

DATA DIVE WITH NIK NANOS

SUPPORT FOR CANADA’S OIL-AND-GAS SECTOR GETS A TRUMP BUMP

Even with the current common sense of purpose, will today’s urgency to act in response to the change in Canada-U.S. relations be politically sustainable?

OPINION

Nik Nanos is the chief data scientist at Nanos Research, research adjunct professor at the Norman Paterson School for International Affairs at Carleton University, a chair of the Advisory Council of the University of Ottawa’s Positive Energy program, and the official pollster for The Globe and Mail and CTV News.

Almost 20 years ago, Conservative prime minister Stephen Harper asserted Canada was an energy superpower. Under Justin Trudeau and the Liberal government, the narrative was not about flexing our energy muscles, but on reducing greenhouse-gas emissions and shifting to green energy.

And then along came Donald Trump. The U.S. President has driven home to Canadians the importance of Canada’s oil-and-gas sector. His administration has implemented tariffs on aluminum, steel and the automotive sector, but oil and gas was left alone. This drove home to Canadians the importance of the oil and gas sector – not just to the Canadian economy, but to the American economy, as well.

Even after almost 10 years of a federal government telling Canadians the country needs to move away from oil and gas, support for the sector remains high – and is increasing.

The University of Ottawa’s Positive Energy program and Nanos Research have been tracking public opinion on a wide range of perceptions over the years. Among the more striking findings is that in the past five years, a growing number of Canadians believe that the oil and gas sector is important to the current economy. Back in 2020 about two out of three people (65 per cent) thought the oil and gas sector was important to Canada’s current economy. As of January, this figure has increased to 88 per cent.

When asked an open-ended question where respondents could say anything to explain their view, the key positive drivers included the sector’s contribution to jobs and provincial economies (42 per cent) and that oil and gas are resources that should be exploited (10 per cent). As context,

there were so few individuals who said oil and gas was not important that it did not meet the criteria to be included in the results.

We see a similar trendline when we ask about the future. In 2020, 41 per cent of respondents believed the oil and gas sector would be important to Canada’s future economy; in 2025, it’s 70 per cent.

Perhaps the positive news is that Mr. Trump has inspired a rethinking in Canada when it comes to our energy future.

Canadians have consistently handed out failing marks to federal and provincial governments for how they co-operate – or don’t – when it comes to energy. People are six times more likely to give a rating of poor (32 per cent) or very poor (21 per cent) rather than a good (8 per cent) or very good (1 per cent) score. Not surprisingly,

the negative ratings jump from 53 to 78 per cent in the Prairies. We should not be surprised when Alberta Premier Danielle Smith comes out swinging at anything that might jeopardize the oil and gas sector.

Considering those positive numbers on the sector’s importance to the Canadian economy, you’d think people were buying into the “drill baby drill” mantra of Donald Trump.

But Canadians are twice as likely to think that the country should not be aligning our energy policies with the United States; 61 per cent answered “not align/somewhat not align,” while 28 per cent said “align/somewhat align.” Reasons to oppose alignment range from the view that the United States is disregarding climate change (29 per cent), that Mr. Trump can’t be trusted (18 per cent) and that Canada needs to remain independent (17 per cent).

At the same time, support for the government to fund a new pipeline from Alberta to Eastern Canada is quite strong (53 per cent support, another 24 per cent somewhat support it). Although the percentage of those in Quebec who favour the pipeline is lower than the national average (59 per cent in Quebec compared to 77 per cent nationally), it is still a majority opinion.

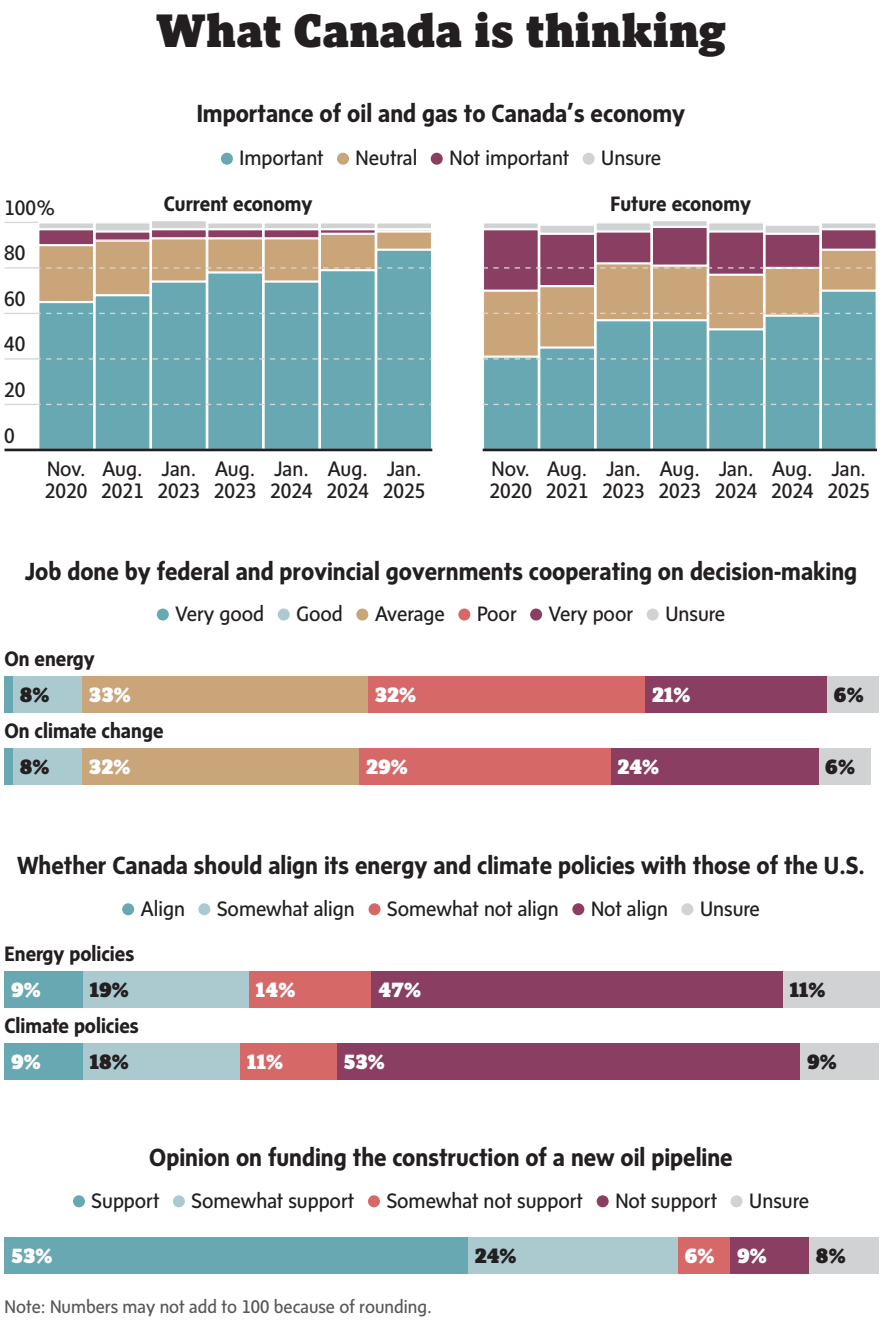
The key takeaway is that in the wake of an unpredictable relationship with the Trump administration, Canadians are quite supportive of a new government-funded oil pipeline from Alberta to Eastern Canada.

Even with the current common sense of purpose, will today’s urgency to act in response to the change in Canada-U.S. relations be politically sustainable?

Perhaps the positive news is that Mr. Trump has inspired a rethinking in Canada when it comes to our energy future.

Mr. Trump’s reticence to slap tariffs on Canadian oil has put a spotlight on the importance of the sector to both Canada and the United States, and has initiated a dialogue between the federal and provincial governments on energy resilience and the importance of a national energy strategy.

A thank you to Mr. Trump may be in order.



MURAT YÜKSELİR / THE GLOBE AND MAIL, SOURCE: NANOS RESEARCH

How we score on health is how we score as a country

GEOFF GIRVITZ

OPINION

Writer who covers health and fitness

As the federal election draws near, attention has zeroed in on the metrics used to signal our health as a country: the economy, immigration, the crime rate, employment. But it’s health that should serve as our key performance indicator. Physical health, yes, but also well-being in the broader sense. Here, we factor in measures like life expectancy, mental health and education – along with a strong support system for the kids who will someday run this country. Concepts like the GDP need to be wrapped into a more complete picture. Every modern framework, including the Human Development Index (HDI), the OECD Better Life Index, and New Zealand’s Wellbeing Budget does this; health and well-being are either a core measure or supporting factor. This is no fluke.

Health is buttressed by a complex array of policies, from product-safety standards to emergency-room wait times. Your car shouldn’t explode, your food shouldn’t contain high levels of arsenic, and – if either of those things happens – the cost of medical treatment shouldn’t ruin you. One of the challenges is that health, as a concept, lacks the appeal of simple metrics. However, fixating on metrics can distract us from strategic, long-term thinking, which is critical at this moment.

Our health achievements aren’t static. Reducing tuberculosis to 5.5 cases per 100,000 is a

great achievement, but it doesn’t mean that we then get to tick a box, high-five each other, and move on. Especially since we have not come anywhere close to meeting our 2035 targets. Progress takes continuous work. Canadian health ranks highly by global standards, but we must run very fast to stay in place – and even faster if we want to get anywhere.

Our provincial and federal governments need to support a cohesive vision of health for Canadians. Greater efficiency can – and should be – a driving principle. We’ve seen positive movement via opening up physician-equivalent services, like nurse practitioners and pharmacists, to publicly-funded health insurance programs. Meanwhile, dental care, part of Tommy Douglas’s initial vision for medicare, will expand to all eligible Canadians between 18 and 64 as early as June 1, 2025 – 63 years after the launch of Medicare in Saskatchewan. Better late than never.

All creative solutions are welcome, but calls for privatization are more often a case for management-by-abdication rather than leadership. Privatization is not a magic word where, *presto-change-o*, the free market does your work for you. If we want to seriously address inefficiencies, we need principles-driven innovation, not private-market solutions. Profitability seldom dovetails with the highest public good and the invisible hand of the market often extends a middle finger to non-shareholders. *That’s* why these are public works.

Almost all recent innovation in our health care system has come without privatization. That includes the Pharmacare Act, which eliminates the need for

Some of our most essential work can be done by modernizing our record-keeping systems and focusing on the transferability of medical records.

supplementary private drug insurance but does not impose any restrictions on additional private insurance. This response comes in light of the fact that other countries pay between half and two-thirds of what Canadians pay for top-selling diabetes drugs – with the exception of the U.S., which pays 1.4 times as much. Meanwhile, the proposal’s most vocal critics include insurance lobbyists and pharmaceutical industry representatives.

Canada is experiencing a moment of high motivation – amplified by contrasts with the Trump administration’s apparent contempt for public health. This is an opportunity to move past partisan politics and invest in systems-level change – something voters seem prepared to do. High motivation is not a permanent state, however, and we need to encode it into policy. While our health care focus is on access to family doctors and wait times, these may be considered symptoms and not the primary disease. To have a health care system, “not a sick-care system,” means taking that perspective all the way into

policy and administration.

So, what does treating the whole body of health care look like? It means up-front investment in infrastructure that removes bottlenecks to performance and creates a clear ROI. Think of this as DOGE for grown-ups: strategic, iterative, and ultimately constructive.

A fitness expert might ask you if time for exercise is marked out on your calendar. It’s a statement of your priorities. The same can be said for policy solutions that support our health environment. We don’t want a nanny state, but we don’t want a latchkey-kid state either.

This is not a call to “make Canada healthy again”; we are already healthy, on net, in spite of some obvious gaps in need of redress. The low TB rates cited earlier, for example, are not evenly distributed among the Canadian-born. They are three times higher among Indigenous populations and as much as 300 times higher in some Inuit communities. As we (hopefully) repair gaps and move toward greater efficiency and innovation, it’s worth asking if we should be absorbing some of the public health expertise that the U.S. has so aggressively jettisoned.

Meanwhile, some of our most essential work can be done by modernizing our record-keeping systems and focusing on the transferability of medical records. These are well-documented frictions in our existing system that frustrate patients and chew up bandwidth for health care providers. This kind of upgrade requires substantial up-front investment but, in exchange, promises to free up doctors and decrease wait times. We need the courage and clarity to address systemic causes

instead of just treating symptoms.

Health care-related statements made by each national party leader have focused on access to primary care, privatization, dental care, pharmacare, eliminating red tape and future-proofing the health care system. NDP Leader Jagmeet Singh leads the charge with both big swings (guaranteed universal access to family doctors by 2030), more tenable solutions (making interprovincial practice easier for doctors) and broader aspirations (banning foreign corporations from buying Canadian facilities). The one notable Liberal spending increase would come via an expansion of dental care, which will extend coverage to approximately 4.5 million uninsured Canadians. However, Liberal Leader Mark Carney has not committed to expanded pharmacare and has instead focused on the Liberal party’s existing \$200-billion investment in bilateral health agreements with provinces – not something considered to be a paragon of efficiency. Conservative Leader Pierre Poilivere has walked back more austere statements on pharmacare and dental care, now promising to keep (but not expand) existing coverage, recently stating, “We will protect these programs and nobody who has them will lose them.” He has also called to reduce bureaucracy.

The real measure of leadership won’t come via a single number, whether it relates to GDP, immigration, or housing. It will come from how effectively Canadian health is supported now – and in the future. Strong economics and strategy are essential, but their real value lives within how they’re applied to the health and well-being of Canadians.