

COVID-19 side effects: 38% of Canadians have missed medical appointments or procedures due to restrictions

Among those who aren't accessing medical care, ¾ say it has had a negative impact on their health

May 27, 2020 – Frontline medical staff have been working valiantly to help Canadians affected by the COVID-19 outbreak. But a new study from the non-profit Angus Reid Institute finds the treatments aimed at stopping the pandemic's spread – cancelled or suspended surgeries or limited access to hospitals – are also causing distinct side-effects for others in need of care unrelated to the coronavirus.

Nearly two-in-five (38%) say they have faced barriers to accessing medical appointments, regular treatment, and scheduled procedures as a result of prioritizing medical resources for COVID-19 patients.

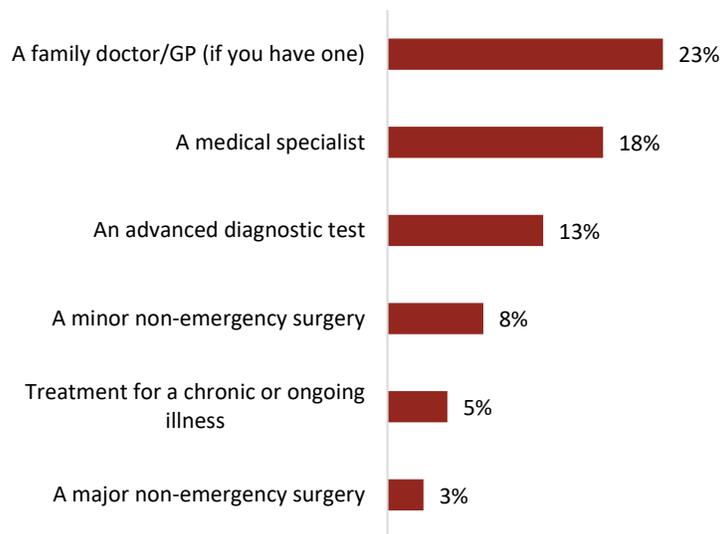
Most of those affected have been unable to make a needed visit to their family doctor (23%), followed by those who have had to miss an appointment with a medical specialist (18%) and those who have not been able to obtain an advanced diagnostic test, such as an MRI or CT scan (13%)

Among those affected, the vast majority (76%) say it has had an adverse impact on their overall health.

More Key Findings:

- Among low-income Canadians, nearly one-in-ten say they have been unable to access treatment for a chronic illness. This is nearly twice the number of Canadians overall who say the same.
- Ontario residents are most likely to say they have missed out on at least one appointment or procedure – 44 per cent do.

**In the last two months, have you personally needed but were unable to access any of the following because of the COVID-19 situation?
(All respondents, n=1,777)**



METHODOLOGY:

The Angus Reid Institute conducted an online survey from May 18 – 19, 2020 among a representative randomized sample of 1,777 Canadian adults who are members of [Angus Reid Forum](#). For comparison purposes only, a probability sample of this size would carry a margin of error of +/- 2.3 percentage points, 19 times out of 20. Discrepancies in or between totals are due to rounding. The survey was self-commissioned and paid for by ARI. Detailed tables are found at the end of this release.

CONTACT:

Shachi Kurl, Executive Director: 604.908.1693 shachi.kurl@angusreid.org @shachikurl
Dave Korzinski, Research Director: 250.899.0821 dave.korzinski@angusreid.org

About ARI

*The **Angus Reid Institute (ARI)** was founded in October 2014 by pollster and sociologist, Dr. Angus Reid. ARI is a national, not-for-profit, non-partisan public opinion research foundation established to advance education by commissioning, conducting and disseminating to the public accessible and impartial statistical data, research and policy analysis on economics, political science, philanthropy, public administration, domestic and international affairs and other socio-economic issues of importance to Canada and its world.*

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COVID-19 and Medical Care

As this country adjusts to new ways of operating during the COVID-19 pandemic, one of the areas most affected has been non-emergency or non-essential medical care. Resources have been poured into preparing hospitals for those sick with the disease caused by the novel coronavirus, and Canadians have been [asked to reconsider](#) whether their medical needs are urgent or pursue other avenues like virtual appointments.

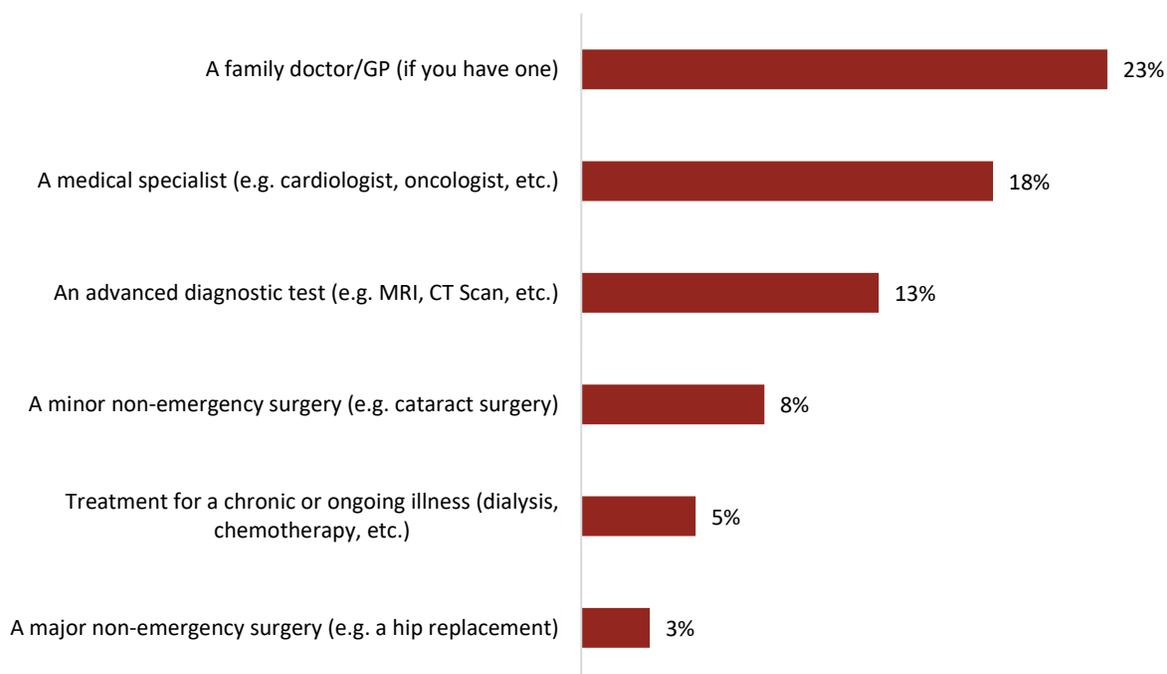
One-quarter have been unable to see a doctor due to pandemic

The Angus Reid Institute surveyed more than 1,700 Canadians about their own experiences with healthcare access during the COVID-19 pandemic. The most common problem has been the inability able to see their family doctor. One-in-four (23%) say that this has been an issue.

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(All respondents, n=1,777)**



Ontarians most affected, Albertans least

No region of the country has been free from the effects of the COVID-19 pandemic. That said, some say that their experience has been more difficult than others. In Ontario, for example, residents are considerably more likely to report being unable to access health care than those in Alberta. The regional story is found in the table below:

In the last two months, have you personally needed but were unable to access any of the following because of the COVID-19 situation?								
	Total (n=1,777)	Region						
		BC (n=244)	AB (n=161)	SK (n=113)	MB (n=122)	ON (n=525)	QC (n=351)	ATL (n=261)
A family doctor/GP (if you have one)	23%	24%	14%	22%	21%	27%	23%	23%
A medical specialist (e.g. cardiologist, oncologist, etc.)	18%	17%	13%	17%	16%	22%	15%	19%
An advanced diagnostic test (e.g. MRI, CT Scan, etc.)	13%	13%	9%	4%	13%	17%	11%	15%

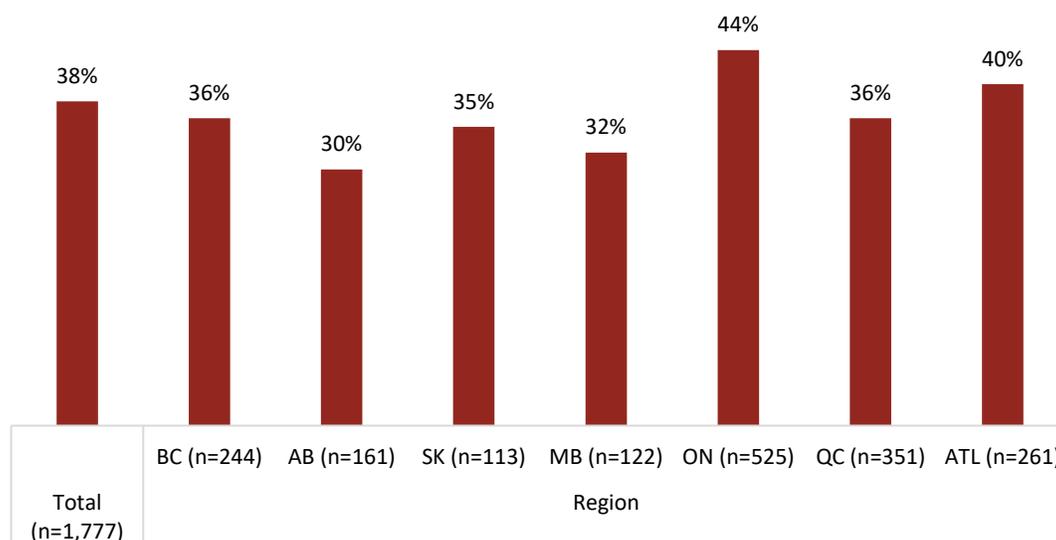
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A minor non-emergency surgery (e.g. cataract surgery)	8%	7%	4%	4%	5%	10%	8%	8%
Treatment for a chronic or ongoing illness (dialysis, chemotherapy, etc.)	5%	5%	5%	4%	2%	7%	2%	5%
A major non-emergency surgery (e.g. a hip replacement)	3%	1%	4%	3%	1%	3%	3%	2%

The regional impact of restricted medical care is again most visible when aggregating those who have experienced at least one of the issues presented. In Ontario, this proportion rises to 44 per cent, six-points higher of the national average and 14 points more than Alberta:

Have had at least one appointment/procedure delayed due to COVID19



Lower-income households most affected

One of the most notable disparities in healthcare access during the COVID-19 pandemic is the number of Canadians who say they have needed to see their doctor but been unable across the spectrum of household income levels. As seen in the table below, three-in-ten of those among the lowest income group have been unable to see a doctor over the past two months. Lower-income Canadians are also most likely to say they have been unable to access treatment for a chronic illness:

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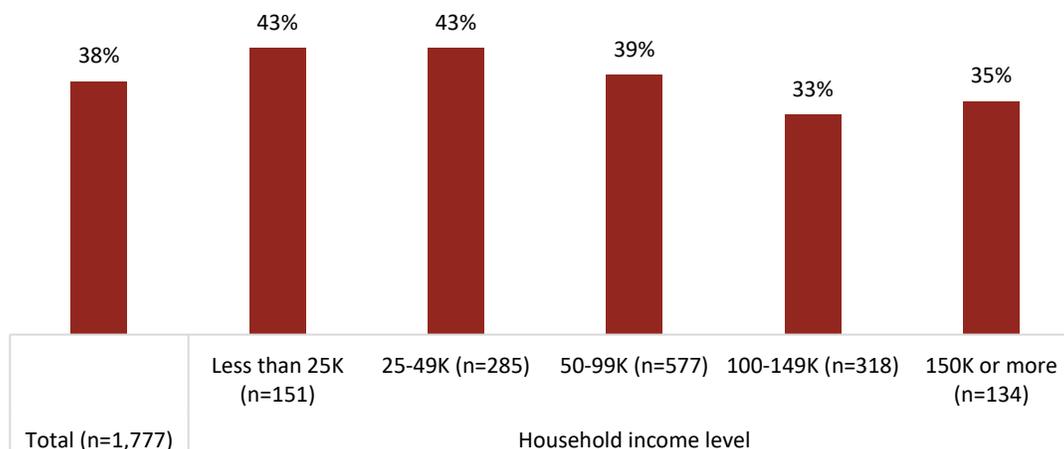
In the last two months, have you personally needed but were unable to access any of the following because of the COVID-19 situation?						
Weighted Sample Sizes	Total (n=1,777)	Household income level				
		Less than 25K (n=151)	25-49K (n=285)	50-99K (n=577)	100-149K (n=318)	150K or more (n=134)
A family doctor/GP (if you have one)	23%	28%	26%	25%	20%	18%
A medical specialist (e.g. cardiologist, oncologist, etc.)	18%	19%	20%	18%	15%	13%
An advanced diagnostic test (e.g. MRI, CT Scan, etc.)	13%	13%	10%	15%	11%	16%
A minor non-emergency surgery (e.g. cataract surgery)	8%	8%	10%	8%	8%	6%
Treatment for a chronic or ongoing illness (dialysis, chemotherapy, etc.)	5%	9%	4%	5%	4%	2%
A major non-emergency surgery (e.g. a hip replacement)	3%	1%	4%	4%	2%	2%

Aggregating those who have had at least one appointment or procedure delayed due to the pandemic, the income trend holds true, but it is worth noting that at least one-in-three Canadians across each income level say they have had an issue:

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Have had at least one appointment/procedure delayed due to COVID19



Consistent impact across age groups

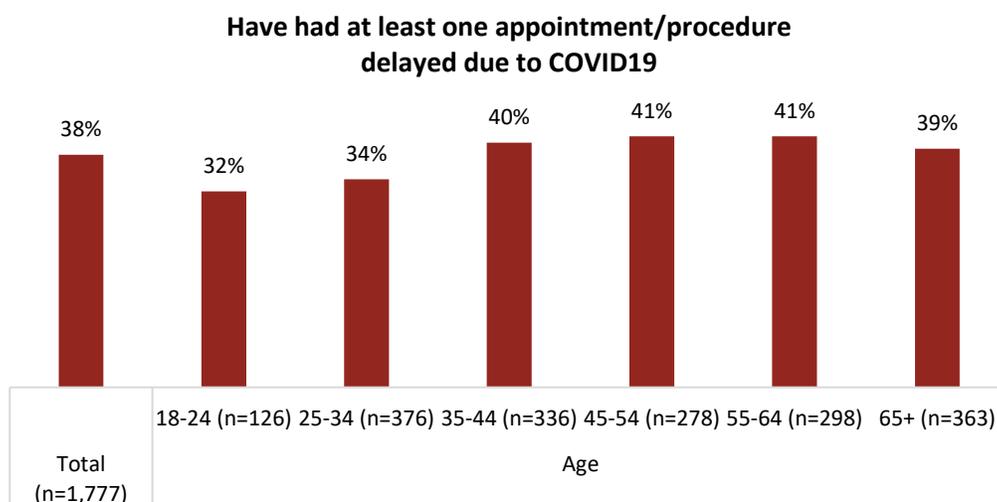
Examining this by age demographics, it is notable that Canadians voice similar levels of inability to access care:

In the last two months, have you personally needed but were unable to access any of the following because of the COVID-19 situation?							
Weighted Sample Sizes	Total (n=1,777)	Age					
		18-24 (n=126)	25-34 (n=376)	35-44 (n=336)	45-54 (n=278)	55-64 (n=298)	65+ (n=363)
A family doctor/GP (if you have one)	23%	23%	24%	26%	24%	23%	20%
A medical specialist (e.g. cardiologist, oncologist, etc.)	18%	14%	15%	19%	21%	19%	18%
An advanced diagnostic test (e.g. MRI, CT Scan, etc.)	13%	11%	10%	12%	15%	17%	15%
A minor non-emergency surgery (e.g. cataract surgery)	8%	11%	5%	6%	9%	8%	11%
Treatment for a chronic or ongoing illness (dialysis, chemotherapy, etc.)	5%	5%	5%	6%	6%	4%	3%
A major non-emergency surgery (e.g. a hip replacement)	3%	3%	1%	3%	3%	2%	4%

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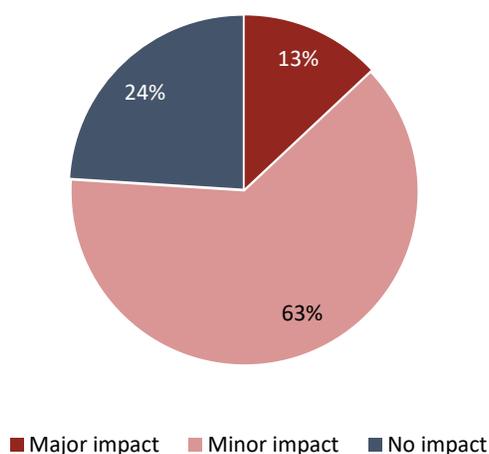
At least 32 per cent of those in each age cohort report that they have been unable to access care in some way, with the proportion rising to two-in-five for Canadians over the age of 34:



How much of an impact has missed care had?

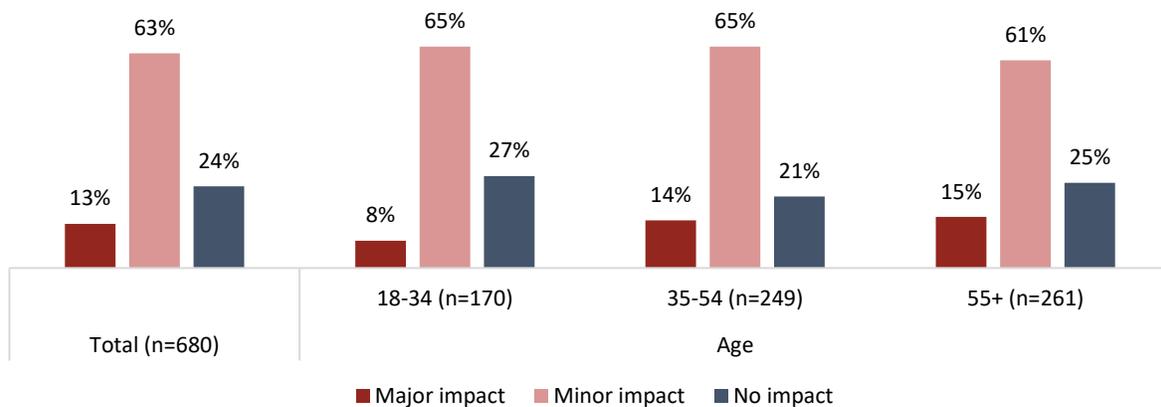
Two-in-five Canadians have been unable to access the care they need over the past two months and most self-report worsened health because of it. One-in-eight (13%) say that they have faced a major negative health impact due to their lack of access, while 63 per cent say that the impact has been felt but has been minor:

**Impact of missed medical care due to COVID-19 on overall health of Canadians
(Among those who have missed appointment or procedure, n=680)**



The likelihood that a person has faced major negative effects from missed care is considerably higher for those over the age of 34. Income, however, is less of a factor ([see detailed tables](#)):

**Impact of missed medical care due to COVID-19 on overall health of Canadians
(Among those who have missed appointment or procedure n=680)**



For detailed results by age, gender, region, education, and other demographics, [click here](#).