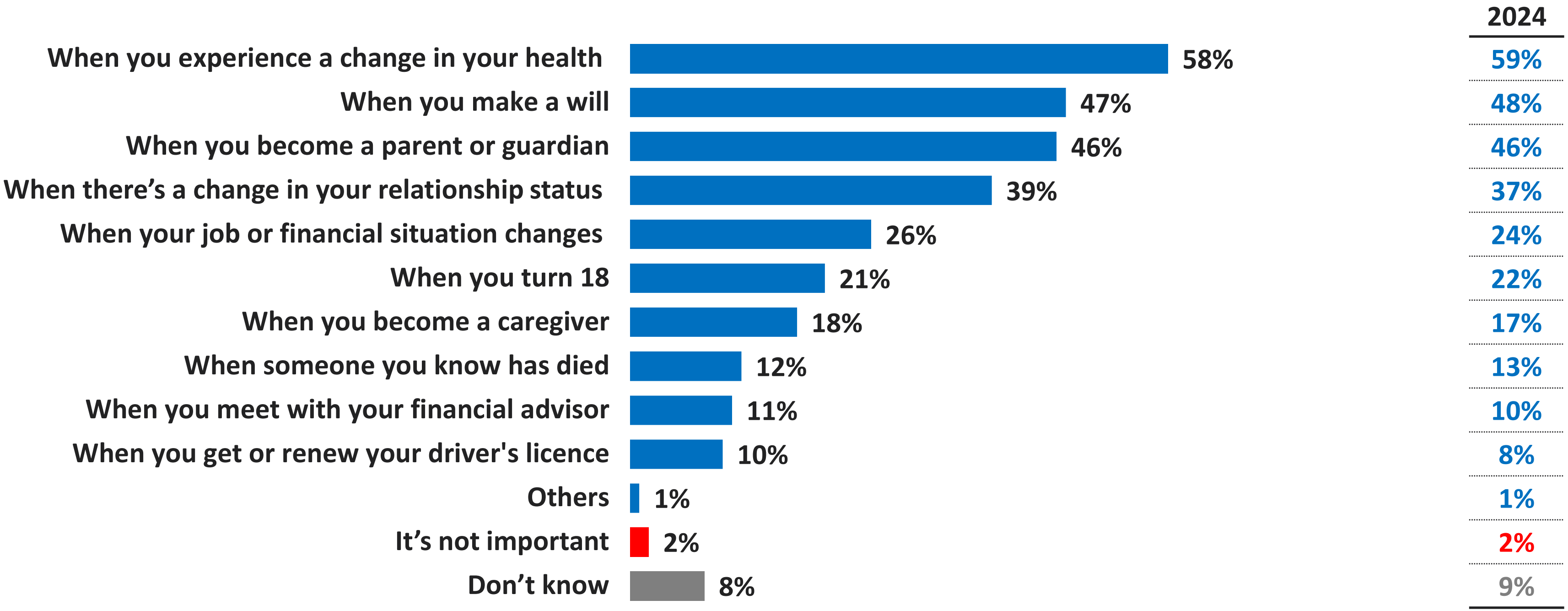
Q9. *Please rate how much you agree/disagree with the following statements. For reference: Advance care planning is a process of thinking about, talking about, and sometimes documenting the kinds of care you would want, and who you would like to speak for you, if you were too ill or injured to speak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

Base: All respondents 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

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 (58%). They are next most likely to say advance care planning is important when you make a will (47%), when you become a parent or guardian (46%) and when there's a change in your relationship status (39%).



Q10. *Thinking of the following situations, when do you think it is important to do advance care planning? Select all that apply.*

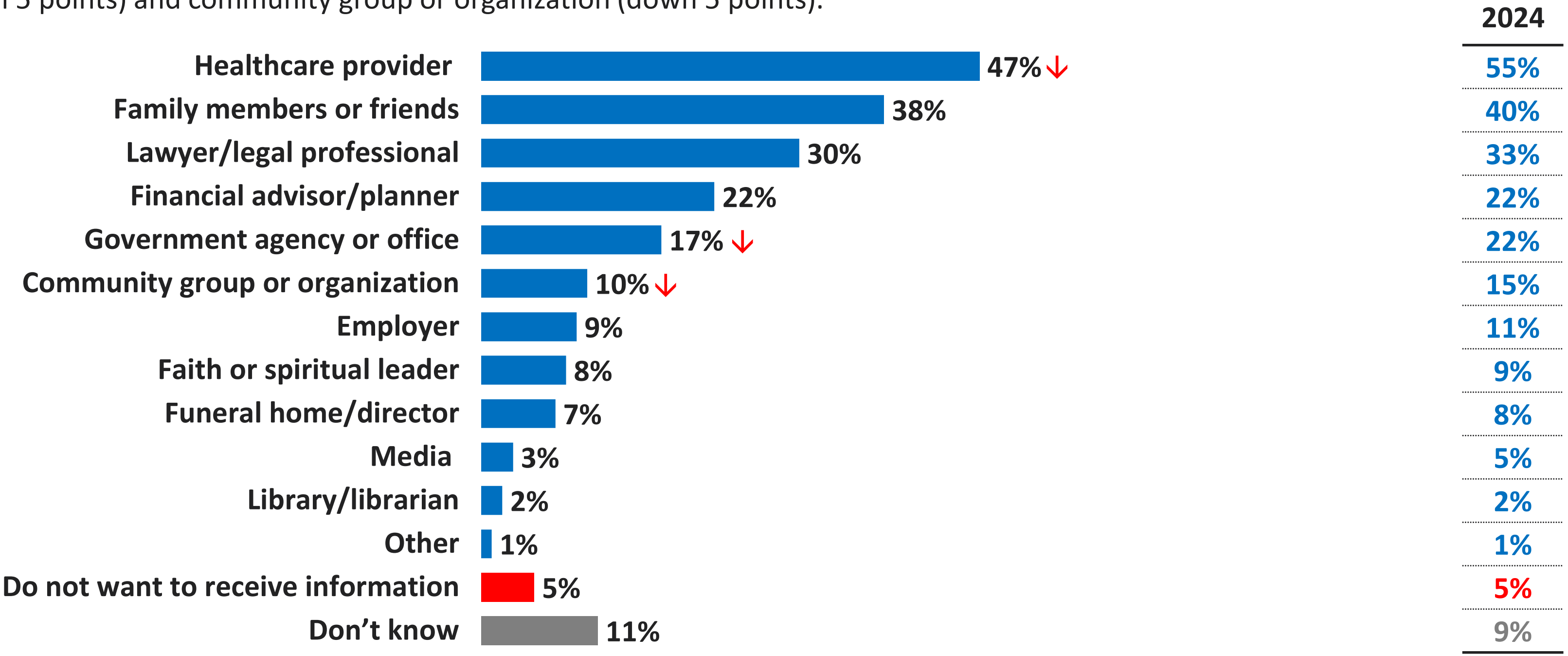
Base: All respondents 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

Preferred Sources of Advance Care Planning Information

Albertans would most like to receive information about advance care planning from their healthcare provider (47%), followed by family/friends (38%) and lawyers/legal professionals (30%).

Compared to 2024, mentions have statistically declined for healthcare providers (down 8 points), government office or agency (down 5 points) and community group or organization (down 5 points).



Q11. *From whom would you prefer to receive information about advance care planning? Select all that apply.*

Base: All respondents 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

PALLIATIVE CARE

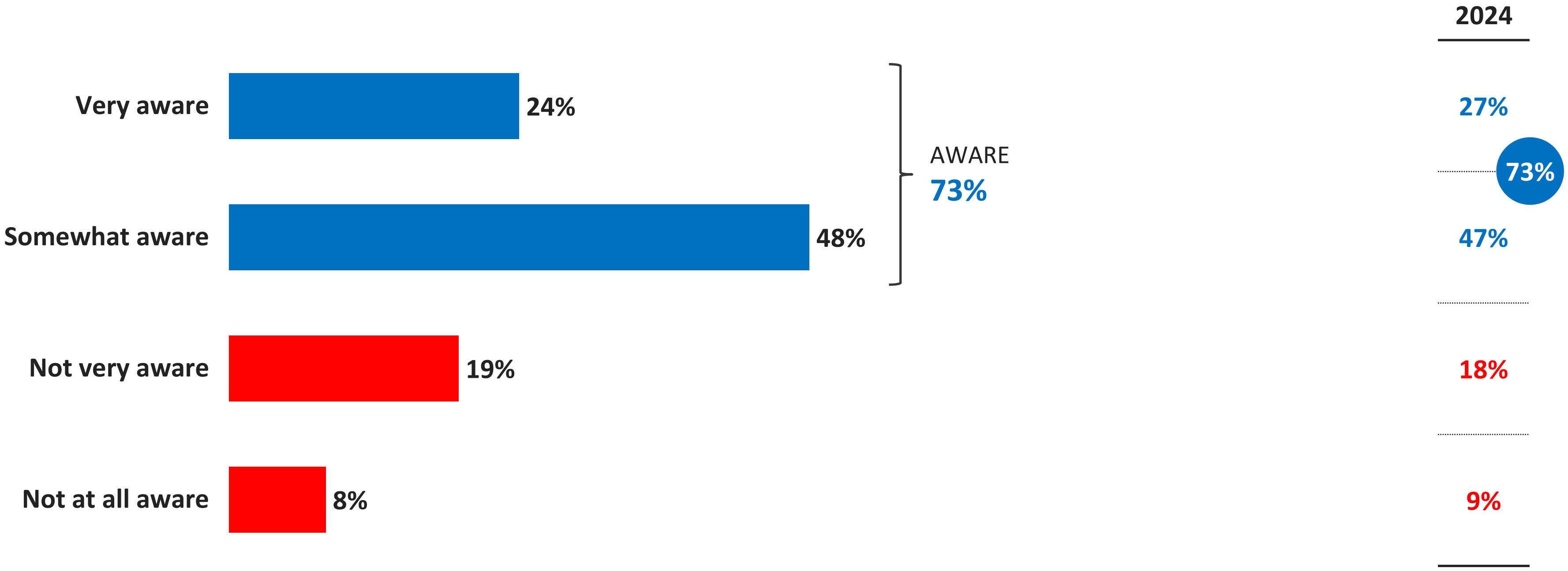
Covenant Health
Palliative Institute

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" (24%) or "somewhat aware" (48%) of palliative care.



Q12. How would you describe your awareness of palliative care?
Base: All respondents 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

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

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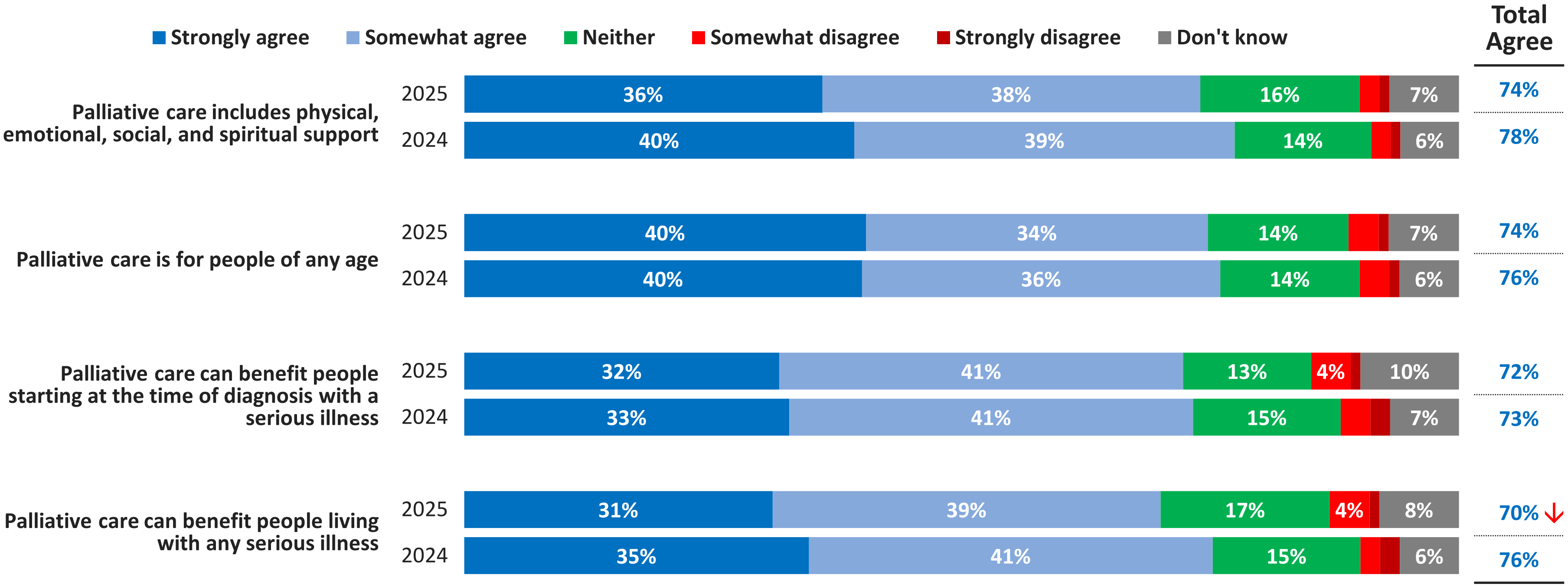
Compared to 2024, there has been a statistically significant 6-point drop in agreement that palliative can benefit people living with any serious illness (70% vs. 76% in 2024).



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

Base: All respondents 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

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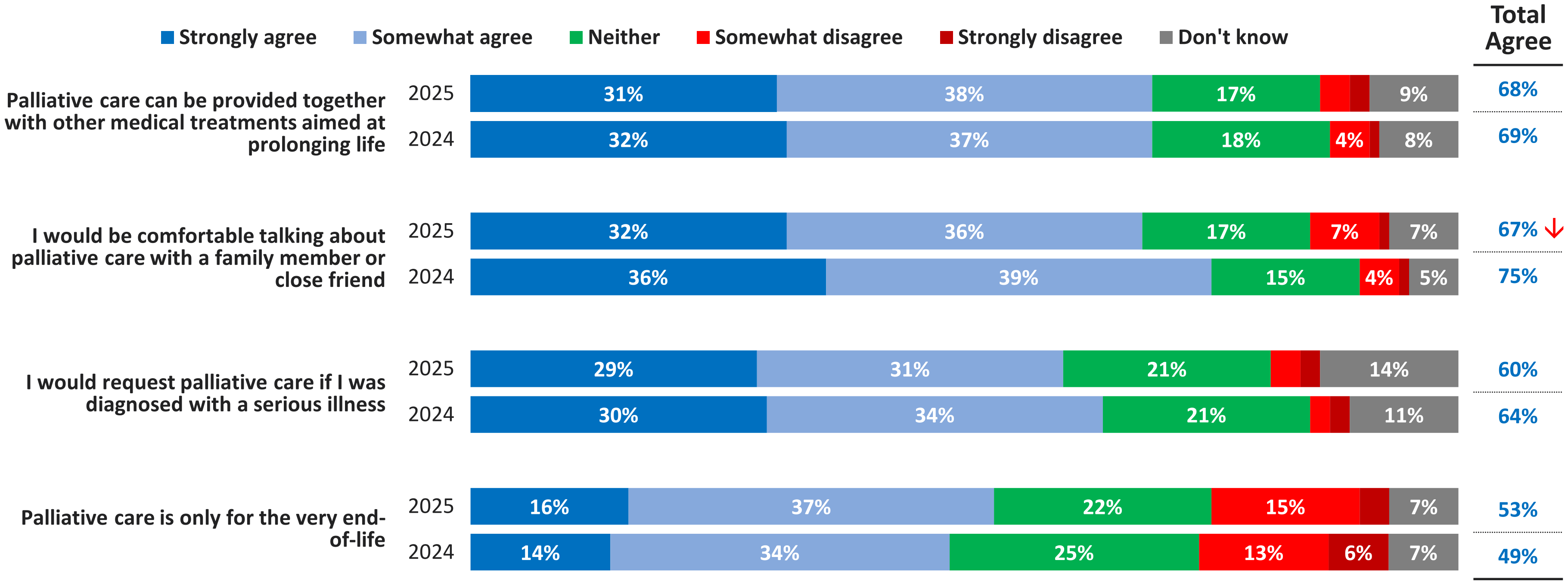
Knowledge and Attitudes Toward Palliative Care (slide 2 of 2)

Compared to 2024, there has been a statistically significant 8-point drop in agreement that Albertans would be comfortable talking about palliative care with a family member or close friend (67% vs. 75% in 2024).



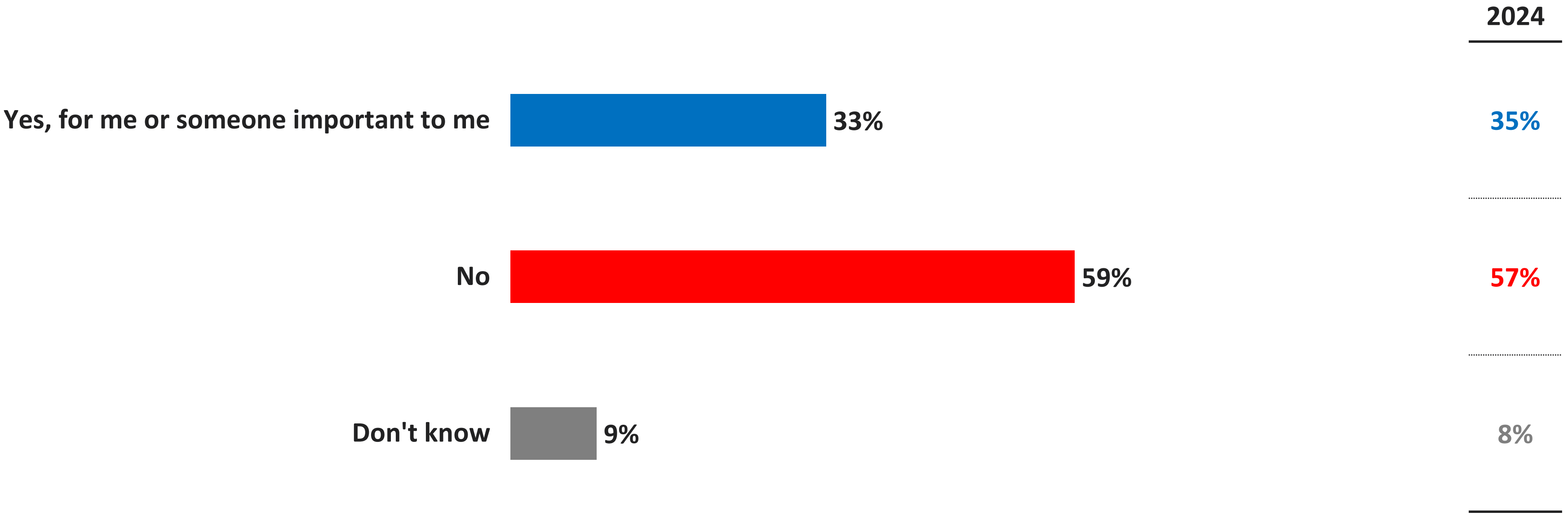
Q13. *Please rate how much you agree/ disagree with the following statements.*

Base: All respondents 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

Personal Experience with Palliative Care in Past 10 Years

One-third (33%) of Albertans say they or someone important to them has received palliative care within the past 10 years.



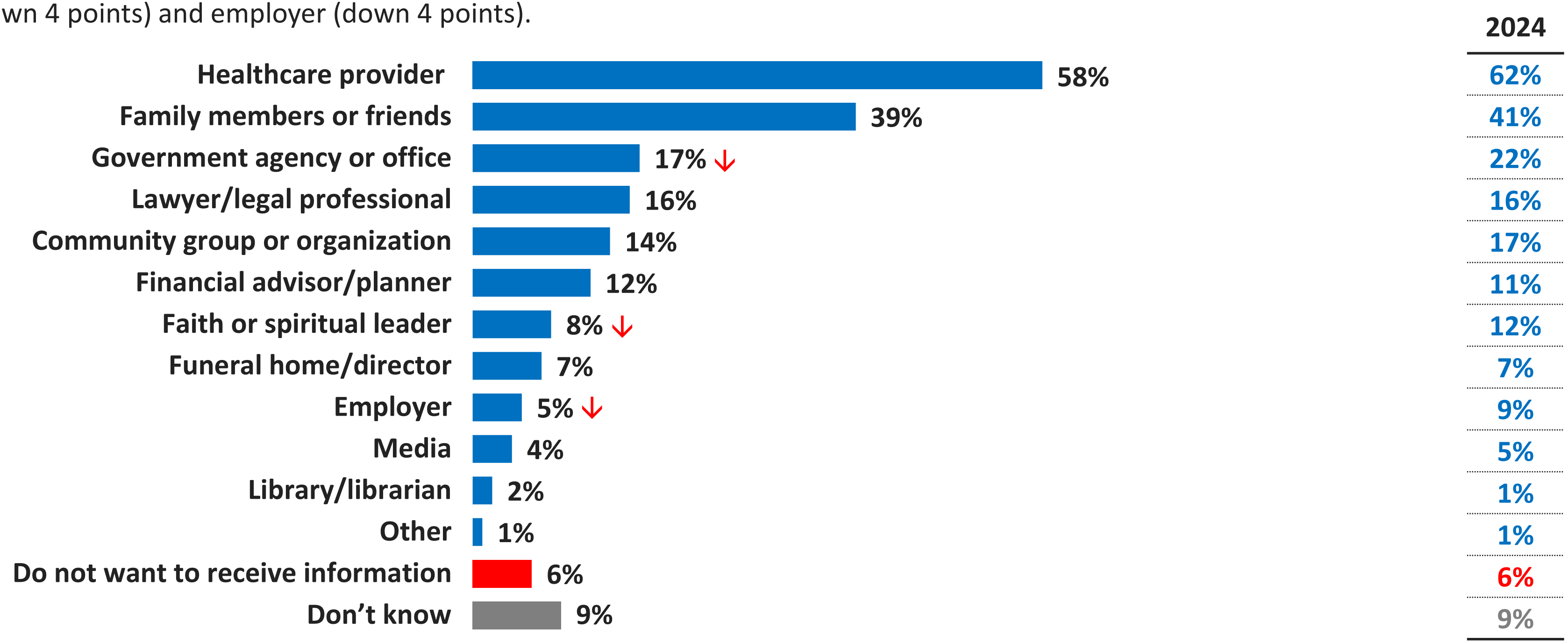
Q14. *Within the past 10 years, have you or someone important to you received palliative care?*
Base: All respondents 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

Preferred Sources of Palliative Care Information

A healthcare provider (58%) is the most preferred source of information about palliative care, followed by a family member or friends (39%). No other source is mentioned by more than 17% of Albertans.

Compared to 2024, mentions have statistically declined for government office or agency (down 5 points), faith or spiritual leader (down 4 points) and employer (down 4 points).



Q15. *From whom would you prefer to receive information about palliative care? Select all that apply.*

Base: All respondents 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

COMMUNITY SUPPORT FOR LIVING WITH A SERIOUS ILLNESS

Covenant Health
Palliative Institute

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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

Fewer than two-in-ten (15%) Albertans say they have heard of the term Compassionate Communities.

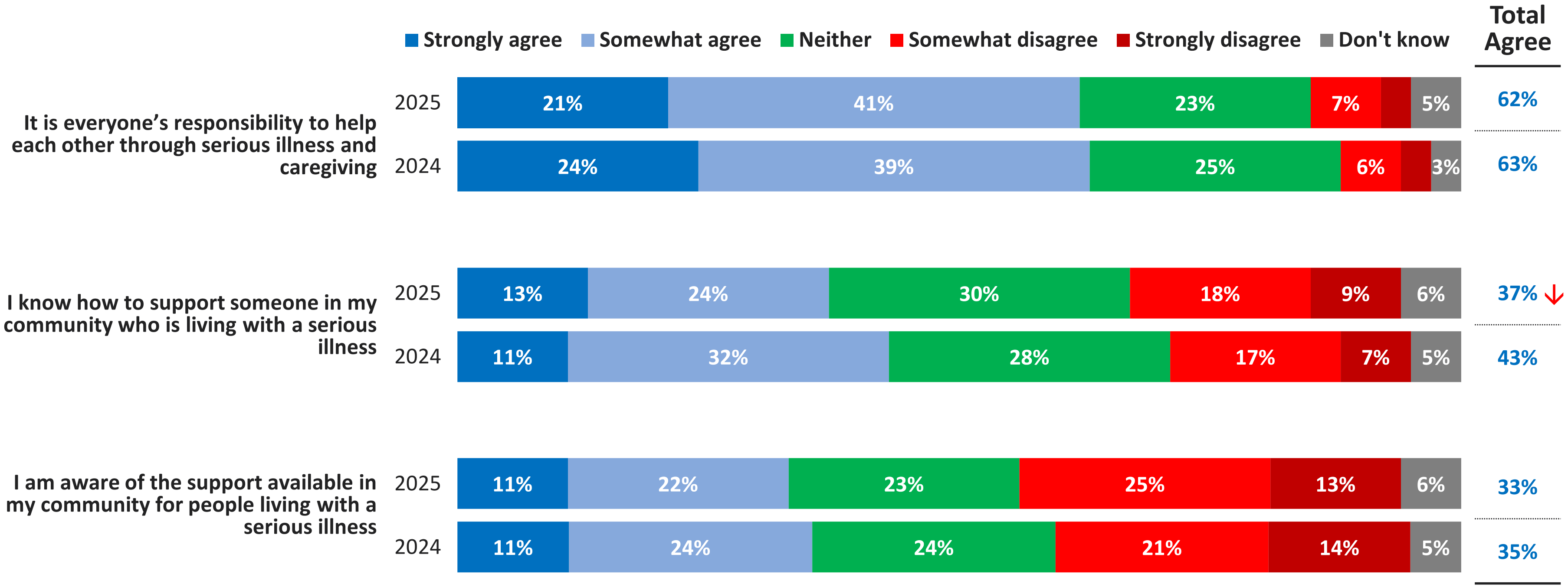
Q16. Have you heard of the term Compassionate Communities?

Base: All respondents 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

Community Support for People Living with a Serious Illness

Compared to 2024, there has been a statistically significant 6-point drop in agreement that Albertans know how to support someone in their community who is living with a serious illness (37% vs. 43% in 2024).



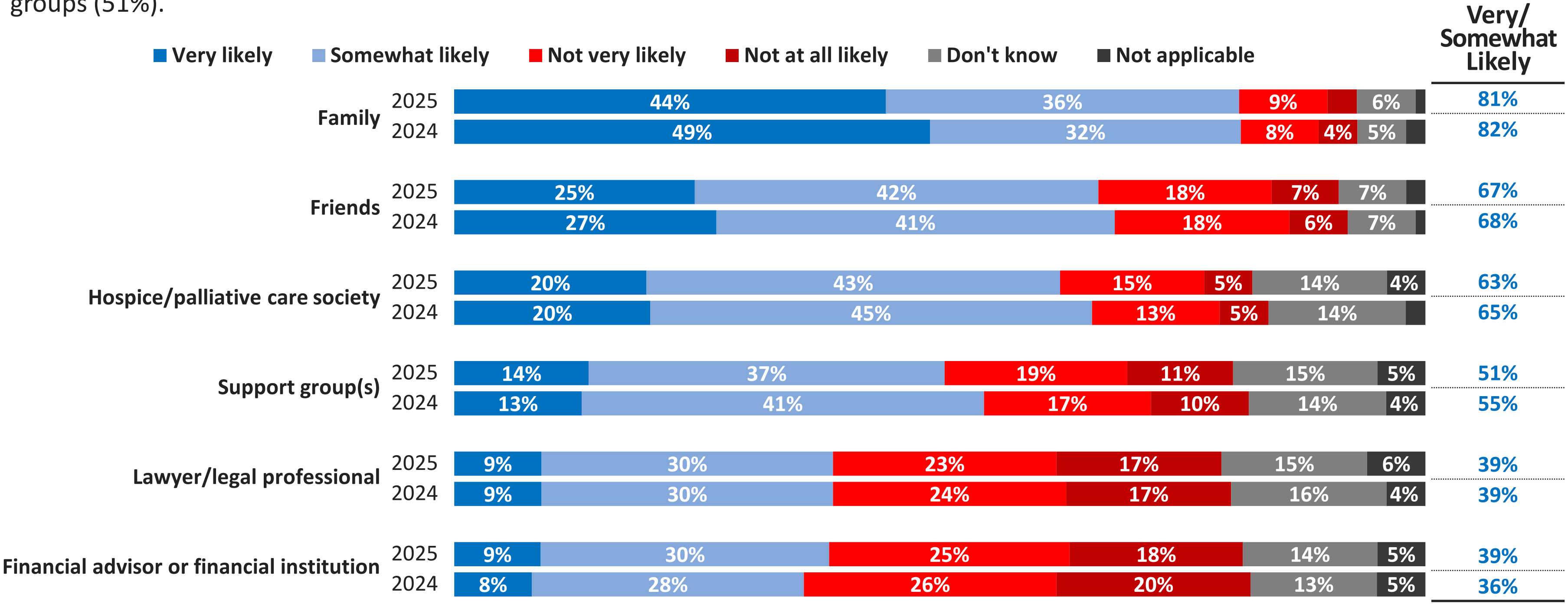
Q17. *Please rate how much you agree/disagree with the following statements.*

Base: All respondents 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

Likelihood to Access Community Supports (slide 1 of 2)

Albertans would be most likely to access support from family (81% very or somewhat likely) if they or a loved one were diagnosed with a serious illness. Other top sources of support include friends (67%), a hospice/palliative care society (63%) and support groups (51%).



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 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

Likelihood to Access Community Supports (slide 2 of 2)

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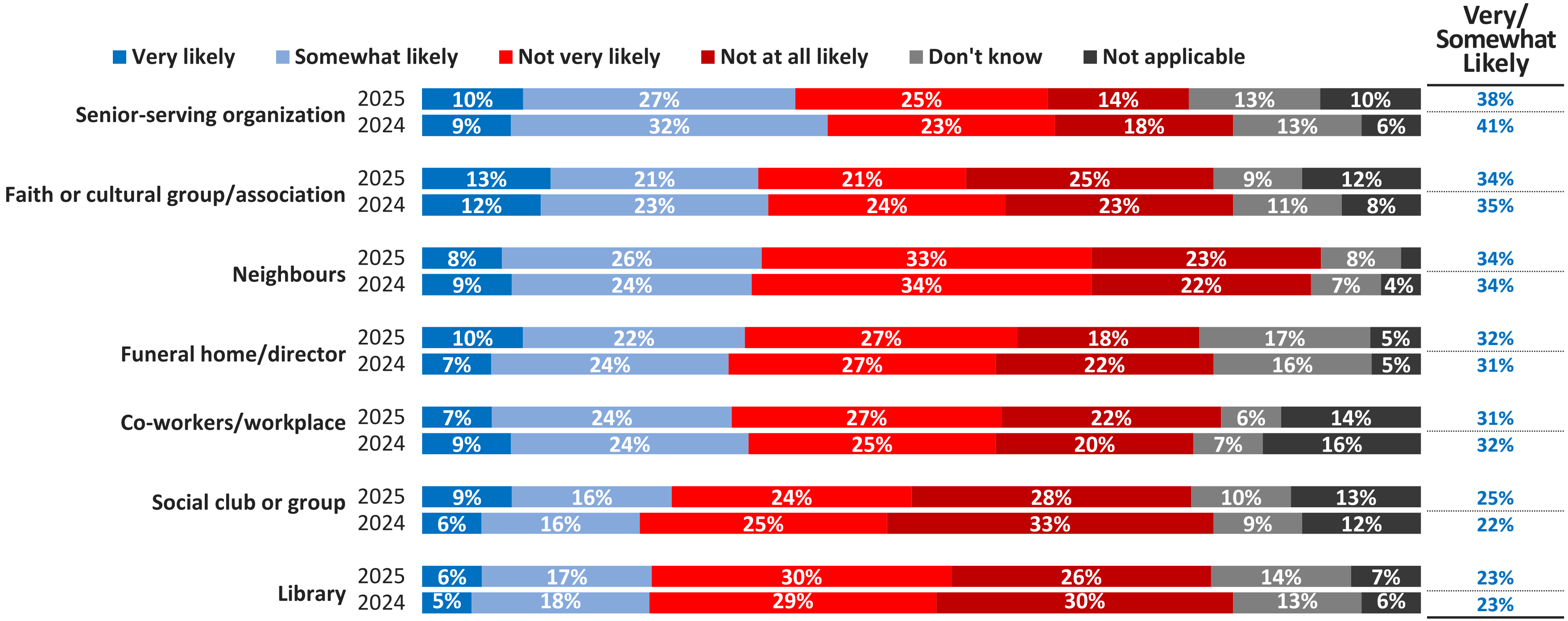
Albertans would be least likely to access support from a library (23% very or somewhat likely) or a social club/group (25%) if they or a loved one were diagnosed with a serious illness.



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 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

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COMFORT TALKING ABOUT DEATH AND DYING

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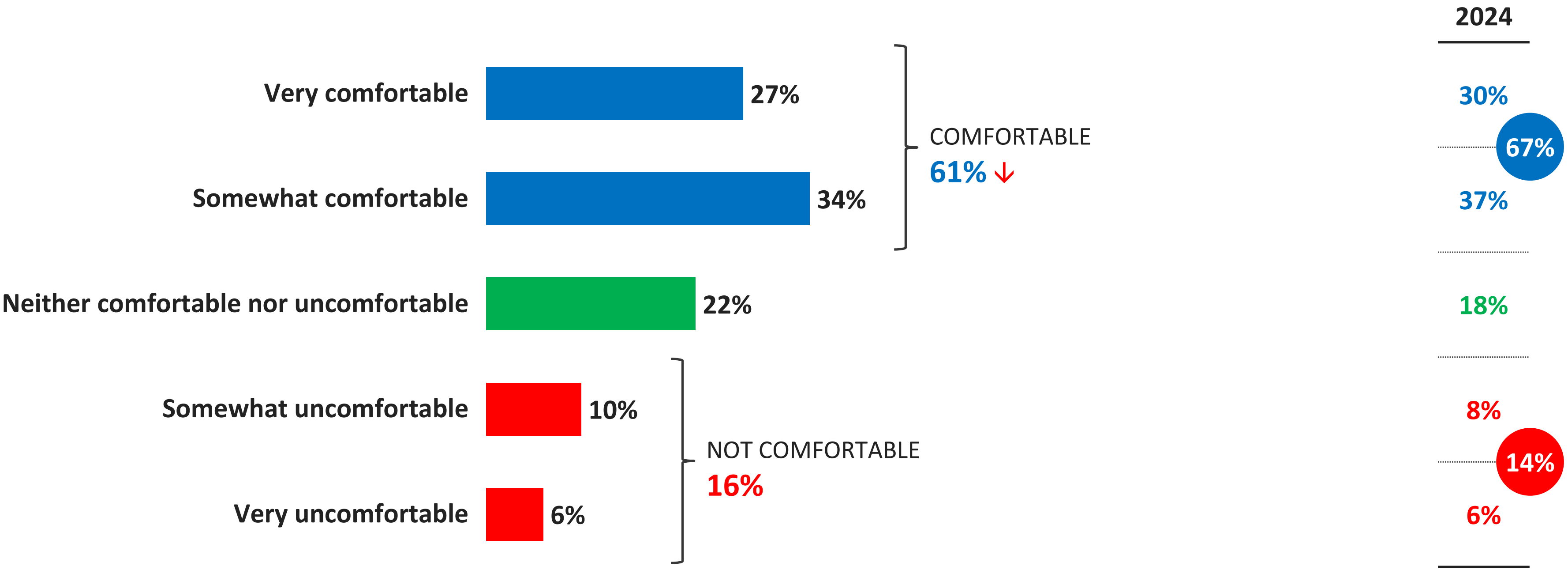
Comfort Talking About Death, Dying or Grieving

Six-in-ten (61%) Albertans say they would be comfortable (very or somewhat) talking about death, dying or grieving with a family member or close friend. This is a statistically significant 6-point decline compared to 2024.



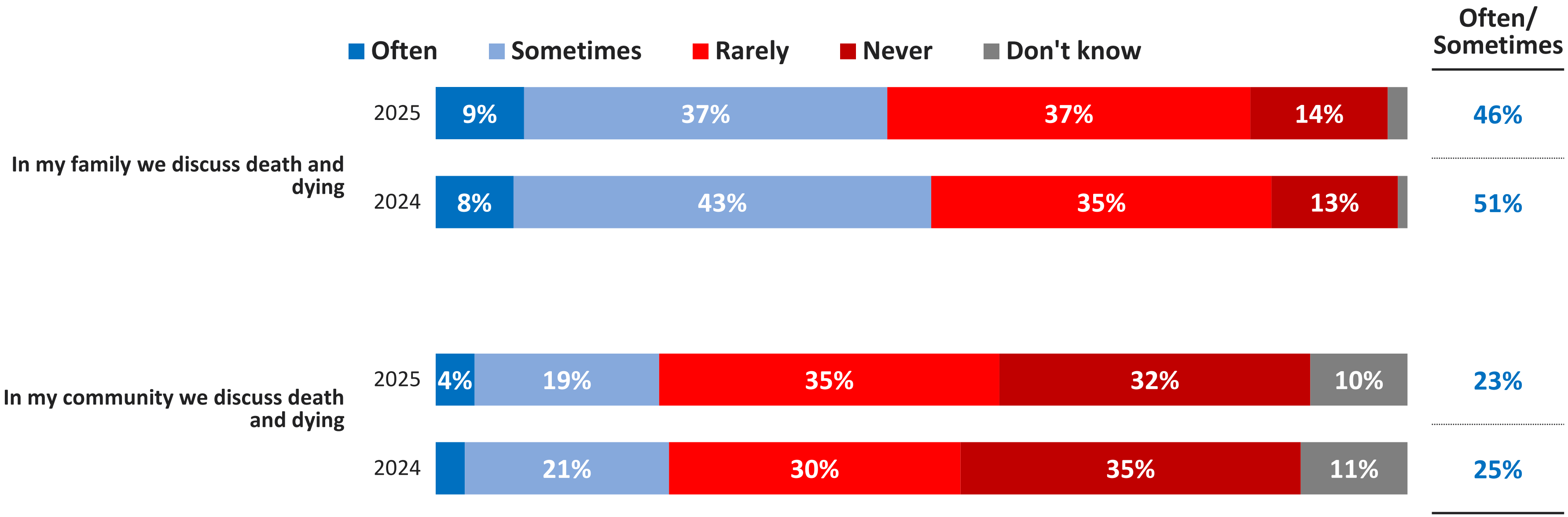
Q19. How comfortable do you, or would you, feel talking about death, dying or grieving with a family member or close friend?

Base: All respondents 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

Frequency of Discussing Death and Dying

Nearly half (46%) of Albertans say they "often" or "sometimes" discuss death and dying with their family, and almost one-quarter (23%) 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 2025 (n=800), 2024 (n=802)

↑↓ statistically significant differences from 2024

PREFERRED INFORMATION FORMATS

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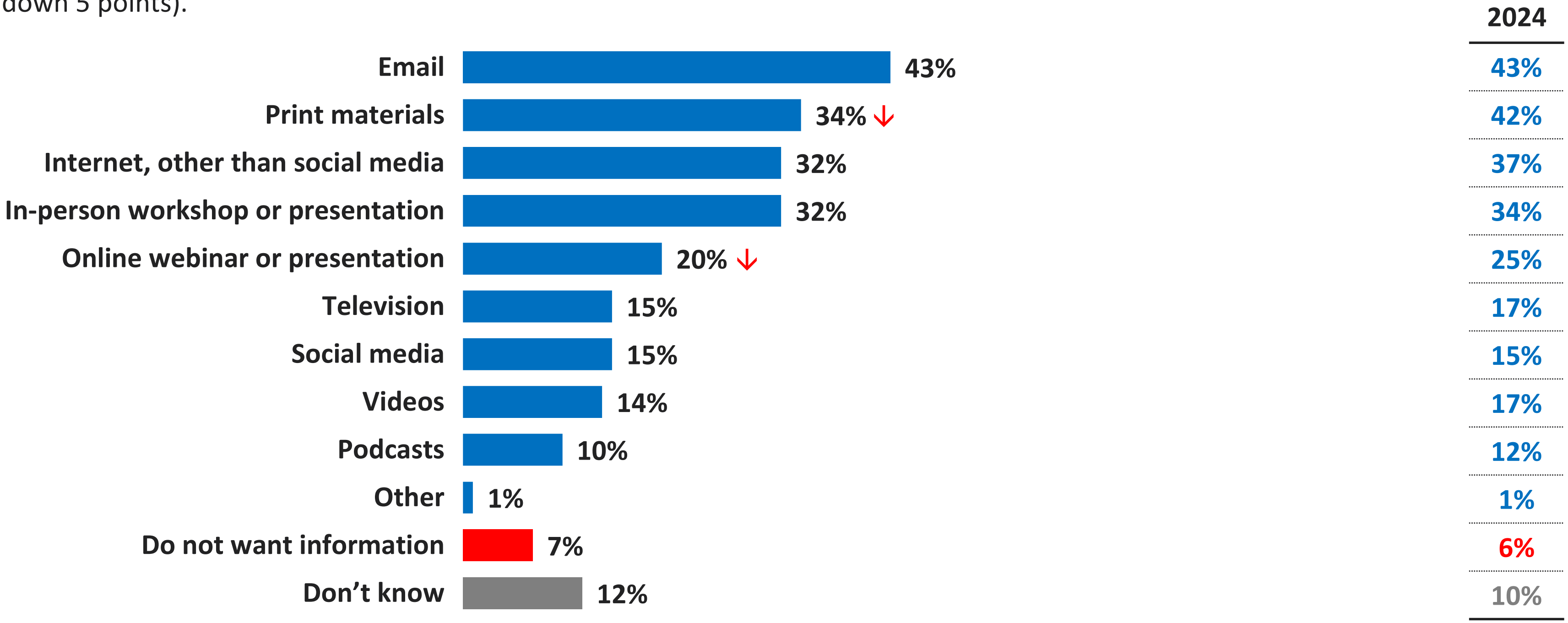
Preferred Information Formats

The most preferred formats for information about palliative care and/or advance care planning include email (43%), print materials (34%), internet other than social media (32%) and in-person workshops/presentations (32%).

Compared to 2024, mentions have statistically declined for print materials (down 8 points) and online webinars/presentations (down 5 points).



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 2025 (n=800), 2024 (n=772)

↑↓ statistically significant differences from 2024

SUBGROUP DIFFERENCES

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Differences Among Subgroups*

AGE

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

- Are more likely to have all three advance care planning documents
- Have lower awareness of MyAHS Connect
- Have higher awareness of palliative care
- Are more comfortable talking about palliative care
- Are less aware of the term ‘Compassionate Communities’
- Are more likely to have had personal experience with palliative care in the past 10 years
- Are less likely to know how to support someone living with a serious illness
- Have a higher preference for information in the form of email, print materials and online presentations or webinars, and a lower preference for social media

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

Differences Among Subgroups Cont'd

⚥ GENDER

Compared to women, men:

- Are more likely to have all three advance care planning documents
- Are more likely to believe that palliative care can be provided together with other life prolonging medical treatments
- Are less likely to discuss death and dying in their family

Differences Among Subgroups Cont’d

EDUCATION

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

- Have higher awareness of advance care planning (defined and undefined)
- Are more likely to have all three advance care planning documents
- Have higher awareness of MyAHS Connect
- Are more likely to have had advance care planning conversations
- Are more likely to believe in the benefits of advance care planning and palliative care
- Are more likely to have had personal experience with palliative care in the past 10 years
- Are more aware of the term ‘Compassionate Communities’
- Are more likely to know how to support someone living with a serious illness
- Are less likely to discuss death and dying in their family
- Have a higher preference for information in all formats except television

Differences Among Subgroups Cont'd

RACE-BASED IDENTITY

Compared to non-white Albertans, white Albertans:

- Are less likely to have had advance care planning conversations
- Are more likely to have a will
- Have lower awareness of MyAHS Connect
- Are more likely to believe in the benefits of advance care planning
- Have higher awareness of palliative care
- Are more likely to have had personal experience with palliative care in the past 10 years
- Have lower awareness of the term 'Compassionate Communities'
- Are less likely to know how to support someone living with a serious illness
- Are more comfortable talking about death, dying or grieving with family or friends
- Are more likely to discuss death and dying in their family, but less likely in their community
- Have a higher preference for information in the form of print materials, and a lower preference for videos, and social media

DETAILED TABLES

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Awareness of Advance Care Planning by Demographic Subgroups

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Aided and unaided 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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Aware unaided	40%	39%	44%	39%	40%	39%	40%	43%	36%	32%	41%	49%	41%	40%
Aware with definition	67%	68%	68%	68%	68%	66%	67%	67%	69%	61%	71%	73%	69%	66%

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)

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Advance Care Planning Thoughts and Conversations by Demographic Subgroups

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

Those in the 35-to-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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Thought Given														
A lot of thought	16%	17%	18%	15%	20%	13%	18%	16%	15%	10%	17%	24%	14%	23%
Some thought	50%	47%	55%	50%	49%	51%	50%	46%	56%	49%	55%	48%	51%	51%
No thought	33%	37%	27%	35%	32%	35%	31%	39%	29%	41%	29%	28%	35%	26%
Who Talked To														
Family	51%	46%	56%	55%	53%	49%	50%	44%	59%	47%	50%	57%	52%	53%
Friend(s)	21%	19%	26%	16%	20%	21%	31%	23%	10%	21%	19%	22%	18%	28%
Healthcare provider(s)	12%	12%	15%	9%	13%	10%	17%	10%	9%	8%	13%	16%	9%	21%
Lawyer	6%	6%	7%	7%	8%	5%	4%	5%	10%	4%	7%	9%	6%	7%
Financial advisor	3%	4%	3%	2%	5%	1%	4%	3%	2%	2%	3%	5%	2%	7%
Spiritual/faith leader(s)	2%	2%	4%	1%	2%	3%	4%	1%	2%	1%	5%	2%	2%	5%
I have not talked with anyone	38%	42%	31%	41%	36%	40%	33%	45%	35%	43%	39%	31%	40%	28%

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)

Personal Planning Documents by Demographic Subgroups

Older Albertans, men and university graduates are more likely to have all three planning documents. White residents are more likely than non-white residents to have a will.

		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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Have a will	41%	42%	43%	40%	52%	31%	23%	32%	68%	31%	46%	51%	45%	33%
Have a personal directive	28%	26%	29%	30%	33%	23%	21%	23%	39%	23%	26%	35%	29%	28%
Have an enduring power of attorney	28%	29%	31%	26%	34%	22%	19%	21%	43%	22%	25%	38%	30%	25%

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 residents, non-white residents and university graduates are more 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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Yes, aware	13%	14%	16%	8%	14%	11%	21%	12%	7%	9%	16%	16%	9%	22%

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 the positive statements about advance care planning tends to be higher among white residents and more educated residents.

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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Advance care planning can help the people who matter most know what is important to you	85%	85%	83%	88%	85%	85%	78%	87%	89%	80%	89%	89%	89%	77%
Advance care planning can prepare you and others to make important decisions about your care now and in the future	84%	85%	84%	86%	85%	83%	80%	86%	87%	80%	88%	87%	87%	80%
Advance care planning may reduce conflict and stress when decisions about your care must be made	84%	84%	83%	88%	84%	84%	82%	83%	87%	80%	89%	86%	87%	82%
Advance care planning can help you have a say in your care	83%	84%	84%	82%	84%	82%	79%	83%	87%	78%	87%	87%	85%	80%
Advance care planning may help your health care providers give you the best possible care	82%	81%	83%	85%	82%	83%	79%	84%	83%	80%	86%	83%	85%	77%

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

Though there are many statistical differences in the table below, experiencing a change in health is the number one trigger for advance care planning for all demographic segments.

		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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
When you experience a change in health	58%	60%	60%	57%	54%	63%	53%	55%	67%	53%	62%	62%	63%	52%
When you make a will	47%	48%	52%	46%	45%	50%	36%	46%	59%	45%	50%	48%	52%	37%
When you become a parent or guardian	46%	49%	45%	47%	38%	53%	47%	52%	37%	40%	51%	48%	50%	38%
When a change in relationship status	39%	40%	38%	38%	34%	43%	32%	42%	40%	34%	40%	43%	43%	28%
When your job/financial situation changes	26%	25%	27%	27%	25%	26%	30%	25%	23%	25%	28%	25%	25%	31%
When you turn 18	21%	20%	24%	19%	22%	20%	28%	19%	18%	24%	21%	19%	21%	23%
When you become a caregiver	18%	19%	21%	16%	16%	21%	19%	19%	16%	17%	18%	19%	19%	17%
When someone you know has died	12%	14%	15%	7%	10%	15%	14%	15%	8%	13%	10%	13%	11%	16%
When you meet your financial advisor	11%	12%	11%	10%	11%	10%	12%	10%	11%	9%	11%	12%	10%	13%
When you get/renew your driver's licence	10%	9%	10%	10%	10%	10%	9%	10%	10%	10%	10%	9%	9%	13%
I do not think it is important	2%	2%	5%	0%	3%	2%	2%	3%	3%	3%	2%	2%	2%	2%
Don’t know	8%	8%	8%	9%	8%	8%	8%	8%	9%	10%	8%	7%	7%	8%

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

Healthcare providers and family members or friends are the top two sources of information about advanced care planning for all demographic segments except university graduates. University graduates choose a healthcare provider and a lawyer/legal professional as their top two sources.

		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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Healthcare provider	47%	46%	49%	47%	45%	49%	45%	43%	53%	37%	54%	54%	50%	42%
Family members or friends	38%	37%	41%	39%	35%	41%	43%	36%	36%	37%	41%	37%	40%	36%
Lawyer/legal professional	30%	33%	32%	29%	30%	30%	27%	29%	34%	22%	31%	40%	31%	30%
Financial advisor/planner	22%	27%	21%	20%	22%	22%	25%	21%	21%	18%	22%	26%	23%	22%
Government agency or office	17%	20%	18%	14%	21%	12%	12%	20%	17%	11%	18%	24%	16%	21%
Community group or organization	10%	15%	8%	10%	11%	10%	11%	11%	9%	10%	8%	13%	9%	15%
Employer	9%	12%	7%	6%	11%	7%	12%	12%	2%	10%	7%	9%	7%	14%
Faith or spiritual leader	8%	7%	11%	8%	9%	8%	10%	9%	6%	8%	10%	7%	6%	14%
Funeral home/director	7%	7%	7%	8%	8%	7%	9%	5%	8%	6%	8%	8%	8%	5%
Media	3%	5%	2%	3%	3%	3%	5%	4%	1%	2%	2%	5%	3%	5%
Library/librarian	2%	3%	2%	1%	2%	2%	4%	1%	1%	2%	1%	3%	1%	4%
Do not want to receive information	5%	3%	7%	5%	5%	5%	3%	5%	6%	6%	6%	3%	4%	3%
Don’t know	11%	9%	11%	11%	9%	12%	11%	12%	9%	15%	8%	7%	10%	10%

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)

Awareness of Palliative Care by Demographic Subgroups

Covenant Health
Palliative Institute

Awareness of palliative care is higher among older residents, more educated residents and white residents.

		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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Very aware	24%	26%	24%	25%	22%	28%	18%	29%	25%	20%	27%	29%	25%	23%
Somewhat aware	48%	48%	51%	49%	53%	44%	37%	51%	55%	48%	50%	47%	50%	44%
Not very aware	19%	18%	17%	21%	18%	19%	30%	13%	15%	20%	18%	19%	17%	24%
Not at all aware	8%	8%	8%	5%	8%	9%	15%	7%	4%	13%	5%	5%	7%	9%
Very/Somewhat Aware	73%	74%	75%	74%	74%	72%	56%	80%	80%	68%	77%	76%	76%	67%

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 residents, more educated residents and white residents are more likely to agree that palliative care includes physical, emotional, social, and spiritual support and that it is for people of any age.

Older residents, more educated residents and those living outside Calgary/Edmonton are more likely to agree that palliative care can benefit people living with any 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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Palliative care includes physical, emotional, social, and spiritual support	74%	76%	75%	75%	76%	72%	61%	76%	83%	64%	81%	81%	77%	68%
Palliative care is for people of any age	74%	75%	75%	79%	73%	75%	62%	78%	81%	66%	81%	79%	78%	66%
Palliative care can benefit people starting at the time of diagnosis with a serious illness	72%	77%	68%	75%	76%	69%	68%	77%	71%	71%	72%	75%	72%	75%
Palliative care can benefit people living with any serious illness	70%	67%	72%	77%	73%	67%	62%	70%	79%	62%	77%	75%	72%	69%

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)

Covenant Health
Palliative Institute

Younger residents are less likely to agree with most statements about palliative care.

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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Palliative care can be provided together with other medical treatments aimed at prolonging life	68%	70%	68%	71%	73%	65%	61%	72%	71%	62%	72%	74%	69%	70%
I would be comfortable talking about palliative care with a family member or close friend	67%	67%	66%	72%	67%	68%	58%	67%	77%	60%	73%	71%	70%	62%
I would request palliative care if I was diagnosed with a serious illness	60%	64%	61%	59%	62%	58%	54%	64%	63%	53%	66%	66%	60%	62%
Palliative care is only for the very end-of-life	53%	55%	54%	54%	50%	56%	42%	63%	51%	49%	57%	53%	55%	51%

Statistically higher **Statistically lower**

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

Ipsos

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

White residents and university graduates are more to have had a palliative care experience within the past 10 years. Younger residents 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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Yes, have experience	33%	32%	33%	34%	32%	33%	26%	35%	36%	28%	36%	36%	36%	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 and family members/friends are the number one and two most preferred sources of information about palliative care for all demographic groups.

		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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Healthcare provider	58%	56%	57%	62%	56%	60%	48%	55%	70%	47%	63%	68%	62%	52%
Family members or friends	39%	41%	38%	43%	37%	41%	42%	38%	37%	42%	35%	38%	40%	37%
Government agency or office	17%	21%	20%	13%	23%	11%	13%	19%	18%	10%	20%	23%	16%	19%
Lawyer/legal professional	16%	15%	16%	16%	19%	12%	15%	15%	17%	10%	20%	18%	16%	16%
Community group or organization	14%	17%	12%	13%	13%	14%	17%	15%	10%	11%	12%	19%	10%	22%
Financial advisor/planner	12%	12%	12%	10%	15%	10%	17%	9%	11%	10%	14%	13%	11%	18%
Faith or spiritual leader	8%	7%	8%	8%	6%	9%	10%	7%	6%	7%	9%	7%	7%	10%
Funeral home/director	7%	8%	8%	5%	8%	6%	6%	9%	6%	4%	9%	8%	7%	6%
Employer	5%	7%	5%	3%	7%	3%	6%	7%	1%	4%	6%	6%	5%	6%
Media	4%	4%	5%	2%	5%	2%	5%	4%	2%	2%	3%	6%	2%	8%
Library/librarian	2%	2%	1%	1%	2%	1%	3%	1%	1%	1%	1%	2%	1%	2%
Do not want to receive information	6%	3%	9%	7%	7%	6%	6%	7%	6%	7%	5%	6%	6%	5%
Don't know	9%	7%	9%	11%	8%	11%	13%	10%	6%	15%	7%	5%	9%	7%

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 among the 35-to-54-year age segment, university graduates and non-white residents.

		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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Yes, heard of term	15%	17%	14%	17%	16%	13%	17%	20%	8%	11%	17%	20%	13%	21%

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. University graduates and Calgary residents are more likely to agree it is everyone's responsibility to help each other through serious illness and caregiving.

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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
It is everyone's responsibility to help each other through serious illness and caregiving	62%	68%	66%	54%	64%	59%	60%	65%	60%	56%	60%	71%	62%	63%
I know how to support someone in my community who is living with a serious illness	37%	40%	39%	34%	35%	38%	45%	39%	28%	33%	37%	42%	33%	48%
I am aware of the support available in my community for people living with a serious illness	33%	33%	35%	35%	36%	30%	40%	35%	25%	31%	34%	36%	30%	43%

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)

Family, friends and a hospice/palliative care society are among the top three sources of support for all demographic groups.

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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Family	81%	81%	81%	82%	79%	82%	80%	80%	83%	77%	84%	82%	82%	82%
Friends	67%	71%	65%	66%	63%	70%	77%	67%	58%	61%	68%	74%	66%	71%
Hospice/palliative care society	63%	65%	63%	63%	63%	62%	60%	63%	64%	61%	61%	66%	62%	69%
Support group(s)	51%	52%	56%	46%	50%	51%	55%	51%	47%	46%	52%	56%	48%	59%
Lawyer/legal professional	39%	43%	40%	34%	42%	35%	44%	37%	36%	33%	41%	44%	36%	46%
Financial advisor or financial institution	39%	42%	40%	33%	43%	36%	46%	41%	31%	37%	37%	44%	34%	53%
Senior-serving organization	38%	39%	37%	39%	46%	29%	37%	39%	37%	30%	44%	42%	34%	50%

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)

Younger residents, university graduates and non-white residents are more likely to say they would 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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Faith or cultural group/association	34%	34%	34%	33%	34%	33%	41%	39%	21%	28%	36%	39%	28%	50%
Neighbours	34%	34%	32%	34%	37%	31%	43%	33%	27%	34%	33%	35%	30%	44%
Funeral home/director	32%	36%	36%	25%	33%	32%	39%	32%	26%	29%	32%	36%	30%	38%
Co-workers/workplace	31%	31%	30%	32%	32%	30%	39%	40%	15%	29%	29%	35%	26%	44%
Social club or group	25%	25%	22%	25%	26%	22%	41%	25%	10%	24%	23%	27%	18%	43%
Library	23%	27%	19%	23%	25%	21%	34%	26%	12%	22%	21%	28%	18%	37%

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)

Comfort Talking About Death, Dying or Grieving by Demographic Subgroups

White respondents, those with some post-secondary education, and residents outside Calgary/Edmonton are more comfortable 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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
Very comfortable	27%	27%	26%	29%	22%	32%	24%	32%	25%	25%	26%	31%	29%	22%
Somewhat comfortable	34%	36%	30%	39%	39%	30%	29%	33%	40%	31%	42%	32%	36%	32%
Neither comfortable nor uncomfortable	22%	23%	25%	19%	25%	20%	24%	20%	24%	26%	19%	21%	20%	26%
Somewhat uncomfortable	10%	8%	11%	8%	9%	11%	16%	7%	8%	11%	9%	10%	9%	12%
Very uncomfortable	6%	5%	7%	5%	5%	7%	7%	8%	3%	7%	4%	6%	5%	8%
Very/Somewhat comfortable	61%	63%	57%	68%	61%	62%	53%	65%	65%	56%	68%	63%	66%	53%

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

Covenant Health
Palliative Institute

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. Younger residents are also more likely to say they 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	800	252	293	207	404	388	231	240	329	165	286	349	560	216
In my family we discuss death and dying	46%	45%	45%	52%	40%	52%	46%	45%	47%	50%	47%	41%	49%	42%
In my community we discuss death and dying	23%	28%	21%	21%	22%	24%	31%	27%	12%	23%	20%	26%	20%	31%

Statistically higher **Statistically lower**

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

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Preferred Information Formats by Demographic Subgroups

Email is the most preferred information format for all demographic segments.

The biggest gap in preferred format is that older residents 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	773	244	281	201	389	376	225	233	315	158	275	340	541	210
Email	43%	44%	45%	43%	48%	38%	35%	41%	52%	30%	53%	51%	45%	40%
Print materials	34%	31%	41%	33%	36%	33%	18%	32%	51%	26%	42%	38%	37%	29%
Internet, other than social media	32%	34%	38%	27%	30%	33%	33%	32%	30%	24%	34%	39%	32%	32%
In-person workshop or presentation	32%	34%	33%	31%	32%	32%	29%	31%	35%	29%	33%	36%	33%	32%
Online webinar or presentation	20%	23%	21%	17%	21%	18%	13%	23%	21%	11%	26%	24%	19%	23%
Television	15%	15%	16%	13%	17%	13%	17%	12%	17%	13%	18%	15%	14%	19%
Social media	15%	17%	13%	15%	13%	16%	25%	15%	6%	11%	16%	18%	11%	24%
Videos	14%	17%	14%	12%	17%	11%	16%	14%	13%	11%	15%	18%	13%	19%
Podcasts	10%	13%	9%	10%	11%	10%	10%	12%	8%	7%	11%	14%	9%	14%
Do not want information	7%	6%	5%	10%	4%	8%	8%	6%	6%	7%	6%	7%	6%	6%
Don't know	12%	11%	9%	13%	9%	15%	13%	12%	10%	18%	9%	6%	11%	10%

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=773)

Conclusions and Next Steps

Public awareness of palliative care and advance care planning in Alberta has been trending upward over the past decade. More could still 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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