Nearly four in ten Albertans report delaying or not seeking the healthcare they need because of long wait times or travel distances in the past year.







The research gauged the opinions among Albertans on access to primary and acute care, needs of the community as it relates to healthcare and views on virtual and hybrid models of care.

Nanos conducted an online representative survey of 1017 Albertans, 18 years of age or older, between May 9<sup>th</sup> and 13<sup>th</sup>, 2025.

No margin of error can be calculated on a non-probability sample. A comparable probability sample of 1,017 Albertans would have margin of error of  $\pm 3.1$  percentage points, 19 times out of 20.

The statistical tabulations including the unweighted and weighted number of interviews can be accessed <a href="here">here</a>.

The research was commissioned by Teladoc Health Canada and was conducted by Nanos Research.

#### **KEY FINDINGS – ACCESS TO HEALTHCARE**

1

#### NEARLY FOUR IN TEN ALBERTANS REPORT DELAYING OR NOT SEEKING CARE WHEN THEY NEEDED IT BECAUSE OF LONG WAIT TIMES OR TRAVEL TIMES

Close to four in ten Albertans (38%) report delaying or not seeking healthcare because wait times or travel times were too long. Among those that have delayed care, just under one in five say this worsened their health condition or caused complications (17%), while one in ten say it prolonged pain or discomfort (10%) and nine per cent said it delayed recovery.

4

#### ALBERTANS REPORT WAITING AN AVERAGE OF 5 HOURS TO BE SEEN BY A HEALTHCARE PROVIDER IN AN EMERGENCY ROOM/URGENT CARE CENTRE

Among those who have accessed acute care in the past year, Albertans report waiting an average of <u>5 hours</u> between when they arrived at the ER/urgent care centre and being seen by the healthcare professional. The reported distance of travel to their appointment is an average of <u>21 minutes</u>.

7

#### ALBERTANS REPORT WAITING AN AVERAGE OF 10 DAYS TO ACCESS PRIMARY CARE

Among those who have accessed primary care in the past year, Albertans wait an average of <u>10 days</u> between when the appointment request and being seen by the healthcare professional. The reported distance of travel to their appointment is an average of <u>20 minutes</u>.

5

#### SATISFACTION WITH WAIT TIMES FOR EMERGENCY CARE IS LOW ACROSS THE BOARD

Among those who have accessed acute care in the past year, residents of Alberta score their satisfaction with the time in the ER low (mean score of 3.8 out of 10, nearly one in four are completely dissatisfied (23% score 0 out of 0). This is consistent across regions of Alberta. Residents of Calgary were less likely to be satisfied with the distance they had to travel to the ER/urgent care centre (mean of 6.1) compared to Edmonton (mean of 6.8) or the rest of Alberta (mean of 6.9).

3

### ALBERTANS REPORT HIGHER SATISFACTION WITH THE DISTANCE THEY HAVE TO TRAVEL FOR IN-PERSON APPOINTMENTS BUT LOWER SATISFACTION WITH THEIR ABILITY TO SEE THEIR FAMILY DOCTOR WHEN THEY NEED IT

Among those who have accessed primary care in the past year, residents of Alberta who live outside of Calgary and Edmonton report a higher satisfaction with the distance they have to travel for in-person appointments for primary care (39% score it a 10 out of 10, mean of 7.6) while residents of Calgary report lower satisfaction (mean score of 7.1 out of 10, 24% who score it a 10 out of 10). However, residents outside of Calgary score lower in terms of satisfaction with their ability to see their primary healthcare provider when they need it (mean of 6.1 for regions other than Calgary and Edmonton and 6.2 for Edmonton, respectively, compared to 6.5 for Calgary).

6

#### BIGGEST COMMUNITY NEEDS ARE REDUCING WAIT TIMES AND RECRUITING MORE DOCTORS ACROSS ALBERTA

Long wait times (42%) and having more doctors (36%) are top of mind needs for Albertans whether they live in an urban or rural setting. Residents outside of Edmonton and Calgary (15%) were more likely than residents from Calgary (eight per cent) to say increasing the number of healthcare facilities would be the biggest need in their community. Younger Albertans (22%, 18-34) are more likely to say affordability of healthcare is an important need than older Albertans (eight per cent, 55 plus). Middle-aged Albertans are more likely to say family doctors are a top need in their community (31%, 35-54), compared to 12 per cent of those 18-34.

### KEY FINDINGS - VIRTUAL/HYBRID MODELS OF CARE

1

#### A MAJORITY OF ALBERTANS REPORT BEING COMFORTABLE WITH VIRTUAL CARE BEING USED FOR HEALTHCARE TO ONE EXTENT OR ANOTHER

Nearly nine in ten Albertans say they are comfortable (65%) or somewhat comfortable (24%) with renewing prescriptions and scheduling appointments with a primary care physician virtually. About seven in ten are comfortable or somewhat comfortable with virtual care being used for non-urgent care (39% comfortable; 35% somewhat comfortable) and to determine if someone needs to go to an ER in person (32% comfortable; 36% somewhat comfortable). Comfort levels with virtual care for mental health such as a consultation with a psychologist is marginally lower (30% comfortable, 33% somewhat comfortable).

7

### TWO IN THREE ALBERTANS ARE AT LEAST SOMEWHAT COMFORTABLE WITH HYBRID MODELS OF HEALTHCARE – MOST SAY IT'S LIKELY TO HELP IMPROVE ACCESS TO HEALTHCARE IN THEIR COMMUNITY

Two thirds of residents of Alberta are comfortable (29%) or somewhat comfortable (39%) with a hybrid model of healthcare that includes both virtual and in-person care. Additionally, just under six in ten Albertans (57% score 7-10 out of 10) believe it is likely that hybrid care models could help improve access to healthcare in their community. About one in four are neutral about it (27% score 4-6). Residents of Calgary are marginally more likely to say this will improve access to healthcare (60% score 7-10) than residents of the rest of Alberta (53% score 7-10).

3

#### DECREASING WAIT TIMES AND KNOWING THE HEALTHCARE PROVIDER ARE TOP THINGS THAT CAN HELP INCREASE COMFORT WITH VIRTUAL CARE

Asked to rank the things that are most likely to increase their comfort with virtual care, one in three Albertans rank decreasing wait times as what is most likely to (33%). This was followed by just under one in three who rank already having a relationship with the healthcare provider as what is most likely to increase their comfort (31%).

4

#### QUICKER ACCESS AND CONVENIENCE/TIME SAVING ARE TOP PERCEIVED BENEFITS OF HEALTHCARE THAT INCLUDES A VIRTUAL COMPONENT

Unprompted, the biggest benefits of receiving care with a virtual component according to Albertans are quicker access to healthcare (30%), convenience and time saving (25%) and efficiency for healthcare providers (six per cent). Of note, thirteen per cent don't see benefits or only noted concerns.





#### **ACCESS TO HEALTH CARE IN ALBERTA**

#### Rest of Alberta (n=362)

**42**% **79**%

report not seeking care because of lack of access

report currently having a family doctor

6 hours

Average distance to travel to primary care 20 minutes

Average wait time to access primary care 11 days

Average distance to travel to acute care 19 minutes

Average wait time to access <u>acute</u> care

Comfort level with hybrid model of care

Likelihood that hybrid

care will improve access

**Calgary (n=366)** 

report not seeking care because of lack of access

34% 87%

report currently having a family doctor

Average distance to travel to primary care 20 minutes

Average wait time to access primary care 10 days

Average distance to travel to acute care

Average wait time to access <u>acute</u> care 5 hours

Comfort level with

hybrid model of care

Likelihood that hybrid care will improve access

60%

71%

25 minutes

Edmonton (n=289)

**37**% | **78**%

report not seeking care because of lack of access

report currently having a family doctor

Average distance to travel to primary care 19 minutes

Average wait time to access primary care

10 days

Average distance to travel to acute care

21 minutes

Average wait time to access acute care

5 hours

Comfort level with hybrid model of care

66%

Likelihood that hybrid care will improve access

57%





# **TOP RESPONSE**

#### Views on needs of the healthcare system

Q – What do you see as the top three biggest needs in terms of the healthcare system in your community? (Open-Ended)

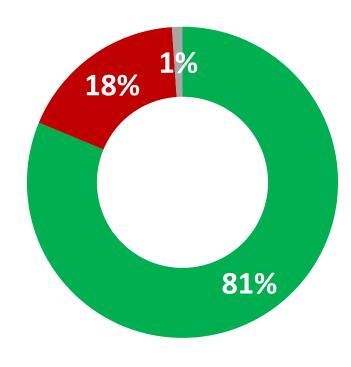
		Region Gender		nder	Age				
	Alberta (n=987)	Calgary (n=355)	Edmonton (n=279)	Rest of Alberta (n=353)	Men (n=487)	Women (n=496)	18-34 (n=263)	35-54 (n=269)	55 plus (n=455)
Long Wait Times (surgery, overall, etc.)	42.3%	42.9%	41.1%	42.7%	42.9%	42.2%	41.0%	36.7%	49.0%
Need for More Doctors	36.0%	30.5%	30.4%	45.8%	33.9%	38.2%	32.5%	33.8%	40.9%
Shortage of Family Doctors	23.5%	23.5%	23.8%	23.4%	20.9%	26.0%	11.9%	31.2%	24.4%
Emergency Room/Emergency Care Wait Times	18.3%	18.3%	18.4%	18.3%	15.7%	20.9%	10.3%	21.8%	20.6%
Affordability of Healthcare Services	11.8%	13.2%	14.3%	8.5%	13.9%	9.9%	21.7%	8.6%	7.8%
Healthcare Workforce Shortage	11.6%	12.8%	10.2%	11.6%	11.3%	11.8%	12.9%	10.1%	12.2%
More nurses	11.4%	11.3%	9.6%	13.0%	12.7%	10.3%	8.8%	11.0%	13.8%
Increased Number of Healthcare Facilities (hospitals, clinics, etc.)	11.2%	8.1%	10.8%	14.6%	11.9%	10.7%	9.5%	10.6%	13.1%
Accessibility/Availability (unspecified)	10.1%	10.9%	10.6%	8.9%	10.7%	9.4%	13.0%	7.3%	10.9%

<sup>\*</sup>Total may add up to more than 100% as respondents were able to include up to three mentions.

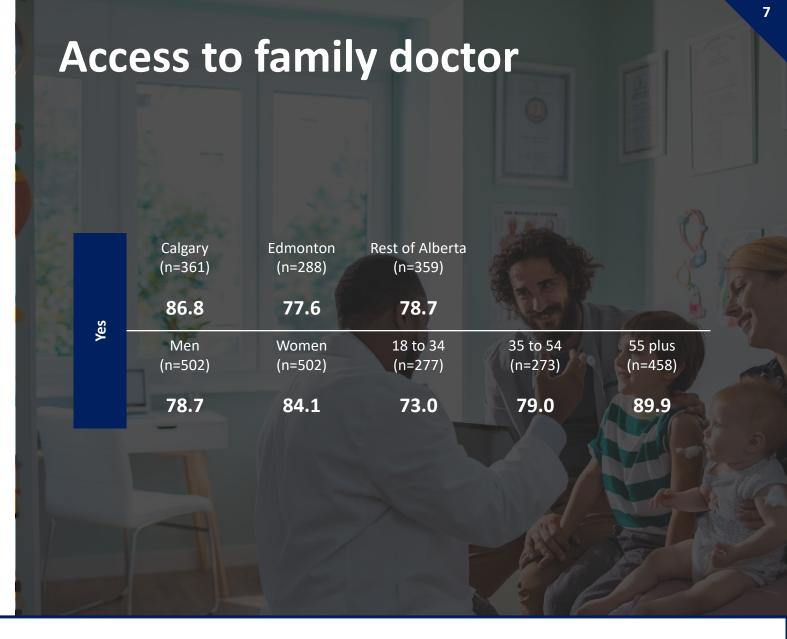
Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=987 Albertans.







■ Yes ■ No ■ I don't know/I prefer not to answer



Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=1008 Albertans.

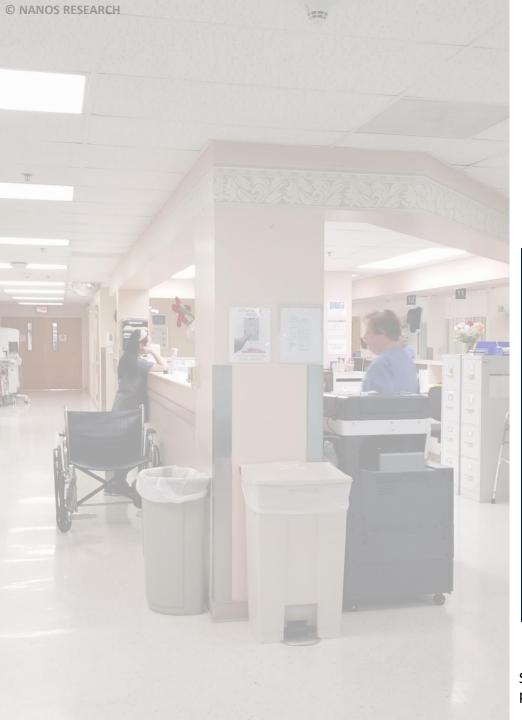




<sup>\*</sup>Weighted to the true population proportion.

<sup>\*</sup>Charts may not add up to 100 due to rounding.

Rest of



### Accessing primary care

Q – In the past 12 months, how many times have you accessed primary care such as a visit with your family doctor, a walk-in clinic, etc. \_\_\_\_\_ number of visits OR None

		Alberta (n=989)	Calgary (n=356)	(n=283)	Alberta (n=350)
	Mean	Four times	Four times	Three times	Four times
E S	None/Zero times	11.3%	8.5%	14.9%	11.1%
S N O	One time	19.2%	17.8%	22.5%	18.1%
E S P	Two times	21.2%	22.9%	22.5%	18.6%
<u>Р</u> Я	Three times	15.0%	16.8%	13.7%	14.2%
Т 0	Four times	11.0%	12.5%	5.7%	13.6%
	Five or more times	22.3%	21.5%	20.8%	24.3%

Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=989 Albertans.





Rest of

**Alherta** 



#### Travelling time to access primary care

Q – [IF REPORTS ACCESSING PRIMARY CARE IN THE PAST YEAR] How far did you have to travel for your primary care visit? \_\_\_\_ Minutes

**Alberta** 

**Calgary** 

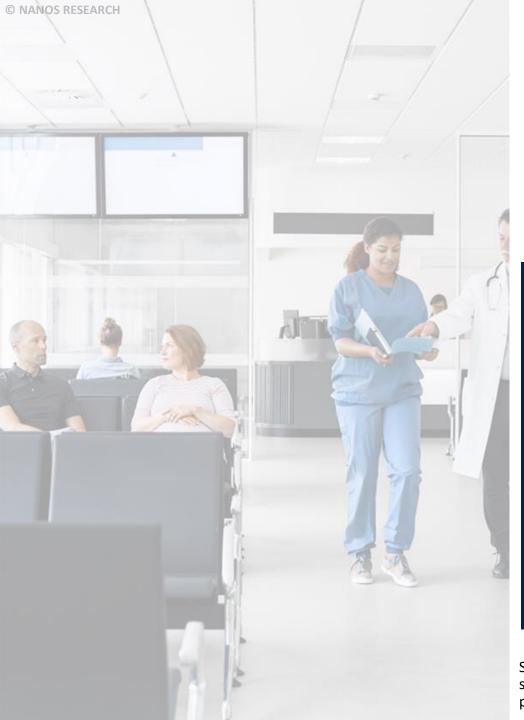
**Edmonton** 

		(n=874)	(n=325)	(n=235)	(n=314)
	Mean	20 minutes	20 minutes	19 minutes	20 minutes
O N S E S	15 minutes or less	58.7%	54.5%	54.5%	66.1%
R E S P	16-30 minutes	30.0%	36.0%	36.6%	19.2%
T 0 P	31-60 minutes	9.2%	7.8%	8.4%	11.3%
	Over an hour	2.0%	1.7%	0.5%	3.4%

Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=874 Albertans who report accessing primary care in the past year.







## Waiting time between appointment request and access to primary care

Q – [IF REPORTS ACCESSING PRIMARY CARE IN THE PAST YEAR] How long did you have to wait between the appointment request and when you were seen?

were	seen: uays	Alberta (n=871)	Calgary (n=322)	Edmonton (n=237)	Rest of Alberta (n=312)
	Mean	10 days	10 days	10 days	11 days
E S	Within the same day	3.1%	3.3%	3.7%	2.6%
S Z	1-2 days	19.5%	19.6%	22.7%	16.9%
S P O	3-4 days	12.1%	14.1%	9.7%	11.9%
R E	5-7 days	24.7%	24.2%	23.7%	25.8%
0 P	8-13 days	12.0%	11.0%	12.6%	12.5%
۰	2 weeks to a month	24.8%	24.5%	24.6%	24.8%
	Over a month	3.8%	2.9%	2.9%	5.4%

Source: Nanos Research, online non-probability representative panel survey, May  $9^{th}$  to  $13^{th}$ , 2025, n= 871 Albertans who report accessing primary care in the past year.

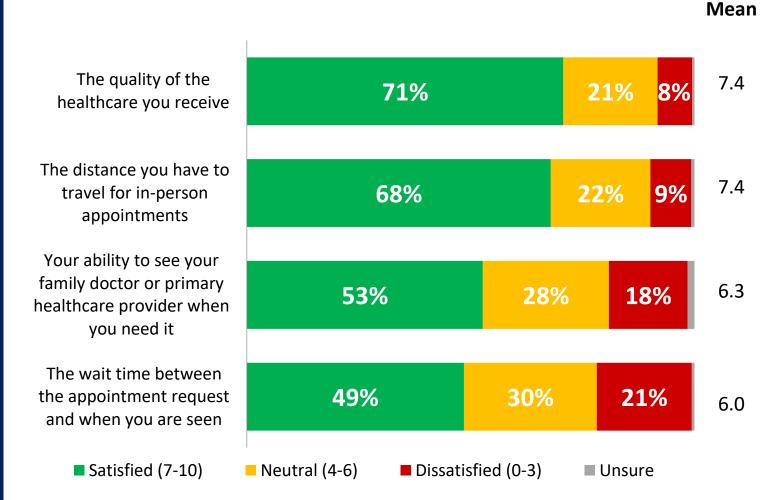




Overall, a majority of Albertans are satisfied with the quality of the healthcare they receive and the distance they have to travel for inperson appointments. Satisfaction with wait times and their ability to see their family doctor when they need it is comparatively lower.

Q – [IF REPORTS ACCESSING PRIMARY CARE IN THE PAST YEAR] On a scale from 0 to 10, where 0 is completely dissatisfied and 10 is completely satisfied, how satisfied or dissatisfied are you with the following regarding primary care: [RANDOMIZE]

#### Satisfaction level with primary care

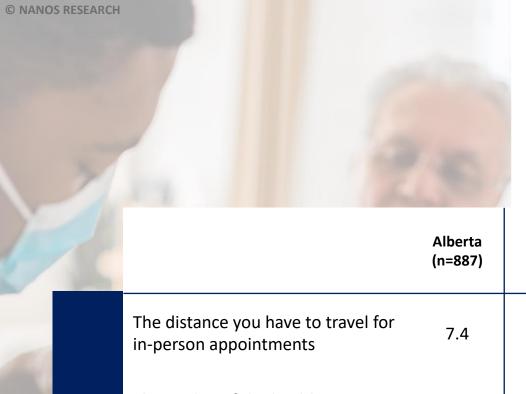


<sup>\*</sup>Weighted to the true population proportion.





<sup>\*</sup>Charts may not add up to 100 due to rounding.



### Satisfaction level with primary care – by demographics

Q – [IF REPORTS ACCESSING PRIMARY CARE IN THE PAST YEAR] On a scale from 0 to 10, where 0 is completely dissatisfied and 10 is completely satisfied, how satisfied or dissatisfied are you with the following regarding primary care: [RANDOMIZE]

2		Alberta (n=887)	Calgary (n=326)	Edmonton (n=242)	Rest of Alberta (n=319)	Men (n=423)	Women (n=461)	18-34 (n=244)	35-54 (n=228)	55 plus (n=415)
	The distance you have to travel for in-person appointments	7.4	7.1	7.4	7.6	7.4	7.4	6.6	7.4	8.0
Z	The quality of the healthcare you receive	7.4	7.4	7.3	7.4	7.5	7.3	6.8	7.0	8.1
MEAN	Your ability to see your family doctor or primary healthcare provider when you need it	6.3	6.5	6.2	6.1	6.5	6.1	5.8	6.0	6.8
	The wait time between the appointment request and when you are seen	6.0	6.0	5.9	6.1	6.3	5.8	5.5	5.9	6.6

Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=887 Albertans.







#### Access to acute care in the past 12 months

Q – In the past 12 months, how many times have you accessed acute care such as a visit to the emergency department [ROTATE] \_\_\_\_\_ number of visits OR None

Alberta	Calgary	Edmo
(n=1013)	(n=365)	(n=

Rest of Alberta (n=362)

Mean	One time	One time	One time	One time
None/Zero times	69.1%	71.7%	70.7%	65.3%
One time	16.8%	16.4%	16.9%	17.1%
Two to four times	10.2%	9.6%	8.7%	11.9%
Five or more times	3.9%	2.3%	3.7%	5.7%

Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=1013 Albertans.

RESPONSES

0







#### Travel distance to acute care visit

Q – [IF REPORTS ACCESSING ACUTE CARE IN THE PAST YEAR] How far did you have to travel for your acute care visit? \_\_\_\_ Minutes

		Alberta (n=304)	Calgary (n=107)	Edmonton (n=87)	Rest of Alberta (n=110)
S	Mean	21 minutes	24 minutes	21 minutes	19 minutes
O N S E	15 minutes or less	46.1%	34.6%	46.4%	55.1%
R E S P	16-30 minutes	40.6%	43.1%	43.1%	37.0%
T 0 P	31-60 minutes	11.0%	19.7%	7.8%	6.0%
	Over an hour	2.4%	2.5%	2.7%	2.0%

Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=304 Albertans who report accessing acute care in the past year.





Rest of



### Waiting time between arriving at ER and access to acute care

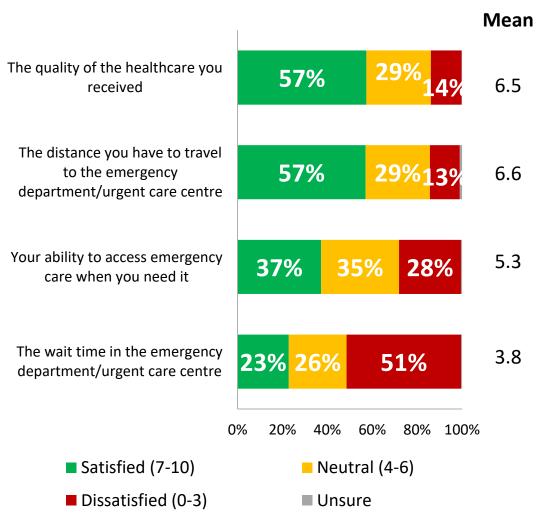
Q - [IF REPORTS ACCESSING ACUTE CARE IN THE PAST YEAR] How long did you have to wait between arriving at the emergency room and when you were seen by the healthcare provider? \_\_\_\_ hours

		Alberta (n=299)	Calgary (n=108)	Edmonton (n=85)	Alberta (n=106)
	Mean	Five hours	Five hours	Five hours	Six hours
SES	Less than an hour	7.6%	2.7%	12.9%	8.2%
P 0 N	One to two hours	31.3%	35.9%	21.3%	33.9%
RESI	Three to four	23.3%	17.0%	20.8%	30.3%
0 P	Five to six hours	15.5%	19.0%	15.9%	12.4%
Ė	Seven to 10 hours	15.3%	17.8%	21.2%	9.4%
	Eleven hours or more	7.0%	7.6%	8.0%	5.8%

Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=299 Albertans who report accessing acute care in the past year.







<sup>\*</sup>Weighted to the true population proportion.

Q – [IF REPORTS ACCESSING ACUTE CARE IN THE PAST YEAR] On a scale from 0 to 10, where 0 is completely dissatisfied and 10 is completely satisfied, how satisfied or dissatisfied are you with the following: [RANDOMIZE]

Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=304 Albertans who report accessing acute care in the past year.





### Satisfaction level with emergency care

### 6 in 10 Albertans

who report accessing acute care in the past year say they are satisfied with the quality of healthcare they receive and the distance they had to travel (57% each). However, they are twice as likely to be dissatisfied (51%) than satisfied with the wait times in the ER/urgent care centre.

<sup>\*</sup>Charts may not add up to 100 due to rounding.



# Satisfaction level with emergency care – by demographics

Q – [IF REPORTS ACCESSING ACUTE CARE IN THE PAST YEAR] On a scale from 0 to 10, where 0 is completely dissatisfied and 10 is completely satisfied, how satisfied or dissatisfied are you with the following: [RANDOMIZE]

		Alberta (n=308)	Calgary (n=108)	Edmonton (n=89)	Rest of Alberta (n=111)	Men (n=144)	Women (n=162)	18-34 (n=133)	35-54 (n=60)	55 plus (n=115)
	The distance you have to travel to the emergency department/urgent care centre	6.6	6.1	6.8	6.9	6.4	6.8	6.0	6.6	7.6
E A N	The quality of the healthcare you received	6.5	6.3	6.6	6.6	6.6	6.5	5.9	6.5	7.4
Σ	Your ability to access emergency care when you need it	5.3	5.4	5.3	5.2	5.4	5.2	5.2	4.8	5.8
	The wait time in the emergency department/urgent care centre	3.8	3.8	3.9	3.8	4.2	3.5	4.2	3.2	3.9

Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=308 Albertans who report accessing acute care in the past year.

Doct of





Rest of



### Delaying care because of wait times or travel times

Q – In the past year, on how many occasions have you chosen to delay or not seek healthcare because wait times or travel times were too long? \_\_\_\_ occasions or Never

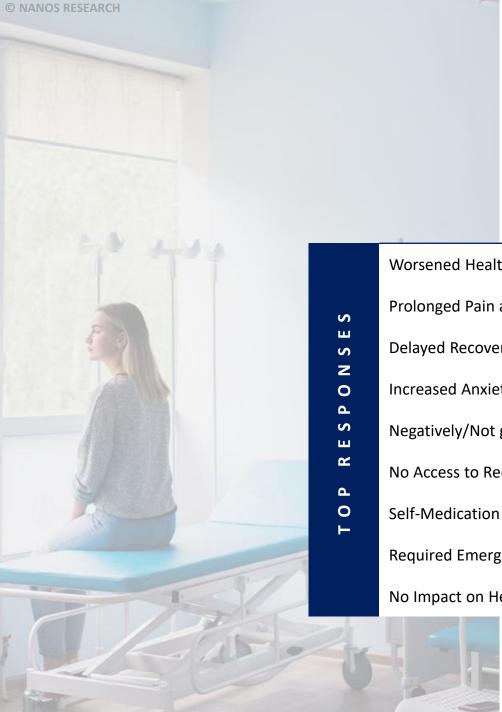
		Alberta (n=1004)	Calgary (n=361)	Edmonton (n=284)	Alberta (n=359)
N S E S	Mean	One occasion	One occasion	One occasion	One occasion
RESPO	Never/zero	62.4%	65.8%	63.4%	58.4%
T 0 P	One occasion or more	37.6%	34.2%	36.6%	41.6%

Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=1004 Albertans.





Frequency



# Impact of delaying or not seeking healthcare on personal health

Q – [IF REPORTS DELAYING CARE BECAUSE OF WAIT TIMES OR TRAVEL TIME] How did delaying or not seeking healthcare impact your health, if at all? [OPEN]

	(n=316)
Worsened Health Condition/Complications	16.6%
Prolonged Pain and Discomfort	10.3%
Delayed Recovery	9.0%
Increased Anxiety and Stress/Mental Health Decline	6.5%
Negatively/Not good (unspecified)	6.1%
No Access to Required Medical Services/Issue not resolved	5.3%
Self-Medication and Home Remedies	4.4%
Required Emergency or Additional Care	4.4%
No Impact on Health	22.3%

Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=316 Albertans who report delaying care.

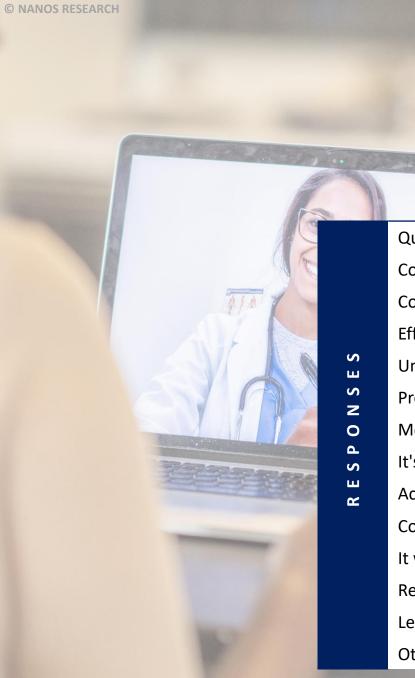




### Virtual care

Virtual care, used for prescription renewals or follow-ups, involves talking to a doctor or nurse by phone, video, or secure message. Hybrid care, often used in rural communities when a doctor isn't on-site, involves visiting a local clinic to see a nurse, while a doctor joins virtually to provide diagnosis and care.

(n=933)



# Benefits of receiving care with a virtual component

Q – What do you think is the biggest benefit of receiving care that includes a virtual component - whether fully virtual or part of a hybrid model, if any? [OPEN]

Frequency

	•
Quicker Access to Healthcare	30.2%
Convenience and Time-Saving	25.0%
Concerns About Quality of Care/No Perceived Benefits/don't like it	12.7%
Efficiency for Healthcare Providers	6.0%
Unsure/Uncertainty or Lack of Experience	5.1%
Prescription Renewals	3.5%
Mental Reassurance by talking to doctor/get to talk to a doctor and figure things out	3.5%
It's good (unspecified)	3.5%
Accessibility for Mobility Issues	2.9%
Convenience for Remote Communities	2.4%
It works for certain things	1.7%
Reduced Exposure to Illness	1.3%
Less expensive	0.8%
Other	1.5%

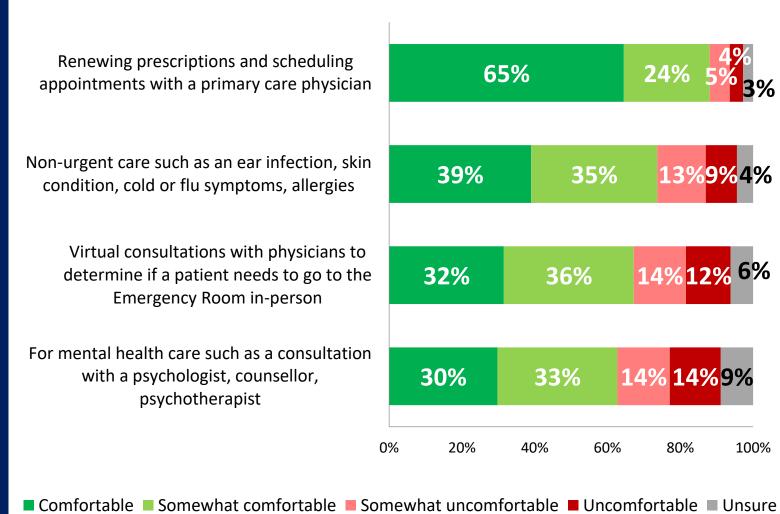




Majority of Albertans feel comfortable (65%) or somewhat comfortable (24%) renewing prescriptions and scheduling appointments with a primary care physician virtually. Moreover, Albertans are more than twice as likely to report feeling comfortable or somewhat comfortable receiving non urgent care virtually (39% comfortable; 35% somewhat comfortable), attending virtual consultations with physicians (32% comfortable; 36% somewhat comfortable) or receiving mental healthcare virtually (30% comfortable; 33% somewhat comfortable) than feeling uncomfortable or somewhat uncomfortable.

Q – Would you be comfortable, somewhat comfortable, somewhat not comfortable or not comfortable receiving healthcare virtually in the following scenarios: [RANDOMIZE]

#### Level of comfort with aspects of virtual care



<sup>\*</sup>Weighted to the true population proportion.



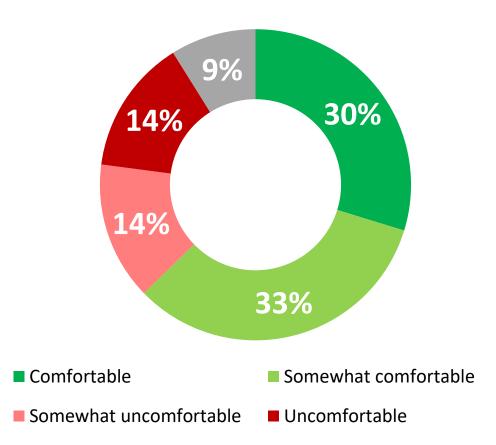


Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=1017 Albertans.

<sup>\*</sup>Charts may not add up to 100 due to rounding.

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Unsure

Q – Would you be comfortable, somewhat comfortable, somewhat not comfortable or not comfortable receiving healthcare virtually in the following scenarios: [RANDOMIZE] - For mental health care such as a consultation with a psychologist, counsellor, psychotherapist

# Level of comfort for receiving mental health care virtually

ewhat	Calgary (n=366)	Edmonton (n=289)	Rest of Alberta (n=362)		
/ Some table	60.3%	65.6%	62.9%		
Comfortable/ Somewhat comfortable	Men (n=505)	Women (n=508)	18 to 34 (n=279)	35 to 54 (n=277)	55 plus (n=461)
Сом	57.6%	67.8%	71.3%	64.9%	53.9%
٠					
newha <sup>.</sup> Ie	Calgary (n=366)	Edmonton (n=289)	Rest of Alberta (n=362)		
e/ Soi ortab	30.9%	25.7%	28.0%	3	
Uncomfortable/ Somewhat uncomfortable	Men (n=505)	Women (n=508)	18 to 34 (n=279)	35 to 54 (n=277)	55 plus (n=461)
Unco	32.4%	24.5%	22.9%	27.9%	33.1%

Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=1017 Albertans.



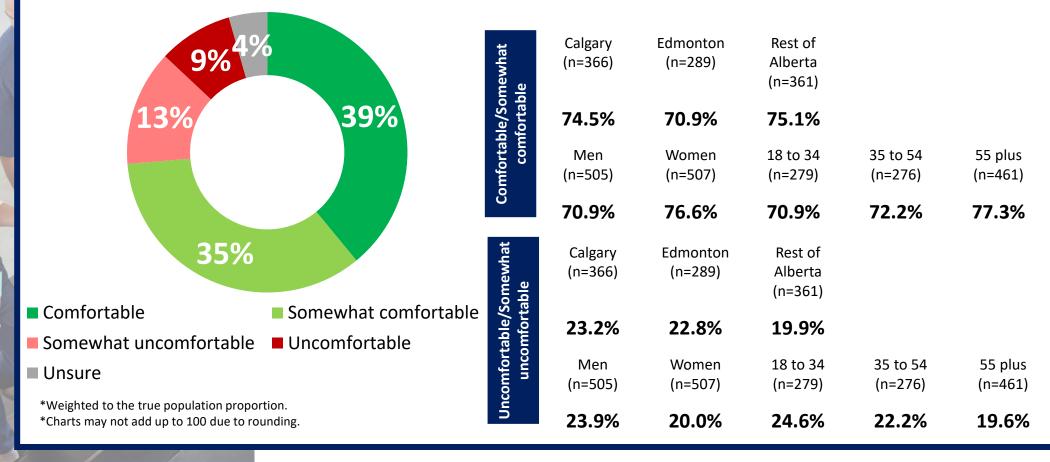


<sup>\*</sup>Weighted to the true population proportion.

<sup>\*</sup>Charts may not add up to 100 due to rounding.

### Level of comfort for receiving non-urgent care virtually

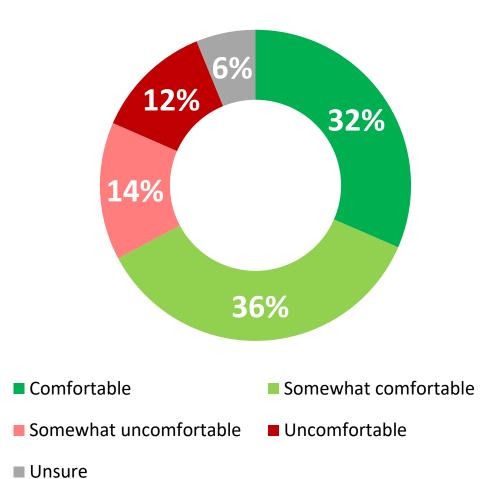
Q – Would you be comfortable, somewhat comfortable, somewhat not comfortable or not comfortable receiving healthcare virtually in the following scenarios: [RANDOMIZE] - **Non-urgent care such as an ear infection, skin condition, cold or flu symptoms, allergies** 







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<sup>\*</sup>Weighted to the true population proportion.

Q – Would you be comfortable, somewhat comfortable, somewhat not comfortable or not comfortable receiving healthcare virtually in the following scenarios: [RANDOMIZE] - Virtual consultations with physicians to determine if a patient needs to go to the Emergency Room in-person

# Level of comfort for virtual consultations with physicians

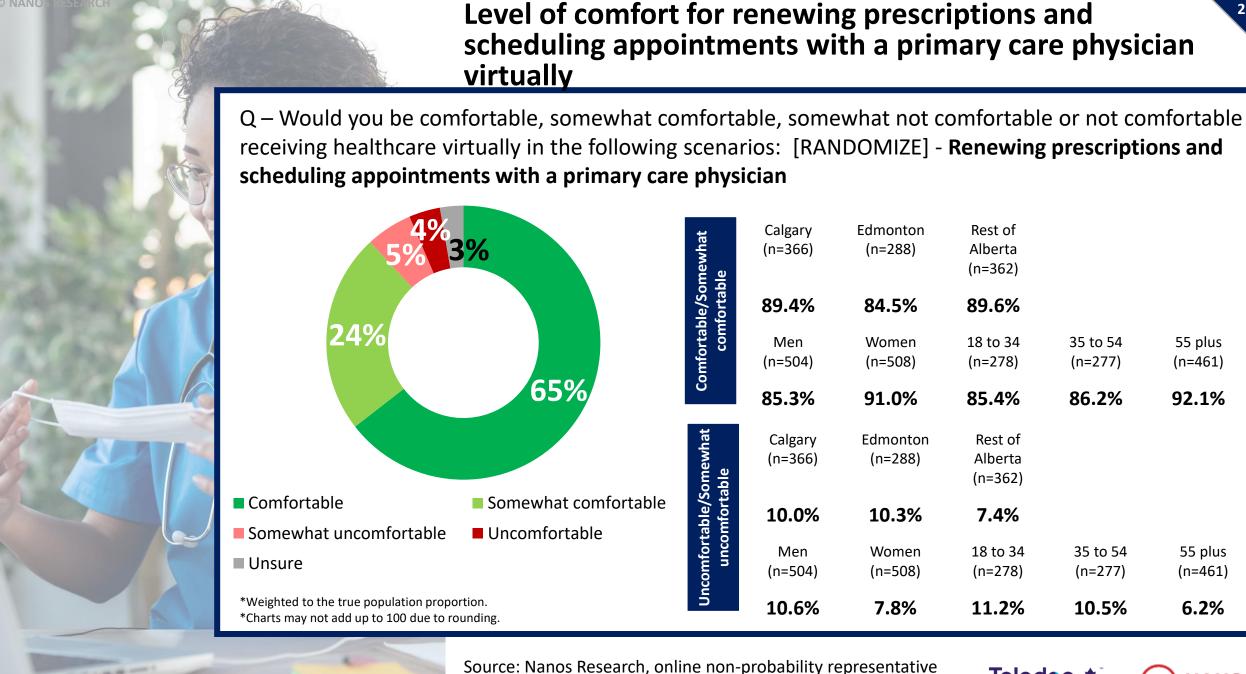
e e	Calgary (n=366)	Edmonton (n=288)	Rest of Alberta (n=361)		
rtable/ Som comfortable	71.2%	67.8%	62.9%		
Comfortable/ Somewhat comfortable	Men (n=504)	Women (n=507)	18 to 34 (n=279)	35 to 54 (n=276)	55 plus (n=460)
S	64.9%	69.6%	64.7%	66.1%	70.3%
e e	Calgary (n=366)	Edmonton (n=288)	Rest of Alberta (n=361)		
e/ Son ortable	24.9%	24.3%	30.1%		
Uncomfortable/ Somewhat uncomfortable 	Men (n=504)	Women (n=507)	18 to 34 (n=279)	35 to 54 (n=276)	55 plus (n=460)
Onco	27.5%	25.7%	26.8%	28.4%	24.6%

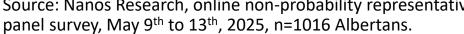
Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=1015 Albertans.





<sup>\*</sup>Charts may not add up to 100 due to rounding.

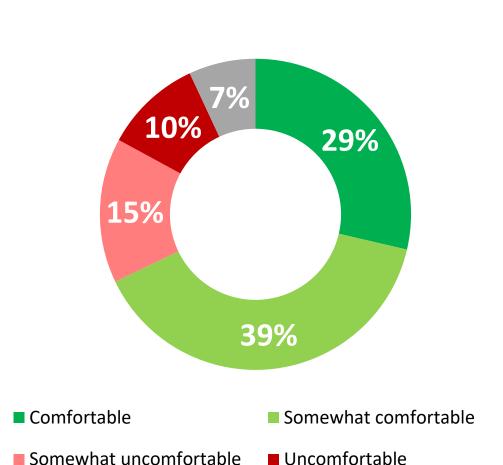








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Unsure

Q - Would you feel comfortable, somewhat comfortable, somewhat uncomfortable or uncomfortable with a hybrid model of healthcare that includes both virtual and in-person care? For example, this could include a patient going to the ER in person and having the consultation and diagnosis with a doctor virtually, all while being in the presence of a nurse in-person at the ER.

# Level of comfort with a hybrid healthcare model

ewhat	Calgary (n=365)	Edmonton (n=289)	Rest of Alberta (n=359)		
/Some	70.8%	66.3%	66.2%		
Comfortable/Somewhat comfortable	Men (n=503)	Women (n=506)	18 to 34 (n=277)	35 to 54 (n=277)	55 plus (n=459)
Con	68.4%	67.7%	66.4%	67.8%	69.0%
newhat le	Calgary (n=365)	Edmonton (n=289)	Rest of Alberta (n=359)		
le/Son ortabl	23.0%	24.1%	28.2%		
Uncomfortable/Somewhat uncomfortable	Men (n=503)	Women (n=506)	18 to 34 (n=277)	35 to 54 (n=277)	55 plus (n=459)
Unce	23.7%	26.4%	26.7%	24.9%	24.3%

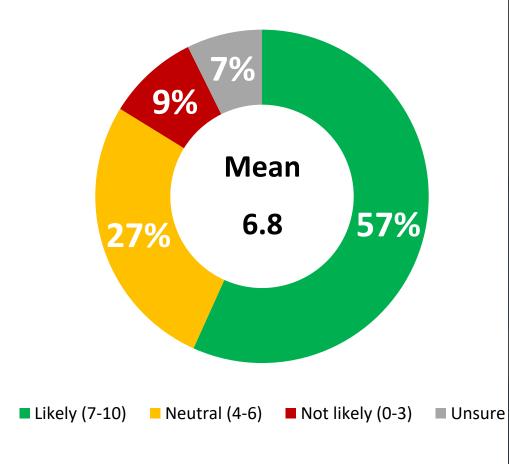
Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=1013 Albertans.





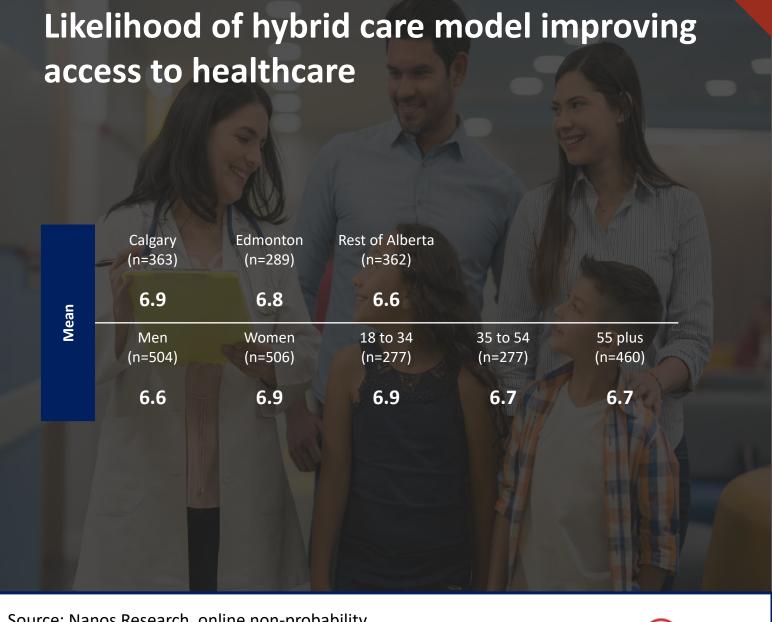
<sup>\*</sup>Weighted to the true population proportion.

<sup>\*</sup>Charts may not add up to 100 due to rounding.



<sup>\*</sup>Weighted to the true population proportion.

Q – On a scale from 0 to 10 where 0 is not likely at all and 10 is very likely, how likely do you think that hybrid care models (combining virtual and in-person care) could help improve access to healthcare in your community?



Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=1014 Albertans.





<sup>\*</sup>Charts may not add up to 100 due to rounding.



#### Increasing comfort with virtual care

Q – Please rank the following statements in order of impact on increasing your comfort using virtual care, where 1 is the most likely to increase your comfort with virtual care, 2 the second most likely, and so on. [RANDOMIZE]

- Decreasing wait times for care
  (33.0% first rank; 20.1% second rank)
- Already have a relationship with the healthcare provider (31.2% first rank; 22.7% second rank)
- It being recommended by a healthcare provider I trust (14.4% first rank; 30.5% second rank)
- Being familiar with the technology or application used (7.5% first rank; 17.2% second rank)
- Knowing where the data is stored (5.2% first rank; 8.9% second rank)
- Other
  (0.6% first rank; 0.5% second rank)





#### Increasing comfort with virtual care - By demographics

Q – Please rank the following statements in order of impact on increasing your comfort using virtual care, where 1 is the most likely to increase your comfort with virtual care, 2 the second most likely, and so on. [RANDOMIZE]

	Alberta (n=1017)	Calgary (n=366)	Edmonton (n=289)	Rest of Alberta (n=362)	Men (n=505)	Women (n=508)	18-34 (n=279)	35-54 (n=277)	55 plus (n=461)
Decreasing wait times for care	33.0%	31.4%	36.1%	32.2%	35.4%	30.5%	39.6%	32.5%	28.4%
Already having a relationship with the healthcare provider	31.2%	35.2%	27.5%	30.2%	26.3%	36.3%	21.9%	34.1%	35.5%
It being recommended by a healthcare provider I trust	14.4%	12.7%	12.6%	17.5%	16.2%	12.8%	18.3%	11.4%	14.5%
Being familiar with the technology or application used	7.5%	7.9%	8.6%	6.4%	7.7%	7.2%	10.7%	5.8%	6.8%
Knowing where the data is stored	5.2%	5.9%	5.0%	4.7%	5.1%	5.4%	3.5%	6.8%	4.8%
Other	0.6%	0.6%	0.3%	0.8%	0.4%	0.8%	-	1.0%	0.7%
Unsure	5.5%	4.7%	6.7%	5.3%	6.6%	4.4%	3.3%	6.6%	5.9%
None of the above	2.5%	1.6%	3.1%	2.9%	2.3%	2.5%	2.6%	1.7%	3.3%

**FIRST RANK** 

Source: Nanos Research, online non-probability representative panel survey, May 9<sup>th</sup> to 13<sup>th</sup>, 2025, n=1017 Albertans.







Nanos conducted a representative non-probability online survey of 1017 Albertans, 18 years of age or older, between May 9<sup>th</sup> and 13<sup>th</sup>, 2025. The sample is geographically stratified to be representative of Canada.

A margin of error cannot be calculated on a non-probability sample. For comparison purposes, a probability sample of 1017 respondents would have a margin of error of  $\pm 3.1$  percentage points, 19 times out of 20.

The research was commissioned by Teladoc Health and was conducted by Nanos Research.

Full data tables with weighted and unweighted number of interviews is here.

Note: Charts may not add up to 100 due to rounding

Element	Description	Element	Description
Research sponsor	Teladoc Health Canada	Weighting of Data	The results were weighted by age and gender using the latest Census information (2021) and the sample is geographically stratified to ensure a distribution across all regions of Alberta. See tables for full weighting
Population and Final Sample Size	1,017 Randomly selected individuals.		disclosure.  Screening ensured potential respondents did not work in the market research
Source of Sample	Sago	Screening	industry, in the advertising industry, in the media or a political party prior to administering the survey to ensure the integrity of the data.
Type of Sample	Non-probability	Excluded Demographics	Individuals younger than 18 years old; individuals without land or cell lines, and individuals without internet access could not participate.
Margin of Error (for a comparative probability sample)	For comparison purposes, a probability sample of 1,017 respondents would have a margin of error of $\pm 3.1$ percentage points, 19 times out of 20.	Stratification	By age and gender using the latest Census information (2021) and the sample is geographically stratified to be representative of Alberta.
Mode of Survey	Online survey	Question Order	Question order in the preceding report reflects the order in which they appeared in the original questionnaire.
Sampling Method Base	Non-probability		
		Question Content	All questions asked are contained in the report
Demographics (Captured)	Edmonton, Calgary, Rest of Alberta; Men and Women; 18 years and older. Three-digit postal code was used to validate geography.	Question Wording	The questions in the preceding report are written exactly as they were asked to individuals.
Field Dates	May 9 <sup>th</sup> to 13 <sup>th</sup> 2025.	Research/Data Collection Supplier	Nanos Research
Language of Survey	The survey was conducted in English.	Contact	Contact Nanos Research for more information or with any concerns or questions. <a href="http://www.nanos.co">http://www.nanos.co</a> Telephone:(613) 234-4666 ext. 237
Standards	Nanos Research is a member of the Canadian Research Insights Council (CRIC) and confirms that this research fully complies with all CRIC Standards including the CRIC Public Opinion Research Standards and Disclosure Requirements.  https://canadianresearchinsightscouncil.ca/standards/	Data Tables	Email: info@nanosresearch.com.  By region, age and gender



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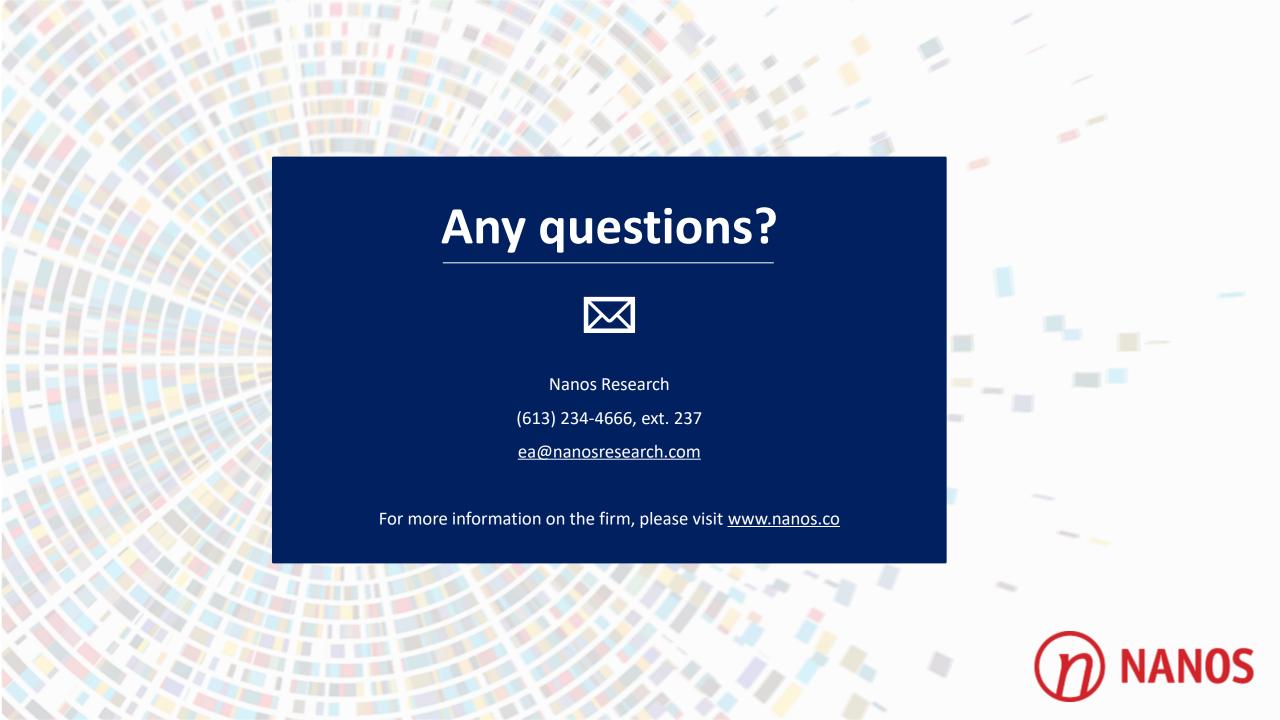


dimap

This international joint venture between <u>dimap</u> and <u>Nanos</u> brings together top research and data experts from North American and Europe to deliver exceptional data intelligence to clients. The team offers data intelligence services ranging from demographic and sentiment microtargeting; consumer sentiment identification and decision conversion; and, data analytics and profiling for consumer persuasion. www.nanosdimap.com

### **Ethic**Stratēgies

Ethic Strategies was created by the founding partners of <u>PAA Advisory</u> and the <u>Nanos</u> <u>Research Corporation</u>, both recognized leaders in research, advocacy, and advisory. Ethic provides bespoke strategic counsel, advice, and communications strategies to organizations facing serious issues. <u>www.ethicstrategies.com</u>





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