

CANADIAN COUNCIL FOR
DONATION AND TRANSPLANTATION



CONSEIL CANADIEN POUR
LE DON ET LA TRANSPLANTATION

PUBLIC AWARENESS AND ATTITUDES
ON ORGAN AND TISSUE
DONATION AND TRANSPLANTATION
INCLUDING DONATION
AFTER CARDIAC DEATH

FINAL REPORT

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FOREWARD

The Canadian Council for Donation and Transplantation (CCDT) is pleased to present in this report the findings of a survey conducted in 2005 to determine the current beliefs and attitudes of Canadians towards organ and tissue donation. The last surveys of this kind were conducted in 2001 and again in 2002.

Enviro-nics Research Group conducted this public survey in association with a National Forum on Donation after Cardiac Death organized by CCDT in February 2005. This survey provides the essential input from the Canadian public on attitudes on organ and tissue donation in general, and towards the possibility of donation after cardiac death (DCD) in particular.

The mandate of the CCDT is to provide the federal/provincial/territorial Conference of Deputy Ministers of Health (CDM) with advice on organ and tissue donation and transplantation in Canada. As part of meeting this mandate, the CCDT is committed to working with all stakeholders to optimize the potential for organ and tissue donation in Canada and to help diminish wherever possible the gap that exists between those who need organ and tissue transplants and the numbers of organs and tissues available to meet this need.

Reducing the gap requires us not only to optimize current practices, but also to consider alternative approaches to organ and tissue donation within sound ethical and legal frameworks.

For this reason, it is essential to be clear about the views of Canadians and to bring to their attention any new approaches to organ and tissue donation that may impact on their willingness to be organ and tissue donors. Understanding factors that motivate Canadians to donate and the barriers to donation are important facets to the development of effective public awareness and social marketing strategies and responsive health care.

The CCDT hopes that the findings of the public survey presented in this report will be of broad interest to all those who are working to optimize organ and tissue donation and transplantation.



Dr. Sam Shemie, Chair, CCDT Donation Committee



Ms. Kimberly Young, Chief Executive Officer, CCDT

ACKNOWLEDGEMENTS

Several people gave generously of their time and expertise to the Canadian Council for Donation and Transplantation for the planning, development and implementation of this research project.

The CCDT wishes to acknowledge and thank the individuals who helped as expert advisors to this project. Their advice and dedication to the project were invaluable and are much appreciated:

- **Andrew Baker MD**, Medical Director Trauma and Neurosurgery Intensive Care Unit and Director of the Cara Phelan Centre for Trauma Research at St. Michael's Hospital, Toronto, Ontario. His extensive experience in critical care medicine and in dealing with families in the donation process brought an extremely valuable perspective to the project.
- **Graeme Rocker MD**, Past President Canadian Critical Care Society and Professor, Department of Medicine Dalhousie University. His leadership roles in promoting improvements to end-of-life care in Canada and in ethics and research were fundamental in shaping this project.
- **Sam Shemie MD**, Division of Pediatric Critical Care, Montreal Children's Hospital, McGill University Health Centre, CCDT Council Member and Chair of the CCDT Donation Committee. His expertise with critical care and broad understanding of donation and related CCDT initiatives provided important contributions to the project.
- **Kimberly Young BN, RN**, Chief Executive Officer, Canadian Council for Donation and Transplantation. Her expertise in the donation process and understanding of donation related CCDT initiatives were very beneficial in framing the project to successfully consult the public.

The success of this project is the result of a team effort, including the dedication of staff and contractors. **Carole Loiseau BSW, RSW, MSc**, Director of Corporate Services for the CCDT, provided project management and **Donna Dasko Ph.D.**, Senior Vice President with Environics Research Group, provided research expertise and ensured effective research implementation.

INTRODUCTION AND SUMMARY

In Canada, there is a discrepancy between the number of individuals requiring organ and tissue transplants and the numbers of organs and tissues available for transplantation. While 1,905 organs were transplanted¹ in 2005, at year end, 4,025 Canadians remained on the transplant waiting list,² while another 283 died while waiting.³ The need for organ and tissue donors will only increase in the future as the population ages.

In addition to understanding this need, there are numerous actions that Canadians can take. They can sign a donor card or register in their province (where registries exist). They can discuss their decision to donate with loved ones and their chosen medical advocates. They can also donate the organs and/or tissues of a deceased loved one.

While it remains essential to optimize current strategies to improve organ donation rates in Canada, consideration also needs to be given to alternative approaches that might lead to increasing numbers of 'other' potential donors.

In Canada, organ donation is only possible in the case of neurological determination of death (brain death). An alternative approach, donation after cardiac death (cardiocirculatory determination of death), is possible but not currently practiced in Canada. Numerous other countries such as the United States, Spain and the United Kingdom successfully practice organ donation after cardiac death.

Donation after cardiac death (DCD) usually involves a critically ill brain injured patient with no realistic chance of survival for whom a consensus has been reached between family and physicians to a withdrawal of life support. At present, the request of patients and families for organ donation in such circumstances cannot be honoured in Canada.

The possibility of DCD is being explored by Canadian health care providers and professionals including the Canadian Council for Donation and Transplantation (CCDT). The CCDT is a national, not-for-profit organization mandated to provide the federal/provincial/territorial Conference of Deputy Ministers of Health (CDM) with advice on organ and tissue donation and transplantation in Canada.

In early 2005, the CCDT co-hosted a multi-disciplinary consensus forum in which a proposed strategy for DCD was developed within a sound legal and ethical framework.

To augment the recommendations of this forum, the CCDT also sought to understand the views of the public and health professionals in relationship to DCD. Environics Research Group Limited was retained to conduct survey research among the Canadian public to examine current awareness, knowledge, and attitudes towards organ and tissue donation, including donation after a cardiac death.

1 Canadian Organ Replacement Register, Canadian Institute for Health Information, (2005) Transplants by Organ and Donor Type, Province of Treatment, Canada.

2 Canadian Organ Replacement Register, Canadian Institute for Health Information, (2005) Patients Waiting for Transplant on December 31, 2005, Canada and Provinces.

3 Canadian Organ Replacement Register, Canadian Institute for Health Information, (2005) Patients Who Died While Waiting for a Transplant, Canada and Provinces, Summary Statistics, January 1 to December 31, 2005.

The goals of the public opinion survey were:

- To provide insight into the awareness, knowledge and attitudes in general toward organ and tissue donation among Canadians;
- To provide insight into possible strategies to increase awareness of donation among the Canadian public;
- To explore Canadians' awareness, knowledge and attitudes toward donation after cardiac death.

The topics addressed in this survey included:

- Awareness of organ and tissue donation
- Approval of organ and tissue donation
- Personal views and behaviour
- Importance of specific motivations and beliefs for donating and for not donating
- Knowledge issues about donation
- Family and legal issues surrounding consent
- Information sources and needs
- Awareness and attitudes toward donation after cardiac death
- Demographics

The research project was designed and directed by Dr. Donna Dasko, Ph.D, Senior Vice-President, Environics Research Group, in consultation with the CCDT and its partners.

The survey was conducted with 1,505 Canadians 18 years of age and older, living within the 10 provinces of Canada. The survey was conducted nationally, in English and French, by telephone between August 17 and September 7, 2005. The margin of error for a sample of this size is ± 2.5 percentage points, 19 times in 20. The margins are wider for regional, demographic and attitudinal subsamples.

Where appropriate, the report also references tracking and related tracking data from two previous surveys conducted by Environics for Health Canada (CCDT): a survey of 1,516 Canadians 18 years of age and older, conducted nationally by telephone between October 10 and 15, 2001; and a survey of 1,514 Canadians conducted nationally by telephone between April 29 and May 6, 2002.⁴

This report presents the findings of the survey from a national perspective and includes discussion of sociodemographic variances throughout. In addition, regional data tables are provided in the appendices for further information. The survey methods and a discussion of the implications for social marketing are also appended to this report. All other statistical tables are presented under separate cover. Data tables by ethnocultural group and English and French questionnaires are also available by contacting the CCDT office or visiting the CCDT website at www.ccdt.ca.

The description of Canadians' opinions in this report is based on random sampling of the population and telephone surveying using a structured questionnaire and specific sample size. While the findings are discussed in the present tense, they represent a snapshot of opinion at a certain point in time. Caution is always required in extrapolating the findings of survey research beyond the parameters of the survey itself.

It was not the intention of the CCDT or of Environics Research Group that this survey would provide data sufficient to indicate significant differences between respondents in various demographic areas such as income, gender, ethnocultural or religious backgrounds. Where any statement is made in regard to specific respondents and their beliefs, perceptions or opinions, these statements are descriptive and should not be necessarily interpreted as representing statistically significant differences between any such group.

The major findings of the survey are:

Awareness and information sources

There is almost unanimous awareness of organ and tissue donation; 93 percent of Canadians have heard about the topic.

Canadians are most likely to have seen, heard or read about organ and tissue donation on television or in newspapers. Other places less frequently mentioned include: driver's license/application, magazines, family and friends, radio and doctor's office.

⁴—*Organ and Tissue Donations: Canadian Public Awareness, Knowledge and Attitudes*, released November 2001 and *Organ and Tissue Donations: Awareness, Knowledge and Advertising Recall*, released June 2002.

The Internet is the most popular source of information about organ and tissue donation, followed by doctors or health professionals.

Approval of organ and tissue donation

Approval of organ and tissue donation is almost unanimous among Canadians: 96 percent of Canadians strongly (71%) or somewhat (25%) approve of organ and tissue donation.

More than one-half of Canadians (54%) say they have signed an organ donor card or registered as an organ donor, and almost two in ten (17%) are registered with a donor registry. One-third of Canadians (35%) say they are aware of an organ donor registry in their province.

More than five in ten Canadians (55%) have decided to be organ donors and four in ten (39%) have decided to be tissue donors. In both instances, fewer than one in ten (8% each) have decided not to be donors. Almost four in ten (37%) are undecided on organ donation and one-half (51%) are undecided on tissue donation.

The most frequently mentioned reasons for deciding not to donate organs or tissue are: have a medical condition, can't donate (19%), religious/spiritual beliefs (11%), personal preference/beliefs/just don't want to (10%), age/I'm too old, (8%), want to keep my organs/tissue/body intact (8%) and don't know enough about it (5%).

The most frequently mentioned reasons for not having made a decision are: haven't thought about it/never occurred to me (24%), don't know enough about it/unaware of it (16%), put it off/don't like to think about it (6%) and have a medical condition, can't donate/health reasons (5%).

Most (74%) of those who have made a decision have discussed it with the person who would act on their behalf in a medical emergency.

Motivations

Almost all Canadians think saving the life of a person who needs an organ transplant (92%), improving the quality of life of someone who needs an organ

transplant (91%) and helping many people who need transplants (89%) are important reasons for being a donor. Most think that the need for organ donors in Canada (85%), donating because it is the right thing to do (82%), contributing to scientific research into preventions and cures (79%), and no longer needing your organs after death (78%) are important reasons for being a donor. Close to half say that comforting loved ones by donating (56%) and being able to choose what organs would be donated (51%) are important, and one-third say that being remembered as good and caring is important (33%).

Canadians generally attach low importance to reasons not to become a donor. Two in ten see the following as important reasons not to donate: concern over underserving recipients who have abused their health (20%) and the idea that donation makes death a more difficult experience for the family of the deceased (19%). Smaller proportions think that the following are important reasons for deciding not to donate: death is too disturbing to think about (16%), donation might delay or complicate burial arrangements (16%), not believing in organ and tissue donation (14%), family members' religious or spiritual beliefs do not support organ and tissue donation (14%), family members' cultural beliefs and values do not support organ and tissue donation (14%), personal religious or spiritual beliefs do not support organ and tissue donation (13%), personal cultural beliefs and values do not support organ and tissue donation (13%), or procedures used to remove organs and tissues are too intrusive (12%).

Beliefs and perceptions

The vast majority of Canadians (80%) are aware that there is a great need for more organ and tissue donations in Canada.

Most Canadians believe that doctors are committed to providing high quality care to dying patients (90%), and that anyone at any age can become an organ and tissue donor (75%). Opinion is divided (48% not true to 47% true) on the belief that rich people who need organ transplants are more likely to receive them. Most Canadians reject the beliefs that the donation process could exploit members of minority groups (77% believe it is not true) and that doctors may declare death prematurely in order to get donations (78% believe it is not true).

Family and legal issues

Six in ten Canadians (58%) have discussed organ and tissue donation with close family members. Nine in ten Canadians (91%) are confident that their intentions will be respected.

The majority of Canadians believe that the wishes of the deceased do take precedence (64%), and should take precedence (89%), over the wishes of the family when someone has signed a donor card/registered as a donor but the family does not wish donation to take place.

The vast majority of Canadians are very likely to consent to an organ donation for a deceased loved one who had signed a donor card and had discussed donation with them (88%); most are very likely to consent if their loved one had signed a donor card but had never discussed it with them (71%), or had discussed donation but had not signed a donor card (59%). Two in ten (22%) would be very likely to consent to an organ donation for a loved one if he or she had not signed a donor card or discussed donation.

Withdrawal of life support

Almost eight in ten Canadians (77%) believe that withdrawal of life support is acceptable when family and doctors agree there is no realistic chance of survival; one in ten (9%) say it is unacceptable.

Understanding of brain death

Half of Canadians (49%) understand brain death to mean that the patient is in a coma with no realistic chance of survival; three in ten (29%) believe it means that the patient is dead. One in ten say that it means the patient is in a coma with a good chance of survival with serious brain impairment (10%) or the patient is in a coma with some chance of survival (8%).

Donation after cardiac death (DCD)

Awareness of donation after cardiac death is low; about one in ten Canadians (13%) had heard anything about DCD prior to the survey.

Large majorities of Canadians find the general concepts of DCD to be acceptable, i.e., that families may agree to DCD after agreeing to withdrawal of life support (74%) and that after such agreement, the patient would be moved to an operating room and life support withdrawn (71%).

Smaller majorities find the necessary speed of retrieval procedures after cardiac death to be acceptable, i.e., that surgery might occur within five minutes of death (64%) and that the family would leave the deceased within minutes of death (58%).

About half find technical procedures to maintain organs performed prior to cardiac death (53%) and medications to maintain organs administered before death (47%) to be acceptable.

Most Canadians (79%) say that the option of organ donation after cardiac death should be available in Canada; one in ten (8%) say no and one in ten (9%) say it depends.

Furthermore, most Canadians (85%) would be comfortable if hospitals were to offer DCD, while fewer than half (42%) would be comfortable if they did not offer DCD.

Canadians express overall confidence in the approach of medical personnel toward issues associated with DCD: Almost nine in ten are confident that strict standards will be put in place to guide DCD programs (86%), and about nine in ten are confident that health care professionals will follow these strict ethical standards (91%). Similarly, almost nine in ten are confident that health care staff will be motivated by the best interests of the dying patient (86%) and that the process of providing optimal end-of-life care will not be affected (86%). In addition, about nine in ten are confident that a dying patient's dignity will be recognized (89%) and that an organ donor could have a normal funeral (93%).

AWARENESS AND INFORMATION SOURCES

Awareness of organ and tissue donation

There is almost unanimous awareness of organ and tissue donation. Canadians are most likely to have seen, heard or read about organ and tissue donation on television or in newspapers.

When asked if they have ever heard anything about the topic of organ and tissue donation, that is, people donating their body, their organs or their tissues at the time of their death, almost all Canadians (93%) express awareness. Seven percent say they have not heard anything on this topic. There has been essentially no change in this high number since 2001 and 2002 surveys.

Awareness of organ and tissue donation is high in all regions and demographic groups; however, it is marginally lower among those aged 18 to 24 years, those with lower levels of income and education and those born outside of Canada.

When asked where they have seen, heard or read about organ and tissue donation or transplantation, Canadians most frequently mention television (45%) and newspapers (30%). Smaller proportions mention driver's licence/application (15%), magazines (15%), family and friends (13%), radio (9%), doctor's offices (7%), the Internet (4%), hospitals (4%) and at work (3%). A variety of other sources are mentioned, each by fewer than two percent. A total of about one in ten say "nowhere" (5%) or offer no response (3%).

Those aged 25 to 64 years are more likely to mention television and driver's licences. Those aged 55 and older, and those with higher levels of education are more inclined to mention newspapers and magazines. Those aged 65 or older are more likely to mention family and friends.

Awareness of organ and tissue donation

	OCT. 2001	MAY 2002	AUG.-SEPT. 2005
Yes	94	95	93
No	6	5	7

Q.1

Have you ever heard anything about the topic of organ and tissue donation – that is, people donating their organs or their tissues after death?

Note: Previous question wording was "Have you ever heard anything about the topic of organ and tissue donation; that is, people donating their body, organs or tissues at the time of their death?"

Where have heard about organ and tissue donation

August - September 2005

Television	45
Newspaper	30
Driver's licence/application	15
Magazines	15
Family and friends	13
Radio	9
Doctor's office	7
Internet	4
Hospital	4
At work	3
Other	19
Nowhere	5
dk/na	3

Q.15

Where have you seen, heard or read about organ and tissue donation and transplantation?

Sources of information

The Internet is the most popular source of information about organ and tissue donation, followed by doctors or health professionals.

When Canadians are asked where they would go if they were looking for information about organ and tissue donation, five in ten (52%) mention Internet sources, followed by three in ten (30%) who would go to doctors or health professionals for information. Much smaller proportions mention hospitals (6%), the library (4%) and the provincial government (3%). A number of other possible sources are mentioned, each by two percent or fewer.

Younger Canadians and those with higher levels of education are more likely to mention the Internet, while older Canadians and those with lower levels of education are more likely to turn to doctors and health professionals. Also, Catholics and Protestants are less likely to use the Internet and more likely to seek out health professionals; the pattern is reversed among other religious groups and those who are unaffiliated. Those born outside Canada are also somewhat more likely to seek for information on the Internet.

Ontarians and British Columbians are somewhat more likely to use the Internet; Atlantic Canadians and Albertans are somewhat more inclined to seek out medical professionals.

Sources of information on organ and tissue donation

August - September 2005

Internet sources	52
Doctors/health professionals	30
Hospital	6
Library	4
Provincial government	3
Other	13
Nowhere	1
dk/na	7

Q.16

If you were looking for information about organ and tissue donation, where would you go?

APPROVAL OF ORGAN AND TISSUE DONATION

Approval of organ and tissue donation is almost unanimous among Canadians.

Almost all Canadians (96%) either strongly (71%) or somewhat (25%) approve of organ and tissue donation; four percent express disapproval. While there has been little change in overall approval since the 2001 survey, strong approval, which had declined in the 2002 survey, is now four points higher than in 2001.

Strong approval is slightly higher among women, those who are or have been married, and Canadians with higher levels of education or income.

While overall approval is high among all demographic groups, approval is more tentative among those whose ethnic background is either non-European or European other than French or English, those born outside Canada, and those whose religious affiliation is Protestant or non-Christian.

Strong approval is higher in Quebec than in other provinces; residents of Manitoba, Saskatchewan and Ontario are least likely to offer strong approval.

Those who have signed a donor card or placed their name on a donor registry (91%), or have decided to be organ (92%) or tissue (94%) donors are much more likely to express strong approval for organ and tissue donation than those who have not signed a card or registered (46%), and those who are undecided or who have decided not to make an organ or tissue donation. However, the undecided and those who have not signed a card are not in general opposed to donation but rather are tentative in their approval. Of those who have made a decision not to donate organs or tissues, three in ten say they disapprove of organ and tissue donation.

Approval of organ and tissue donation

	OCT. 2001	MAY 2002	AUG.-SEPT. 2005
Strongly approve	67	63	71
Somewhat approve	29	30	25
Somewhat disapprove	2	3	2
Strongly disapprove	1	2	2

Q.2

How do you feel about organ and tissue donation – that is, people donating their organs or their tissues after death? Do you ...?

Note: Previous question wording was “Do you strongly approve, somewhat approve, somewhat disapprove or strongly disapprove of organ and tissue donation? (That is, people donating their body, their organs or their tissues at the time of their death.)”

DECISION TO DONATE ORGANS OR TISSUES

Signing a donor card or registering as a donor

More than one-half of Canadians say they have signed an organ donor card or registered as an organ donor, and almost two in ten are registered with a donor registry. One-third of Canadians say they are aware of an organ donor registry in their province.

More than one-half of Canadians (54%) say that they have signed an organ donor card and almost two in ten (17%) say they are registered with an organ donor registry. Further analysis indicates that the total proportion of those who have signed a donor card or registered is 54 percent, indicating that the vast majority of those who have placed their name in a registry have also signed a donor card of some kind. A total of 44 percent have not signed an organ donor card or registered as an organ donor.

In October 2001, 45 percent of Canadians said they had signed some form of card or registered as a donor; this proportion declined slightly in May 2002. Since 2002, the proportion of those who have signed or registered has increased by 14 points, and is now nine points higher than the proportion found in the 2001 baseline survey.

Women, especially working women, those aged 25 to 54 years, those who are or have been married, those with higher levels of education and income, and those whose ethnic background is French are more likely to have signed a donor card. Incidence is lower among those aged 65 years or more, those whose ethnic background is either non-European or European other than French or British, those born outside Canada, and those whose religious affiliation is neither Catholic nor Protestant. Men, those aged 35 to 44 and those born in Canada are more likely to have placed their name in an organ donor registry.

Signed organ donor card

	OCT. 2001*	MAY 2002	AUG.-SEPT. 2005
Yes	45	40	54
No	54	59	44

* Question wording slightly different

Q.3

Have you signed an organ donor card that gives permission for your organs or your tissues to be donated after death?

Note: In May 2002, question wording was "Have you signed an organ donor card or registered with an organ donor registry to give permission for your body, organs or tissues to be donated at the time of your death?"

Registered with organ or tissue registry

	OCT. 2001*	MAY 2002	AUG.-SEPT. 2005
Yes	45	40	54
No	54	59	44

* Question wording slightly different

Q.5

Have you put your name on a registry that gives permission for your organs or tissues to be used after death?

Note: In May 2002, question wording was "Have you signed an organ donor card or registered with an organ donor registry to give permission for your body, organs or tissues to be donated at the time of your death?"

Quebecers (63%) are most likely to say they have signed a donor card, followed by Manitobans (58%). Those living in Alberta (49%) and British Columbia (48%) are the least likely to say they have signed a donor card. The proportions saying they have placed their names in a donor registry are much higher in British Columbia and Atlantic Canada than in other regions.

Nine in ten of those who have made a decision to donate either their organs or tissues have signed a donor card. It is interesting to note that small proportions of those who have decided not to donate their organs or tissues, and those who are undecided also say that they have signed an organ donor card. About three in ten each of those who have made a decision to donate their organs or tissues say they have placed their name in a donor registry.

Overall, one-third (35%) of Canadians say they are aware of an organ or tissue registry in their province. Awareness is highest in British Columbia (48%), Atlantic Canada (40%) and Ontario (38%); this is not an unexpected finding, as the three provinces of Canada where provincial organ donor registries currently exist are British Columbia, Nova Scotia and Ontario. Older Canadians, those with higher levels of education, and those who are or have been married are more likely to be aware of a registry in their province.

Interestingly, those who have not signed a donor card or registered, and those who have decided not to donate their organs or tissues are more likely to say they are aware of a donor registry in their province.

Awareness of organ or tissue registry August - September 2005

Yes	35
No	64

Q.4

Are you aware of an organ or tissue registry in your province?

Deciding to donate

More than five in ten Canadians have decided to be organ donors and four in ten have decided to be tissue donors. In both instances, about one in ten have decided not to be donors.

In addition to asking whether they had signed an organ donor card, respondents were asked about their personal decision to donate – whether they had decided to donate, not donate, or had not decided, both their organs and their tissues.

The survey shows that, while there is a significant overlap between having signed a card and a personal decision to donate (91% of “signees” have made a decision to donate their organs and 64% have made a decision to donate their tissues), the vast majority of those who have not signed a card have not made a personal decision against donation but are, in fact, undecided about it. Of those who have not signed a card, 71 percent have not made a personal decision about organ donation and 74 percent have not made a decision about tissue donation; 12 percent and eight percent, respectively, say they have, in fact, decided to donate.

Overall, more than five in ten Canadians (55%) say that they have decided to donate their organs; fewer than four in ten (37%) say that they have not made a decision; approximately one in ten (8%) say that they have specifically decided not to be organ donors. Four in ten (39%) have decided to donate their tissues; five in ten (51%) are undecided and one in ten (8%) have decided not to donate their tissues.

Between the 2001 and 2002 surveys, there was no significant change in the proportions of decided donors or organs and tissues, decided non-donors, and the undecided. In 2005, the proportion of those who have decided to donate their organs is higher, while the proportion of those who have decided to donate their tissues is somewhat lower, than the combined proportion found in 2002. The proportions of decided non-donors of both organs and tissues are similar to the proportion of decided non-donors found in 2002.

Decision about organ/tissue donation

August - September 2005

	ORGANS	TISSUES
Decided to donate	55	39
Decided not to donate	8	8
Not made a decision	37	51

Q.6

Which of the following statements best describes your own situation ... You have decided to donate your organs at the time of your death ... You have decided not to donate your organs at the time of your death ... You have not made a decision about this?

Q.7

Which of the following statements best describes your own situation ... You have decided to donate your tissues at the time of your death ... You have decided not to donate your tissues at the time of your death ... You have not made a decision about this?

Women, especially working women, those aged 25 to 44 years, those who are or have been married, those with higher levels of education and income, those whose ethnic background is French, Catholics, those with no religious affiliation and those born in Canada are more likely to have decided to be organ or tissue donors. Those aged 18 to 24 years, those with lower levels of education and income, those whose religious affiliation is Protestant or non-Christian, those whose ethnic background is either non-European or European other than French or British, and those born outside Canada are more likely to be undecided. Those aged 65 years or more, those whose ethnic background is non-European, those born outside Canada and those whose religious affiliation is non-Christian are more likely to have decided not to donate.

Quebecers are more inclined to have made a decision to become organ donors and tissue donors; residents of Saskatchewan and British Columbia are more likely to say that they are undecided about being organ donors or tissue donors.

Canadians who have decided not to donate their organs or tissues and those who are undecided were asked the main reason for their decision, or lack of a decision.

When Canadians who have decided not to be organ or tissue donors – eight percent of the public – are asked why they have made this decision, their reasons include: having a medical condition (19%), religious/spiritual beliefs (11%), personal preference/belief (10%), being too old (8%), wanting to keep body/organs/tissues intact (8%), lack of knowledge about organ and tissue donation (5%), “never thought about it” (4%), belief that the procedure will be abused (3%) or lack of trust in doctors/system (3%). Two percent or fewer each mention such issues as fear, wanting to decide specifically what one’s organs will be used for, being a smoker, and previous negative experience with a transplant. Twenty-two percent offer no response.

Similar reasons for deciding not to donate organs were offered in 2001; as in the current survey, the most frequently mentioned reasons involved personal health circumstances, religious beliefs, age, a desire for the body to remain intact and personal preference.

Concerns over personal suitability as an organ or tissue donor, such as medical conditions or being too old, are somewhat higher among older Canadians.

When asked if there are any other reasons for their decision, most decided non-donors either offer no response (85%). Secondary reasons given by decided non-donors include: wanting to keep body/organs/tissues intact (3%), wanting to decide specifically what one’s organs will be used for (3%), and lack of knowledge about organ and tissue donation (2%). Eight percent mention other reasons.

Reasons for not wanting to donate organs/tissues August - September 2005

	FIRST MENTION	OTHER MENTIONS
Have a medical condition, can't donate	19	1
Religious/spiritual beliefs	11	1
Personal preference/beliefs/just don't want to	10	1
Age/I'm too old	8	*
Want to keep my organs/tissue/body intact	8	3
Don't know enough about it	5	2
Never thought about it	4	1
Believe the procedure will be abused	3	–
Don't trust doctors/system	3	1
Fear	2	–
Want to decide specifically what organs are used for	2	3
I smoke cigarettes/I'm a smoker	2	–
Previous negative experience with transplant	2	–
Other	3	3
dk/na	22	85

* Less than one percent

Q.9a

What is the main reason that you have decided not to donate your organs or tissues upon your death?

Subsample: Those who have decided not to donate their organs/tissues

Q.9b

Are there any other reasons?

Subsample: Those who have decided not to donate their organs/tissues

For Canadians who are undecided about either organ or tissue donation – 54 percent of the public – the largest numbers (24%) say that they haven't thought about it or they don't know enough about it (16%). Other reasons mentioned include: put it off/don't like to think about it (6%), medical condition/health (5%), too old (4%) and trying to make a decision (3%). Two percent or fewer each mention a variety of reasons such as too young to think about it, don't know how to register, it hasn't come up and don't plan on dying soon. Twenty-four percent offer no response.

Similar responses were offered in 2001; as in the current survey, the most frequent reasons mentioned involved lack of thought about the issue, lack of information, age, and medical or health reasons.

Men, those under 55 years of age, and those who have never been married are more likely to say that they haven't thought about it. Women and those with no religious affiliation are more likely to say they don't know enough about it. Those aged 65 years or more are notably more inclined to mention reasons such as being too old or having a medical condition.

Ontarians are more likely to say that they haven't thought about it; British Columbians are more inclined to say they don't know enough. Quebecers are least likely to say they haven't thought about it, and more inclined to offer no response to the question.

Reasons why undecided about donating organs/tissues

August - September 2005

Haven't thought about it/never occurred to me	24
Don't know enough about it/unaware of it	16
Put it off/don't like to think about it	6
Have a medical condition, can't donate/health reasons	5
Age/I'm too old to donate	4
Still trying to decide/hard choice	3
Other	24
dk/na	24

Q.10

What is the main reason you have not made a decision about {organ/tissue/organ and tissue} donation?

Subsample: Those who have not made a decision regarding organ/tissue donation

Discussing the decision

Most Canadians have discussed their decision with the person who will be their medical advocate in an emergency.

Among those Canadians who have made a decision, either to donate or not to donate organs or tissues, three-quarters (74%) have discussed their decision with the person who would act on their behalf in a medical emergency. One-quarter (25%) have not discussed their decision with their chosen medical advocate. Eight in ten each of those who have decided to donate, either their organs or their tissues, say they have discussed this, as have 80 percent of those who have signed a card or registered as donors.

These numbers are somewhat lower than those found in the 2001 and 2002 surveys, when the question referred to close family members rather than to the person who would act as an advocate in a medical emergency. The difference in responses may have been influenced by the greater specificity of the question in the current survey.

Women, those aged 25 to 64, those who are married, those with higher levels of education and income, Protestants and those born in Canada are slightly more inclined to say that they have informed their chosen medical advocate of their decision. Those who have never married, those whose ethnic background is French, European other than French or British, or non-European, and those whose religious affiliation is neither Catholic nor Protestant are somewhat more likely not to have told their chosen medical advocate.

Atlantic Canadians and Ontarians are more likely to have discussed their decision; Quebecers are least likely to have done so.

Discussed decision with person who would act on your behalf in medical emergency

August - September 2005

Yes	74
No	25

Q.8

Have you discussed this decision with the person who would act on your behalf in the event of a medical emergency?

Subsample: Those who have made a decision regarding organ/tissue donation

Specific reasons for making donation

Almost all Canadians think saving the life of a person who needs an organ transplant, improving the quality of life of someone who needs an organ transplant and helping many people who need transplants are important reasons for being a donor. Most think that the need for organ donors in Canada, donating because it is the right thing to do, contributing to scientific research into preventions and cures, and no longer needing your organs after death are important reasons for being a donor.

All survey respondents were given a number of reasons why a person might become an organ donor. For each reason, they were asked to indicate how important a factor it would be for them personally in deciding whether they might become an organ donor, using a seven-point scale where one means not at all important and seven means extremely important. In the following analysis, responses of seven, six and five are grouped together (“important”) as are responses of one, two and three (“not important”).

Canadians give the most importance to those reasons that refer directly to the humanitarian uses of organ and tissue donations. Majorities of about nine in ten each say that “You would be saving the life of a person who needs an organ transplant” (92%), “You would be improving the quality of life of someone who needs an organ transplant” rate it five or higher (91%), and “Your organs and tissues could help many people who need transplants” (89%) are important reasons to become an organ donor.

Three-quarters or more each say that “Because more organ donations are needed in this country today” (85%), “You believe that donating is the right thing to do” (82%), “Because scientific research using your organ and tissue donation could lead to treatments and cures for diseases” (79%), and “Because you do not need your organs or tissues after death” (78%), are important reasons to donate.

Importance of reasons for making donation

	IMPORTANT		NEUTRAL		NOT IMPORTANT	
	Oct. 2001	AUG.-SEPT. 2005	Oct. 2001	AUG.-SEPT. 2005	Oct. 2001	AUG.-SEPT. 2005
That you would be saving the life of a person who needs an organ or tissue transplant	94	92	3	4	2	3
That you would be improving the quality of life of person who needs an organ or tissue transplant	93	91	5	5	2	4
Because your organs and tissues could help many people who need transplants ¹	88	89	7	6	4	4
Because more organ donations are needed in this country today	81	85	12	9	6	5
Because you believe that donating is the right thing to do	84	82	11	11	6	6
Because scientific research using your organ and tissue donation could lead to treatments and cures for diseases	82	79	11	12	7	8
Because you do not need your organs or tissues after death	75	78	10	10	13	10
If your loved ones would feel comforted by your donation	62	56	18	21	19	20
If you were able to indicate that you want only specific organs or tissues donated	53	51	17	19	29	29
If people would remember you as a good and caring person for making this donation	30	33	21	22	47	44

Q.12

Here are some reasons why a person might donate their organs or tissues after death. Using a seven-point scale, where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally ...?

¹ Previous question wording was “Because your organs and tissues could help as many as 11 people who need transplants.”

Between five and six in ten think that “If your loved ones would feel comforted by your donation” (56%), and “If you were able to indicate that you want only specific organs or tissues donated” (51%) are important reasons to donate, and one-third think that “If people would remember you as a good and caring person for making this donation” (33%) are important in deciding to be a donor.

There has been little change since the October 2001 survey in the proportions who say that these reasons are important reasons to donate; however, there has been an increase of four points in the proportion who say “Because more organ donations are needed in this country today,” and a decrease of six points in the proportion who say that feeling that loved ones are comforted by the donation is important.

Women give higher importance to most of these reasons than do men; the exceptions to this are feeling that loved ones are comforted by the donation, being able to indicate which organs would be donated, and being remembered as a caring and good person.

Younger Canadians tend to place higher importance on saving the life of someone who needs a transplant and scientific research leading to treatments and cures; they place less importance on donating because it’s the right thing to do, the need for more donations in Canada and not needing organs after death. Those aged 35 to 64 years place greater importance on donating because it’s the right thing to do, but those aged 35 to 54 years place less importance on being remembered as a good and caring person. Those aged 65 years or more place less importance on saving the life of someone who needs a transplant, improving the quality of life of a transplant recipient, helping many people needing transplants and donating because it’s the right thing to do; they are more likely to think that being remembered as a good and caring person is important.

Canadians with an ethnic background that is European other than British or French place higher than average importance being able to indicate which organs would be donated; they assign lower importance to donating because it’s the right thing to do, being able to help many people, research leading to treatments and cures, and not needing organs after death. Canadians with a non-European ethnic background place lower impor-

tance than most on many of these reasons; however, they do assign higher importance to being able to indicate which organs would be donated. Canadians whose ethnic background is French tend to place higher than average importance on most of these reasons; however, they place lower than average importance on being able to indicate which organs would be donated.

Canadians born outside of Canada are less influenced by most of these reasons, the exceptions being research leading to treatments and cures, and saving the life of someone who needs a transplant.

Catholics give a higher than average importance to most of these reasons. Protestants are more likely to place importance on the need for more donations, and are less likely to place importance on research leading to treatments and cures. Canadians of other religious affiliations place lower importance on almost all of these reasons. Those with no religious affiliation are more likely to place importance on improving the quality of life of a transplant recipient; they are less likely to see feeling that loved ones are comforted by the donation, being able to indicate which organs would be donated, and being remembered as a good and caring person is important, and donating because it’s the right thing to do.

Quebecers assign a higher importance to many of these reasons; however, they are less inclined to see being able to indicate which organs would be donated as important. Ontarians place lower than average importance on the need for more organ donations in Canada, being remembered as a caring and good person, research leading to treatments and cures, and being able to help many people. Atlantic Canadians place a higher than average importance on most of these reasons for donation, with the exception of saving the life of the transplant recipient, not needing one’s organs after death and donating because it’s the right thing to do. Residents of the prairie provinces, and Saskatchewan in particular, tend to be less influenced by most of these reasons. British Columbians are less likely to think improving the quality of life of a transplant recipient, the need for more donations in Canada, being able to indicate which organs would be donated, being remembered as a caring and good person, feeling that loved ones are comforted by the donation and donating because it’s the right thing to do are important reasons.

For most of these reasons, those who have signed an organ donor card (or registered with a donor registry) provide consistently higher assessments than do those who have not signed a donor card. As well, those who have decided to be organ donors or tissue donors give greater importance to these reasons than do those who have decided not to donate. It is important to note that while, in assessing most of these reasons, the undecided (both in terms of organ and tissue donation) are not as likely as decided organ or tissue donors to say that they are important, they are more likely than decided non-donors to find these reasons important.

However, for two of these reasons – being able to indicate which organs would be donated, and being remembered as a caring and good person – there is little difference in the assessments given by those who have signed donor cards/registered and those who have not. Further, there is little difference in the responses of those who have decided to donate their organs or tissues, and those who are undecided on the issue of being remembered as a caring and good person; in the case of being able to indicate which organs would be donated, the undecided are more likely than decided organ or tissue donors to see this as important. In both these instances, those who have decided not to donate, either organs or tissues, are least likely to find these reasons important.

Specific reasons for not making donation

Canadians generally place low importance on a number of reasons not to become a donor.

All survey respondents were given a number of reasons why a person might not donate their body, organs or tissues at the time of their death. For each reason, they were asked to indicate how important a factor it would be for them personally as a reason why they might not donate, using a seven-point scale where one means not at all important and seven means extremely important. In the following analysis, responses of seven, six and five are grouped together (“important”) as are responses of one, two and three (“not important”).

Canadians give the most importance to “Because some people who receive organ transplants may not really deserve to receive them, since they have abused their own health through behaviours such as smoking, obesity, drug or alcohol use” (20%), and “Because you think that donating your organs or tissues would make your death a more difficult experience for your loved ones” (19%). However, while two in ten think each of these are important factors for them personally as a reason why they might not become donors, about in five ten each say these are not at all important reasons.

Just under two in ten each think that “Because death is too disturbing to think about” (16%), and “Because donation might delay or complicate the burial arrangements for your family” (16%) are important reasons. About one-half or more each see these reasons as not at all important.

Just over one in ten each say “Because you don’t believe in organ and tissue donation” (14%), “Because your family members’ religious or spiritual beliefs do not support organ and tissue donation” (14%), “Because your family members’ cultural beliefs and values do not support organ and tissue donation” (14%), “Because your religious or spiritual beliefs do not support organ and tissue donation” (13%), “Because your cultural beliefs and values do not support organ and tissue donation” (13%), and “Because you believe the procedures used to remove organs and tissues are too intrusive on the donor’s body” (12%) are important reasons. Six in ten or more say that these reasons are not at all important.

There have been no significant changes since 2001 in the proportions of Canadians who find these reasons important. Further, among those who are undecided as to whether to donate either their organs or their tissues, the proportions of those who find these reasons important are similar to the proportions found in 2001 among those who were undecided about becoming an organ or tissue donor.

Men place somewhat higher importance on personal cultural values that do not support donation and concern over undeserving recipients as reasons in deciding not to donate.

Younger Canadians tend to assign higher than average importance to many of these reasons, including concern over undeserving recipients, concern that dona-

tion might delay or complicate burial arrangements, concern that donation would make death more difficult for family, personal cultural values that do not support donation, and family members' religious and spiritual beliefs. Canadians aged 35 to 64 years place lower than average importance on family members' religious and spiritual beliefs. Canadians aged 65 years or more give higher assessments of importance to the concern that retrieval procedures are too intrusive, lack of belief in organ donation, family members' religious and spiritual beliefs, and family members' cultural values.

Canadians with an ethnic background that is European other than British or French tend to place greater than average importance on concern over deserving recipients and difficulty for loved ones, while Canadians with non-European ethnic backgrounds tend to

Importance of reasons for not making donation

	IMPORTANT		NEUTRAL		NOT IMPORTANT	
	OCT. 2001	AUG.-SEPT. 2005	OCT. 2001	AUG.-SEPT. 2005	OCT. 2001	AUG.-SEPT. 2005
Because some people who receive organ transplants may not really deserve to receive them, since they have abused their own health through behaviours such as smoking, obesity, drug or alcohol use ¹	22	20	15	15	62	64
Because you think that donating your organs or tissues would make your death a more difficult experience for your loved ones	20	19	20	19	59	61
Because donation might delay or complicate the burial arrangements for your family	16	16	15	15	68	69
Because death is too disturbing to think about	18	16	14	13	66	71
Because your family members' cultural beliefs and values do not support organ and tissue donation	–	14	–	11	–	75
Because you don't believe in organ and tissue donation ²	14	14	10	10	74	74
Because your family members' religious or spiritual beliefs do not support organ and tissue donation	–	14	–	10	–	75
Because your cultural beliefs and values do not support organ and tissue donation	–	13	–	10	–	77
Because your religious or spiritual beliefs do not support organ and tissue donation ³	12	13	8	9	77	77
Because you believe the procedures used to remove organs and tissues are too intrusive on the donor's body	13	12	12	13	72	73

Q.13

Here are some reasons why a person might not donate their organs or tissues after death. Using a seven-point scale, where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important a factor would each of the following be for you personally as a reason why you might not donate ...?

¹ Previous question wording was "Because some people who receive organ transplants may not really deserve to receive them, since they have abused their own health through behaviours such as drug or alcohol use."

² Previous question wording was "Because you don't believe that donating is the right thing to do."

³ Previous question wording was "Because your religious views do not support organ and tissue donation."

place greater importance on all of these reasons not to donate. Canadians whose ethnic background is French place less importance on concerns over undeserving recipients, concern that donation would make death more difficult for family, lack of belief in organ donation, concern that donation might delay or complicate burial arrangements, and family members' spiritual and religious beliefs. Canadians born outside of Canada see concern over undeserving recipients, concern that donation would make death more difficult for family, lack of belief in organ donation, personal religious beliefs and family members' cultural values as more important than do those born in Canada.

Catholics place greater than average importance on the idea that death is too disturbing to think about, and less than average importance on concern over undeserving recipients. Protestants give a higher assessment to concerns that donation would make death more difficult for family. Canadians of other religious affiliations place greater than average importance on most of the reasons examined. Those without a religious affiliation give less than average importance to the idea that death is too disturbing to think about and family members' cultural values.

Quebecers assign lower than average importance to concern over undeserving recipients, concerns that donation would make death more difficult for family, concern that donation might delay or complicate burial arrangements, and personal religious beliefs that do not support donation, and higher importance to the idea that death is too disturbing to think about. Atlantic Canadians place greater than average importance on most of these reasons, with the exception of concern over undeserving recipients, the idea that death is too disturbing to think about and family cultural values. Ontarians assign greater than average importance to family members' spiritual and religious beliefs, and to

family members' cultural values. Albertans place higher than average importance on concern over undeserving recipients. Residents of Saskatchewan place higher importance on concern that donation would make death more difficult for the family and the idea that death is too disturbing to think about. Manitobans give more importance to concern that donation might delay or complicate burial arrangements, concerns that donation would make death more difficult for family, personal religious beliefs that do not support donation, and family members' spiritual and religious beliefs. British Columbians place lower importance on most of these reasons, with the exception of concern over undeserving recipients and concern that donation would make death more difficult for the family.

Canadians who have not signed an organ donor card (or placed their name in a donor registry) place greater importance on all of these reasons not to donate than do those who have signed a donor card.

Canadians who have decided not to donate their organs or tissues place greater importance on all of these reasons than do those who are undecided, or those who have decided to donate their organs or their tissues after death. Canadians who have decided to donate their organs or their tissues generally place lower importance on all of these reasons. With respect to four of these reasons – concern that donation would make death more difficult for the family, concern over undeserving recipients of donated organs, concern that donation might delay or complicate burial arrangements, and the idea that death is too disturbing to think about – those who are undecided about donating their organs provide higher assessments of importance, suggesting that these reasons resonate most strongly with this particular group. Those who are undecided about donating their tissues place greater importance on the sense that death is too disturbing to think about.

BELIEFS AND PERCEPTIONS

Awareness of need for donations

The vast majority of Canadians are aware that there is a great need for more organ and tissue donations in Canada.

Eight in ten Canadians (80%) agree that there is a great need for more organ and tissue donations in Canada, while 13 percent say that there is some need. Two percent think there is little or no need, and five percent offer no response.

The proportion of Canadians who are aware of the need for more organ and tissue donations is essentially unchanged from the proportions found in 2001 and 2002.

While awareness is high in most regions and demographic groups, women, those with higher levels of income, Catholics and those born in Canada are more likely to be aware of the great need for donations. Those aged 18 to 24 years, those who have never married, those with lower levels of education, those whose religious affiliation is neither Catholic nor Protestant, and those whose ethnic background is non-European or European other than French or English are less inclined to agree that there is great need. Residents of Quebec are most likely to agree that there is great need for more organ and tissue donations; residents of Ontario and Saskatchewan are least likely to agree.

Those who have signed an organ donor card or registered as a donor (89%) are more likely than those who have not (68%) to know that there is a great need for organ and tissue donations. As well, those who have decided to donate their organs (90%) or tissues (92%) are more likely than those who are undecided (69% and 74%, respectively) or those who have decided not to donate (57% each) to agree that there is great need.

Awareness of need for donations

	OCT. 2001	MAY 2002	AUG.-SEPT. 2005
A great need	82	80	80
Some need	14	14	13
Little need	1	*	1
No need at all	*	1	1
dk/na	3	4	5

* Less than one percent

Q.11

As far as you know is there ... for more organ and tissue donations in this country?

Note: In May 2002, question wording was "As far as you know, thinking of the number of organ donations available and the number of organs needed for organ transplants in this country, is there ... for more organ donations?"

Perceptions

Most Canadians believe that doctors are committed to providing high quality care to dying patients, and that anyone at any age can become an organ and tissue donor. Opinion is divided on the belief that rich people who need organ transplants are more likely to receive them. Most Canadians reject the beliefs that the donation process could exploit members of minority groups and that doctors may declare death prematurely in order to get donations.

Respondents were read five statements about organ and tissue donation and asked to indicate whether they believed each statement to be definitely true, probably true, probably not true or definitely not true.

In reviewing the findings, it seems that Canadians have some doubts with various aspects of the organ and tissue donation process. While the vast majority of Canadians believe that medical practitioners are committed to providing high quality care to the dying, two in ten still think *that doctors may declare death prematurely in order*

to get donations. Further, about one-half of Canadians think that the rich have greater access to transplants than the poor, and two in ten fear that the process could be exploitative of minority groups.

Nine in ten Canadians (90%) say that “Doctors are committed to providing high quality care to dying patients and their families” is definitely (56%) or probably (34%) true; eight percent believe that this statement is definitely or probably not true.

Those aged 65 or older, Catholics, those whose ethnic background is British or French, and Atlantic Canadians are more inclined to say that this statement is definitely true, as are those who have signed organ donor cards/registered, and those who have decided to donate their organs or tissues. Those whose ethnic background is non-European, those without a religious affiliation, those born outside of Canada, and residents of Alberta and B.C. are less inclined to say it is definitely true.

Truth of statements about organ and tissue donation

	DEFINITELY TRUE			PROBABLY TRUE			PROBABLY NOT TRUE			DEFINITELY NOT TRUE			DK/NA		
	O 01	M 02	A-S 05	O 01	M 02	A-S 05	O 01	M 02	A-S 05	O 01	M 02	A-S 05	O 01	M 02	A-S 05
Doctors are committed to providing high quality care to dying patients and their families	–	–	56	–	–	34	–	–	6	–	–	2	–	–	1
Anyone at any age can become an organ and tissue donor	40	40	45	30	30	30	15	15	13	10	10	8	5	5	4
Rich people who need organ and tissue transplants are more likely to receive them in this country's hospitals than are poorer people who need transplants	15	17	17	29	29	30	30	31	28	21	19	20	5	5	4
Doctors may prematurely declare a person to be dead in order to get potential organ and tissue donations.	6	5	7	13	14	13	30	34	35	47	42	43	5	6	3
The organ and tissue donation process could exploit people of colour, First Nations people, or other minority groups	–	–	6	–	–	14	–	–	36	–	–	41	–	–	3

Q.14

Please tell me if you think each of the following statements is definitely true, probably true, probably not true or is definitely not true ...

Three-quarters of Canadians (75%) say that the statement “Anyone at any age can become an organ and tissue donor” is definitely (45%) or probably (30%) true. Two in ten (21%) say that it is definitely (8%) or probably (13%) not true. There has been an increase of five points since 2002 among those who say that this statement is definitely true.

Those aged 25 to 54 years, those whose ethnic background is French, Catholics, those born in Canada and Quebecers are more inclined to say that this statement is definitely true, as are those who have signed organ donor cards/registered, and those who have decided to donate their organs or tissues. Those aged 18 to 24 years, those who have never married, those whose ethnic background is European other than British or French or non-European, Protestants, and residents of Atlantic Canada and British Columbia are less inclined to say it is definitely true.

Opinion is divided on the belief that “Rich people who need organ transplants are more likely to receive them in this country’s hospitals than are poorer people who need organ transplants.” One-half of Canadians (48%) believe that the statement is definitely (20%) or probably (28%) not true, and an equivalent number (47%) say it is definitely (17%) or probably (30%) true. The proportion who say this is true is up a total of three points from 2001.

Those whose ethnic background is British or French, Protestants, Catholics and residents of Manitoba are more inclined to say this is definitely not true, as are those who have signed organ donor cards/registered, and those who have decided to donate their organs or tissues. Those with lower levels of education and income, those whose ethnic background is non-European, those whose religious affiliation is neither Catholic nor Protestant, those born outside Canada and Quebecers are more inclined to say it is definitely true.

Almost eight in ten Canadians (77%) believe that “The organ and tissue donation process could exploit people of colour, First Nations people or other minority groups” is definitely (41%) or probably (36%) not true. Two in ten (20%) say it is definitely (6%) or probably (14%) true.

Those who are married, those whose ethnic background is French, Catholics, those whose religious affiliation is neither Catholic nor Protestant, and Quebecers are more inclined to say this statement is definitely not true, as are those who have signed organ donor cards/registered, and those who have decided to donate their organs or tissues. Those aged 65 years or more, those whose ethnic background is non-European or Aboriginal, and those born outside Canada are less inclined to reject it.

Eight in ten Canadians (78%) believe that “Doctors may prematurely declare a person to be dead in order to get potential organ and tissue donations” is definitely (43%) or probably (35%) not true. However, two in ten (20%) say it is definitely (7%) or probably (13%) true. There has been no significant change in these findings since 2001 or 2002.

Those aged 35 or older, those with higher levels of education and income, married people, those whose ethnic background is British or French, Catholics and Quebecers are more inclined to say this belief is definitely not true, as are those who have signed organ donor cards/registered, and those who have decided to donate their organs or tissues. Those aged 18 to 24 years, those with the lowest levels of education and income, those whose ethnic backgrounds is European other than British or French or non-European, those whose religious affiliation is neither Catholic nor Protestant, those born outside Canada, and residents of Saskatchewan and Atlantic Canada are more inclined to think this is true.

FAMILY AND LEGAL ISSUES

Discussion with family members

Six in ten Canadians have discussed organ and tissue donation with close family members. Nine in ten are confident that their intentions will be respected.

When Canadians are asked whether they have discussed the topic of organ and tissue donation with close family members, six in ten (58%) say they have done so, while four in ten (41%) say that they have not.

There has been no significant change since October 2001 or May 2002 in the response to this question.

Women, especially working women, those aged 35 to 54 years, married, those with higher levels of education and income, those whose ethnic background is British or French, and residents of Manitoba and Quebec are more likely to have discussed the topic with close family members. Those aged 18 to 24 years or 65 years or more, those with lower levels of education and income, those who have never been married, those whose ethnic background is non-European, those whose religious affiliation is neither Catholic nor Protestant, and residents of Saskatchewan are less likely to have done so.

Those who have signed an organ donor card/registered (79%), and those who have decided to be organ or tissue donors (82% each) are significantly more likely than those who have not to say that they have discussed donation with close family members. Those who are undecided about being organ or tissue donors (50% and 54%, respectively) are less likely than others to have discussed the topic with close family members.

Nine in ten Canadians (91%) are very (64%) or somewhat (27%) confident that their views and intentions with regard to organ and tissue donation after death will be respected. One in ten are not very (4%) or not at all (4%) confident.

Discussion with family members

	OCT. 2001	MAY 2002	AUG.-SEPT. 2005
Yes	57	57	58
No	42	43	41

Q.17

Have you discussed the topic of organ and tissue donation with your close family members, either your views and intentions or their views and intentions?

Confidence that intentions will be respected August - September 2005

Very confident	64
Somewhat confident	27
Not very confident	4
Not at all confident	4
dk/na	2

Q.18

How confident are you that your views and intentions with regard to organ and tissue donation after death will be respected? Are you ...?

Strongly expressed confidence is higher among women, those whose ethnic background is British, Protestants, and residents of Atlantic Canada, Manitoba and Alberta. It is lower among those with the lowest levels of education and income, those whose ethnic background is non-European, those whose religious affiliation is neither Catholic nor Protestant, those born outside Canada and Quebecers.

Among those who have signed a donor card (or registered as a donor) and among those who have made a decision about organ donation (both donors and non-donors), between two-thirds and three-quarters are very confident that their wishes and intentions will be respected; decided donors are slightly more likely to express confidence than decided non-donors. About half of the undecided express strong confidence that their intentions will be respected.

Legal precedence: wishes of deceased or family?

In the case of organ and tissue donation, majorities of Canadians believe that the wishes of the deceased do take precedence, and should take precedence, over the wishes of the family.

When asked which takes legal precedence – the wishes of the deceased who has signed the donor card, or the wishes of the family or next of kin who oppose the organ donation – in a situation where a deceased person had signed an organ donor card but his or her family does not wish any organ donation to take place, a majority of Canadians believe the wishes of the deceased take precedence. More than six in ten (64%) believe that the wishes of the deceased do take precedence, while three in ten (29%) are aware that the wishes of the family or next of kin take precedence. Seven percent offer no response to this question.

Legal precedence: wishes of deceased or family – what does happen

	OCT. 2001	MAY 2002	AUG.-SEPT. 2005
The wishes of the deceased person who has signed the donor card or registered with an organ and tissue donation registry are followed	68	66	64
The wishes of the family or next of kin who oppose the organ donation are followed	23	26	29
dk/na	8	8	7

* Less than one percent

Q.19

What do you think happens in a situation where someone has signed an organ donor card or registered with an organ and tissue donation registry but his or her family does not wish any organ donation to take place ...?

Note: In May 2002 question wording was “What happens in a situation where someone has signed an organ donor card but his or her family does not wish any organ donation to take place? As far as you know, which actually takes legal precedence ...?”

When asked which should take precedence in such a situation, the wishes of the deceased or the wishes of the family or next of kin, nine in ten (89%) say that the wishes of the deceased should take legal precedence, while one in ten (9%) feel that the family's wishes should take precedence.

There has been a decline of a total of four points since 2001 in the proportion who believe that the wishes of the deceased take precedence, and a corresponding increase of a total of six points in the proportion who know that the family's wishes are observed. At the same time, the proportion of those who believe that the deceased's wishes should take legal precedence is essentially unchanged.

Men, those with lower levels of education and income, Catholics and Quebecers are more likely than others to believe that the wishes of the deceased currently take legal precedence in such situations.

Women, especially working women, those aged 35 to 54, those with higher levels of education and income, those whose ethnic background is British, and residents of Manitoba and Alberta, are more likely to be aware that the wishes of family or next of kin currently take legal precedence.

Those who have signed a donor card/registered (31%), and those who have decided to be organ donors (31%) or tissue donors (32%) are more likely than others to know that the wishes of the next of kin take legal precedence, but even among these groups, six in ten each believe that the wishes of the deceased would be honoured in such a situation.

Legal precedence: wishes of deceased or family – what should happen

	OCT. 2001	MAY 2002	AUG.-SEPT. 2005
The wishes of the deceased person who has signed the donor card or registered with an organ and tissue donation registry are followed	90	90	89
The wishes of the family or next of kin who oppose the organ donation are followed	8	7	9
dk/na	2	2	2
* Less than one percent			

Q.20

In your opinion, what should happen ...?

Note: In May 2002 question wording was "In your opinion, which should take legal precedence ...?"

Across almost all demographic groups, large majorities of close to nine in ten believe that the wishes of the deceased should take legal precedence with respect to organ and tissue donation. Those with the lowest levels of education and income and those born outside Canada are slightly less likely to share this opinion, but even among these groups, about eight in ten each would give legal precedence to the wishes of the deceased.

Those who have signed organ donor cards/registered (93%), and those who have decided to be organ donors or tissue donors (93% each) are somewhat more likely than others to award legal precedence to the wishes of the deceased.

Consent for donation on behalf of deceased

The vast majority of Canadians are very likely to consent to an organ donation for a deceased loved one who had signed a donor card and had discussed donation with them; most are very likely to consent if their loved one had signed a donor card but had never discussed it with them, or had discussed donation but had not signed a donor card. Two in ten would be very likely to consent to an organ donation for a loved one if he or she had not signed a donor card or discussed donation.

Respondents were informed that close family members do, in fact, make the final decision about whether an organ donation will take place. They were then asked about whether they would consent to a donation for a loved one in four different situations.

The first situation explores the likelihood of consent to an organ donation for a deceased loved one who had signed an organ donor card and had discussed wanting

to donate with them. Nine in ten (88%) say it is very likely and a further one in ten (9%) say it is somewhat likely that they would consent to donation under these circumstances. Three percent say it is not very (1%) or not at all (2%) likely that they would do this.

When asked how likely they would be to consent to donation for a loved one who had signed an organ donor card but had never discussed this with them, seven in ten (71%) say it is very likely and two in ten (20%) say it is somewhat likely that they would give consent in this situation. Nine percent say it is not very (4%) or not at all (5%) likely that they would do this.

If a loved one had not signed a donor card but had discussed their desire to donate, six in ten (59%) are very likely and one-quarter (26%) are somewhat likely to give consent. Fourteen percent are not very (7%) or not at all (7%) likely to consent.

Consent for donation on behalf of deceased – signed card

	VERY LIKELY		SOMEWHAT LIKELY		NOT VERY LIKELY		NOT AT ALL LIKELY	
	OCT 2001	AUG-SEPT 2005	OCT 2001	AUG-SEPT 2005	OCT 2001	AUG-SEPT 2005	OCT 2001	AUG-SEPT 2005
If he or she had signed an organ donor card and had discussed with you that they wanted to donate	83	88	13	9	1	1	2	2
If he or she had signed an organ donor card but had never discussed their wish to donate with you	65	71	26	20	4	4	4	5

Q.21a,b

At the time of a person's death, the close family members are usually asked to make the final decision about whether an organ donation will take place. If you were in this difficult situation, would you be very, somewhat, not very or not at all likely to do give consent to an organ donation for a loved one who has died in each of the following situations ...?

The survey also explored the likelihood of consent if the deceased loved one has not signed an organ donor card or discussed making an organ or tissue donation. In this circumstance, two in ten (22%) say it is very likely and almost three in ten (27%) say it is somewhat likely that they would give consent. Five in ten (49%) say it is not very (18%) or not at all (31%) likely that they would do this.

There has been little change in overall likelihood of consent since 2001 in the situations where the deceased had both signed a donor card and discussed his or her wish to donate, or where the deceased had only signed a donor card; however, in both cases, there has been an increase in the proportions who say they are very likely and a corresponding decrease in the proportions who say they are somewhat likely to consent. In 2001, more than half (56%) said they were very or somewhat likely to consent to donation if the deceased had not signed a donor card. While direct comparison is not possible, the findings of the current survey make it clear that, in the absence of a signed donor card, prior discussion of one's wish to donate significantly increases the likelihood that family members will consent to a donation.

In looking at the proportions of various demographic groups who say they are very likely to give consent, women and those aged 45 to 64 years are more likely than others to give consent to an organ or tissue donation under all these circumstances. Those aged 35 to 44 years are more inclined to give consent if the deceased signed a card and discussed donation. Those aged 65 or older are more inclined than others to give

consent if the deceased did not sign a card or discuss donation. Those whose ethnic background is British are more likely than others to consent in situations where a card has been signed by the deceased, regardless of whether discussion about donation had taken place. Those whose ethnic background is French are more likely to consent where only a discussion had occurred, or where the deceased had given no indication, either by signing a card or in discussion. Catholics are more likely to give consent where only a card was signed, where intentions were discussed but no card was signed, and where no indication of intention was made; those with no religious affiliation in the first two of these situations.

Those aged 18 to 24 years, those who have never married, those whose ethnic background is non-European and those who were born outside Canada are less likely to give consent in all these situations. As well, those with lower levels of education and income tend to be less likely to give consent in these situations. Those aged 25 to 34 years are less inclined to give consent when the deceased has signed a card and discussed donation, and also when the deceased has done neither. Those whose ethnic background is European (other than British or French) are less likely to give consent where only a card was signed, or where the deceased discussed donation but did not sign a card. Those whose affiliation is neither Catholic nor Protestant are less likely to give consent where only a card was signed, where intentions were discussed but no card was signed, and where no indication of intention was made; Protestants are also less likely to consent where no indication of consent was made by the deceased.

Consent for donation on behalf of deceased – not signed card

August - September 2005

	VERY LIKELY	SOMEWHAT LIKELY	NOT VERY LIKELY	NOT AT ALL LIKELY	DK/NA
If he or she had not signed an organ donor card but had discussed with you that they wanted to donate	59	26	7	7	1
If he or she had not signed an organ donor card and had not discussed the issue with you	22	27	18	31	2

Q.21c,d

At the time of a person's death, the close family members are usually asked to make the final decision about whether an organ donation will take place. If you were in this difficult situation, would you be very, somewhat, not very or not at all likely to do give consent to an organ donation for a loved one who has died in each of the following situations ...?

Albertans are more likely to give consent in all these circumstances. Manitobans are more likely to consent where a card has been signed and there was a discussion of intent to donate by the deceased. Residents of Saskatchewan are more likely to consent where the deceased signed a card but did not discuss donation, and where no indication of intention was made by the deceased; Quebecers are also more likely to consent if there is no indication of the deceased's intention. However, Quebecers are somewhat less likely than others to consent if the donor has both signed a card and discussed his or her intention to donate. Manitobans are less likely to consent if the deceased signed a

card without discussing donation, or discussed donation without signing a card. British Columbians are less likely to consent if there is no indication of the deceased's intentions.

In all four circumstances tested, those who have signed organ donor cards (or registered as donors), and those who have decided to be organ or tissue donors are notably more inclined to give consent than are those who have not signed cards/registered, those who are undecided about being organ donors, and, in particular, those who have decided not to be organ donors.

WITHDRAWAL OF LIFE SUPPORT

Most Canadians believe that withdrawal of life support is acceptable when family and doctors agree there is no realistic chance of survival.

Canadians were asked to consider the issue of withdrawal of life support for a patient who does not respond to treatment and has no realistic chance of survival. They were asked to indicate how acceptable it is to withdraw life support under these conditions, using a seven-point scale where one means not at all acceptable and seven means very acceptable. In the following analysis, responses of seven, six and five are grouped together (“acceptable”) as are responses of one, two and three (“not acceptable”).

The survey shows that there is considerable public acceptance of this practice. Almost eight in ten Canadians (77%) say that it is acceptable to withdraw life support if both family and doctors agree. About one in ten (13%) are neutral on the subject, and one in ten (9%) say it is not acceptable.

Canadians who are or have been married, those with higher levels of education and income, and those with no religious affiliation are more likely to find withdrawal of life support acceptable under these conditions, as are those who have signed a donor card (or registered as donors), and those who have decided to be organ or tissue donors.

Those aged 18 to 24, those whose ethnic background is either French or, most notably, non-European, those whose religious affiliation is other than Catholic or Protestant, and those who were not born in Canada are less likely to find this acceptable.

Residents of the three prairie provinces are most likely to say that withdrawal of life support in these circumstances is acceptable; Quebecers are least likely to say this.

Withdrawal of life support August - September 2005

Acceptable	77
Neutral	13
Not acceptable	9

Q.22

Sometimes patients in a hospital do not respond to treatment in the intensive care unit and will not survive. When this happens, families may agree with doctors to withdraw life support. On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable and 4 is the mid-point, how acceptable is it to remove life support when a patients' family have agreed with doctors that there is no realistic chance of survival?

UNDERSTANDING OF BRAIN DEATH

There is considerable misunderstanding of the term “brain death” among Canadians; a relatively small proportion, three in ten, understand this phrase to mean that the patient is dead. Half of Canadians understand brain death to mean that the patient is in a coma with no realistic chance of survival

One-half of Canadians (49%) understand brain death to mean that the patient is in a coma with no realistic chance of survival. Three in ten (29%) understand it to mean that the patient is dead. One in ten each understand it to mean that the patient is in a coma with a good chance of survival with serious brain impairment (10%) or that the patient is in a coma with some chance of survival (8%).

Women are slightly more likely than men to say brain death means that the patient is dead or is in a coma with no realistic chance of survival. Those aged 18 to 24 years, those with higher levels of income and university graduates are also more likely to understand brain death to mean that the patient is in a coma with no realistic chance of survival; those aged 35 to 64 years, and those with some university education are more likely to say brain death means the patient is dead.

Those aged 18 to 34, those with the lowest levels of education and income, those whose ethnic background is non-European, those whose religious affiliation is neither Catholic nor Protestant, and those born outside Canada are more inclined to say that brain death means the patient has a good chance of survival with serious brain impairment.

Those with the lowest levels of education and income are also more inclined to say brain death means the patient is in a coma with some chance of survival, as are those whose ethnic background is French.

Understanding of brain death August - September 2005

The patient is in a coma with no realistic chance of survival	49
The patient is dead	29
The patient is in a coma with a good chance of survival with serious brain impairment	10
The patient is in a coma with some chance of survival	8
dk/na	4

Q.23

Which of the following is your understanding of brain death ...?

Atlantic Canadians, Manitobans, Albertans and British Columbians are more likely to understand brain death as meaning the patient is in a coma with no realistic chance of survival. Residents of Ontario, Alberta and Saskatchewan are more likely to say it means the patient is dead. Atlantic Canadians and Manitobans are also more likely to think it means the patient is in a coma with a good chance of survival with serious brain impairment. Quebecers are more inclined to think brain death means the patient is in a coma with some chance of survival.

Those who have signed a donor card (or registered as a donor), and those who have decided to be organ or tissue donors are somewhat more likely to understand brain death as meaning the patient is in a coma with no realistic chance of survival or is dead. Those who have not made a decision about being organ or tissue donors, and those who are decided non-donors are more likely to think it means the patient is in a coma with a good chance of survival with significant brain impairment.

DONATION AFTER CARDIAC DEATH

Awareness of DCD

About one in ten Canadians are aware of donation after cardiac death.

Awareness of donation after cardiac death (DCD) is low among Canadians. About one in ten (13%) say they had heard about DCD prior to this survey; almost nine in ten (87%) had not.

While awareness is universally low, older Canadians, those whose religious affiliation is neither Catholic nor Protestant, and residents of Saskatchewan and British Columbia are somewhat more likely to be aware of DCD, as are those who have signed a donor card or registered as a donor, those who have decided to be organ donors and those who have made a decision about tissue donation, both donors and non-donors.

Awareness of DCD

August - September 2005

Yes	13
No	87

Q.25

Prior to this survey, had you heard anything about the topic of donation after cardiac death?

Acceptability of decisions and procedures concerning DCD

Large majorities of Canadians find the general concepts of withdrawal of life support and donation after cardiac death to be acceptable; smaller majorities find the necessary speed of retrieval procedures after cardiac death to be acceptable. About half find procedures to maintain organs performed prior to cardiac death to be acceptable.

Canadians were asked to consider a number of decisions and procedures related to donation after cardiac death. They were asked to indicate how acceptable each of these decisions and procedures are, using a seven-point scale where one means not at all acceptable and seven means very acceptable. In the following analysis, responses of seven, six and five are grouped together (“acceptable”) as are responses of one, two and three (“not acceptable”).

Seven in ten or more say it is acceptable that “After families have agreed to remove life support, they may also agree to organ donation after the patient dies a cardiac death” (74%) and “After it is agreed to withdraw life support and donate organs after death, the patient is moved to an operating room where life supports are withdrawn” (71%).

About six in ten or more say it is acceptable that “The surgery to retrieve the organs might occur five minutes after the heart has stopped” (64%) and “In order for organ donation to occur under these circumstances, the family would leave the dying patients within minutes after death” (58%).

About one-half each say it is acceptable that “Technical procedures might be performed before death to help maintain a patient’s organs” (53%), and “Medications might be used before death to help maintain a patient’s organs even if those medications might not benefit the patient directly and might also have a small chance of causing harm” (47%).

Men are more likely than women to say that moving the patient to an operating room where life supports are withdrawn and performing retrieval surgery within five minutes of cardiac death is acceptable.

Those aged 18 to 34 are less likely to say that leaving the patient within minutes of death and administering medications to preserve organs prior to death is acceptable. Those aged 25 to 44 are more inclined to say making a decision to donate following the decision to withdraw life support and performing technical procedures to preserve organs prior to cardiac death is acceptable. Those aged 35 to 64 are more likely to say it is acceptable to perform retrieval within five minutes of cardiac death and administer medications to preserve organs prior to death. Those aged 55 to 64 are more likely to say it is acceptable that the family leave the patient within minutes of death. Those aged 65 or older are less likely to find most of these acceptable, with the exception of leaving the patient within minutes of death and performing retrieval surgery within minutes of death.

Those with higher levels of education and income tend to be more likely to find all of these decisions and procedures acceptable. Those who are or have been married are more likely to find making a decision to donate following the decision to withdraw life support, leaving the patient within minutes of death and performing retrieval surgery within minutes of death to be acceptable.

Those whose ethnic background is non-European are less likely to find all of these decisions and procedures acceptable. Those whose ethnic background is European (other than British or French) are less likely to find administering medications or performing technical procedures prior to death to be acceptable. Those whose ethnic background is British or French are more likely to say moving the patient to an operating room where life supports are withdrawn is acceptable; those

Acceptability of decisions and procedures concerning DCD

August - September 2005

	ACCEPTABLE	NEUTRAL	NOT ACCEPTABLE
After families have agreed to remove life support, they may also agree to organ donation after the patient dies a cardiac death	74	17	8
After it is agreed to withdraw life support and donate organs after death, the patient is moved to an operating room where life supports are withdrawn	71	18	9
The surgery to retrieve the organs might occur five minutes after the heart has stopped	64	18	16
In order for organ donation to occur under these circumstances, the family would leave the dying patient within minutes after death	58	22	17
Technical procedures might be performed before death to help maintain a patient’s organs	53	20	24
Medications might be used before death to help maintain a patient’s organs even if those medications will not benefit the patient directly and might also have a small chance of causing harm	47	20	30

Q.26

Organ donation after cardiac death may involve a number of decisions and procedures if it is to be successful. On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable and 4 is the mid-point, how acceptable are each of the following ...?

of British ethnicity are also more likely to find administering medications prior to death to be acceptable, while those of French ethnicity are more likely to say that leaving the patient within minutes of death is acceptable. Those born in Canada are more likely to say most of these procedures are acceptable, with the exception of administering medications or performing technical procedures prior to death.

Those whose religious affiliation is other than Catholic or Protestant are less likely to find most of these procedures acceptable, the exception being performing retrieval surgery within minutes after death. Those without a religious affiliation are more likely to say most of these procedures are acceptable, with the exception of leaving the patient within minutes after death.

Quebecers are more likely to say that leaving the patient within minutes of death and performing technical procedures prior to death is acceptable; they are less likely to say that administering medications prior to death is acceptable. Ontarians are less likely to find performing retrieval surgery within minutes after death and performing technical procedures prior to death acceptable. Manitobans are less likely to say it is acceptable to make a decision to donate following the decision to withdraw life support, to leave the patient within minutes after death and to perform retrieval surgery within minutes after death. Albertans are more likely to say it is acceptable to move the patient to an operating room where life supports are withdrawn, to perform retrieval surgery within minutes of death and to administer medications prior to death; British Columbians are also more likely to find these latter two procedures acceptable.

Those who have signed a donor card or registered as a donor, and those who have decided to donate organs or tissues are more likely to see all of these procedures as acceptable, while those who have decided not to donate organs or tissues are less likely to find these procedures acceptable.

Support for DCD

Most Canadians say that organ donation after cardiac death should be available in Canada. Furthermore, most Canadians would be comfortable if hospitals were to offer DCD, while fewer than half would be comfortable if they did not.

Prior to consideration of any procedures associated with donation after cardiac death (DCD), Canadians were informed that tissue donation – but not organ donation – after cardiac death is currently possible in Canada. When asked if organ donation after cardiac death should be available, eight in ten (79%) say yes, one in ten (8%) say no and a further one in ten (9%) say it depends.

Men, those aged 25 to 54, those who are married, Catholics and those without a religious affiliation are more likely to say organ donation after cardiac death should be available, as are those who have signed a donor card/registered, and those who have decided to be organ or tissue donors. Those with the lowest levels of education, those whose ethnic background is non-European, and those whose religious affiliation

Support for DCD

August - September 2005

	TOTAL	ATLANTIC CANADA	QUEBEC	ONTARIO	WESTERN CANADA
Yes	79	83	80	77	82
No	8	3	8	9	7
Depends	9	10	10	9	9
dk/na	4	4	3	5	2

Q.24

In Canada, doctors can declare death in one of two ways: either the brain has died, known as brain death, or the heart has stopped, known as cardiac death. Sometimes patients might not be brain dead, but they cannot survive their injuries or illness. They are usually on life support, and families and doctors might agree to withdraw life support in these circumstances. The patients then die from a cardiac death because the heart stops. Sometimes patients or their families ask about donating their organs after life support has been removed. This is called donation after cardiac death. Currently in Canada, tissue donation but not organ donation is possible after cardiac death. Do you think the option of organ donation after cardiac death should be available to Canadians?

is other than Catholic or Protestant are less likely to say this, as are those who have decided not to donate organs or tissues.

Following consideration of some decisions and procedures associated with DCD, Canadians were asked how comfortable they would be if hospitals started to offer DCD and how comfortable they would be if hospitals did not.

More than eight in ten would be very (42%) or somewhat (43%) comfortable if hospitals started to offer DCD; just over one in ten would be not very (8%) or not at all (6%) comfortable.

On the other hand, fewer than one-half would be very (8%) or somewhat (34%) comfortable if hospitals decided not to allow DCD; more than one-half would be not very (32%) or not at all (23%) comfortable.

Men, those who have no religious affiliation and those born in Canada are more likely than others to say they would be very comfortable if DCD were available, as are those who have signed a donor card/registered, and those who have decided to be organ or tissue donors. Those aged 18 to 24, those who have never married, those with lower levels of education and income, those whose ethnic background is European (other than British or French), or non-European, those whose religious affiliation is neither Catholic nor Protestant, and residents of Ontario and Manitoba are less inclined to be very comfortable with such a decision.

Those aged 18 to 24 years and those aged 65 or older, those with the lowest levels of education and income, those whose ethnic background is French or non-European, those whose religious affiliation is other than Catholic or Protestant, those born outside Canada, and residents of Quebec and Saskatchewan are more inclined to be very comfortable if hospitals were to decide not to allow DCD. However, even among these groups, four in ten or more would be uncomfortable if hospitals did not offer DCD.

Hospitals should allow DCD

August - September 2005

	TOTAL	ATLANTIC CANADA	QUEBEC	ONTARIO	WESTERN CANADA
Very comfortable	42	46	42	38	45
Somewhat comfortable	43	42	39	46	43
Not very comfortable	8	6	8	9	7
Not at all comfortable	6	6	7	7	5
dk/na	1	–	3	1	*

* Less than one percent

Q.27a

If Canadian hospitals started offering organ donation after cardiac death, in other words after death that follows the withdrawal of life support as we have just described, how comfortable would you be with that decision ...?

Hospitals should not allow DCD

August - September 2005

	TOTAL	ATLANTIC CANADA	QUEBEC	ONTARIO	WESTERN CANADA
Very comfortable	8	9	11	8	7
Somewhat comfortable	34	34	29	36	37
Not very comfortable	32	34	26	35	33
Not at all comfortable	23	23	28	20	22
dk/na	2	–	6	1	1

Q.27b

And if Canadian hospitals decided not to allow organ donation after cardiac death, how comfortable would you be with that decision ...?

Those who have signed donor cards/registered, and those who have decided to be organ or tissue donors, are more likely than others to say they would be not at all comfortable if hospitals decided not to offer DCD. On the other hand, those who have decided not to be organ or tissue donors are notably more likely to say they would be very comfortable if DCD were not available.

Confidence in professional approach to DCD

Canadians express overall confidence in the approach of medical personnel toward issues associated with DCD.

Canadians were asked to consider a number of issues involving professionalism and ethical standards related to the kinds of procedures and decisions involved in DCD.

Almost nine in ten Canadians say that they are very (40%) or somewhat (46%) confident that strict standards will be put in place to guide all practices related to DCD and ensure ethical conduct regarding donation after cardiac death. Nine in ten Canadians are very (45%) or somewhat (46%) confident that doctors and health care staff will follow strict ethical standards or practices.

Almost nine in ten say that they are very (40%) or somewhat (46%) confident that doctors and health care staff will be motivated by the best interests of the dying patient and not the possibility of organ donation, and that they are very (37%) or somewhat (49%) confident that the process of providing optimal end-of-life care will not be affected by the organ and tissue donation process.

Nine in ten say that they are very (48%) or somewhat (41%) confident that a patient's dignity will be recognized at the time of death when organ and tissue donation follows. In all these cases, one in ten or less are not confident, and just over nine in ten say that they are very (60%) or somewhat (33%) confident that an organ donor could still have a normal funeral service in a normal time frame.

While overall confidence is high on all of these issues in all major demographic groups and in all regions, there are variations in the degree of strongly expressed confidence within most subgroups.

Men are more likely than women to be very confident about all of these issues. Those with lower levels of income and to a lesser extent, those with lower levels of education, are less likely to be very confident about most of these issues, the exceptions being that strict ethical standards will be followed and that health care staff will be motivated by the best interests of the dying patient.

Confidence in professional approach to DCD

August - September 2005

	VERY CONFIDENT	SOMEWHAT CONFIDENT	NOT VERY CONFIDENT	NOT AT ALL CONFIDENT	DK/NA
That strict standards will be put in place to guide all practices just described and ensure ethical conduct regarding donation after cardiac death	40	46	8	4	1
That doctors and health care staff will follow these strict ethical standards or practices	45	46	5	3	1
That doctors and health care staff will be motivated by the best interests of the dying patient and not the possibility of organ donation	40	46	9	4	1
That the process of providing optimal end-of-life care will not be affected by the organ and tissue donation process	37	49	9	3	2
That a patient's dignity will be recognized at the time of death when organ or tissue donation follows	48	41	6	4	1
That an organ donor could still have a normal funeral service in a normal time frame	60	33	3	2	2

Q.28

Are you very, somewhat, not very, or not at all confident about each of the following ...?

Younger Canadians are less likely to be very confident that strict ethical standards will be followed, that health care staff will be motivated by the best interests of the dying patient and that the process of providing optimal end-of-life care will not be affected. Those aged 65 or older are more likely to be very confident about most of these issues, the exceptions being that the donor can have a normal funeral service and that strict standards will be put in place to guide all procedures involving DCD.

Those whose ethnic background is non-European are less likely to be very confident about all of these issues. Those whose ethnic background is British are more likely to be very confident about most of these issues, the exceptions being that strict standards will be put in place to guide procedures involving DCD and that health care staff will be motivated by the best interests of the dying patient. Those whose background is European other than British or French are less likely to be very confident that strict standards will be put in place. Those born in Canada are more likely to be very confident about most of these issues, with the exception of the donor being able to have a normal funeral service.

Catholics are more likely to be very confident that strict ethical standards will be followed. Those whose religious affiliation is neither Catholic nor Protestant are less likely to be very confident that strict standards will be put in place.

Residents of Saskatchewan are more likely than those living in other regions to be very confident about almost all of these issues, the exception being that strict standards will be put in place to guide procedures associated with DCD. Quebecers are less likely to be very confident that a donor can have a normal funeral service, that health care staff will be motivated by the best interests of the dying patient and that the process of providing optimal end-of-life care will not be affected. Manitobans are less likely to be very confident that strict ethical standards will be followed, that the patient's dignity will be respected and that the process of providing optimal end-of-life care will not be affected. British Columbians are less likely to be very confident that strict ethical standards will be put in place and followed, and that the medical staff will be motivated by the best interests of the dying patient.

Those who have signed donor cards or registered as donors, and those who have decided to become organ and tissue donors are more likely than others to be very confident about all of these issues. Those who have decided not to be organ or tissue donors are least likely to be very confident about all of these issues; they are also notably more likely than all others to say they are not confident about all these issues.

CONCLUSIONS

The goal of the current survey was to explore the views of the general public on issues related to organ and tissue donation. Specifically, the survey sought to measure awareness and knowledge of, and attitudes toward, organ and tissue donation among Canadians, to compare the findings, where possible, to previous survey research conducted by Environics in October 2001 and May 2002; and to measure awareness and support for organ donation after cardiac death (DCD).

Public values and attitudes toward organ and tissue donation remain positive. Public support for organ and tissue donation continues to be widespread, and has become stronger in the last few years: The number who say they have signed an organ donor card or placed their name with a donor registry, although perhaps inflated by the “social acceptability” factor, is high and rising, standing at 55 percent (10 points above the number found in 2001). However, the proportion of Canadians who have not made a decision about becoming a donor also remains high.

One important and specific objective of this research was to explore Canadians’ attitudes toward and acceptance of donation after cardiocirculatory death (DCD).

While there is limited prior awareness of DCD, once Canadians are informed about it, most think it should be available.

Canadians’ comfort and acceptance with various DCD interventions decreases moderately and correspondingly with the level of intervention required. Most Canadians find the concept of DCD following the decision to withdraw life support and the movement of potential donors to an operating room to withdraw life support to be acceptable. Canadians are less accepting of surgery to retrieve organs within five minutes after death; family members needing to leave the deceased within minutes after death; performance of technical procedures to maintain organs prior to death; and administration of medications to maintain organs prior to death.

Canadians express overall confidence in the approach of medical personnel toward issues associated with DCD. Eighty-five percent of Canadians are comfortable if hospitals decide to make DCD available, and 55 percent would not be comfortable if DCD were *not* made available.

APPENDICES

METHODOLOGY

The results of the survey are based on questions asked to 1,505 residents of Canada aged 18 or older by telephone from August 17 to September 7, 2005. The margin of error for a sample of 1,505 is ± 2.5 percentage points, 19 times in 20. The margin of error is greater for results pertaining to regional or socio-demographic subgroups of the total sample.

The description of Canadians' opinions in this report is based on random sampling of the population and telephone surveying using a structured questionnaire and specific sample size. The survey results represent a snapshot of opinion at a certain point in time. Caution is always required in extrapolating the findings of survey research beyond the parameters of the survey itself.

It was not the intention of the CCDT or of Environics Research Group that this survey would provide data sufficient to indicate significant differences between respondents in various demographic areas such as income, gender, ethnocultural or religious backgrounds. Where any statement is made in regard to specific respondents and their beliefs, perceptions or opinions, these statements are descriptive and should not be necessarily interpreted as representing statistically significant differences between any such group.

Questionnaire design

The questionnaire was developed by Environics after extensive consultation with the CCDT and its partners. Preliminary drafts were developed with reference to previous research conducted by Environics and others, and in consultation with a small committee of content experts. A developing draft instrument was provided to 130 forum participants in March 2005 at which 42 expert participants provided feedback and comments. After revisions, a pre-test was conducted, and a final questionnaire with minor revisions was created.

Sample selection

The sampling method was designed to complete approximately 1,500 interviews with Canadians (over 18 years of age) living within households randomly selected across the 10 provinces. Interviews were allocated disproportionate to the provincial populations in order to ensure adequate sample sizes for most provinces. The final sample is distributed as follows.

	N UNWEIGHTED	N WEIGHTED	MARGIN OF ERROR (%)
Canada	1,505	1,505	2.5
Atlantic Region	200	116	6.9
Quebec	353	363	5.2
Ontario	400	574	4.9
Manitoba	100	56	9.6
Saskatchewan	100	49	9.6
Alberta	150	149	8.0
British Columbia	202	197	6.9

Environics uses a sampling method in which sample is generated using the RDD (random digit dialling) technique. Samples are generated using a database of active phone ranges. These ranges are made up of a series of contiguous blocks of 100 contiguous phone numbers and are revised three to four times per year after a thorough analysis of the most recent edition of an electronic phonebook. Each number generated is processed through an appropriate series of validation procedures before it is retained as part of a sample. Each number generated is looked up in a recent electronic phonebook database to retrieve geographic location, business indicator and “do not call” status. The postal code for listed numbers is verified for accuracy and compared against a list of valid codes for the sample stratum. Non-listed numbers are assigned a “most probable” postal code based on the data available for all listed numbers in the phone exchange. This sample selection technique ensures that both unlisted numbers and numbers listed after the directory publication are included in the sample.

From within each multi-person household contacted, respondents 18 years of age and older were screened for random selection using the “most recent birthday” method. The use of this technique produces results that are as valid and effective as enumerating all persons within a household and selecting one randomly.

In the data analysis, the sample was weighted by region based on population data to reflect the actual proportions of each region. The sample was also weighted by age and gender to reflect proportions found in the general population.

Telephone interviewing

Fieldwork was conducted at Environics’ central facilities in Toronto and Montreal. Field supervisors were present at all times to ensure accurate interviewing and recording of responses. Prior to the beginning of fieldwork, Environics conducted 20 pre-test interviews to ensure that the interview questions were clear, appropriately sequenced within the interview protocol and yield useful information. During fieldwork, 10 percent of each interviewer’s work was unobtrusively monitored for quality control in accordance with the standards set out by the Canadian Association of Marketing Research Organizations – CAMRO (now the Marketing Research and Intelligence Association – MRIA). A minimum of five calls were made to a household before classifying it as a “no answer.”

Completion results

The sample for this survey consisted of 1,505 interviews completed among adult Canadians. Completion results

	N
A. Total sample dialled	20,343
Household not eligible	68
Non-residential/not in service	4,936
Language barrier	543
B. Subtotal	5,547
C. New base (A – B)	14,796
D. No answer/line busy/not available	6,972
Refusals	6,156
Mid-interview refusals	163
E. Subtotal	13,291
F. Net completions (C – E)	1,505

RELEVANCE TO SOCIAL MARKETING

An important aspect of increasing the donation rate is not only understanding the views of Canadians regarding organ and tissue donation, but specifically understanding the segment of Canadians who are undecided about personal donation, but who have not made a personal decision against it. The October 2001 Environics survey⁵ established baseline information regarding this segment of the population which was used to develop a national public awareness campaign intended to increase organ and tissue donation.

The current survey confirms the importance of this segment: of those who have not signed an organ donor card, the vast majority approximately seven in ten – are not opposed to donating but in fact are undecided about it.

The 2001 survey identified demographics, motivators and inhibitors of the undecided donor. The current survey confirms many of these demographic characteristics but also finds some changes.

The undecided segment is in many ways fairly representative of the Canadian population as a whole, but there are some differences. Among the undecided, there is a somewhat higher than average representation of the following demographic and regional groups:

- Men
- Younger Canadians aged 18 to 24
- Never married Canadians
- Canadians with lower education levels
- Canadians with lower income levels
- Canadians whose ethnic origin is non-European or European other than English or French
- Canadians whose religious affiliation is Protestant or “other”
- Residents of Western Canada (particularly Saskatchewan and British Columbia)

Since 2001, there have been some changes in the demographic profile of the undecided: older Canadians, aged 65 or more, and residents of Toronto, who were somewhat over-represented in 2001, are now no more likely than average to be found in the undecided segment in the current survey. Further, among the Western provinces, Albertans are now just slightly more likely than average to be among the undecided. In the current survey, Protestants are now somewhat over-represented among the undecided, and among the Western provinces, British Columbians are somewhat more likely than average to be among the undecided.

In the current survey, the most frequently stated reasons for indecision are:

- “Haven’t thought about it”
- “Don’t know enough about it”

Since 2001, there has been an increase among the undecided in the proportion saying that they don’t know enough about organ and tissue donation, and a slight decline in the proportion saying they haven’t thought about it.

In the current survey, the motivators that resonate most strongly with the undecided segment are tied to altruism:

- Saving life of recipient
- Improving the quality of life of recipient
- Organs and tissues could help many people
- More donations are needed

Since 2001, the idea that more donations are needed has gained importance among the undecided, and the idea that research could lead to treatments and cures has declined somewhat in importance.

5 *Organ and Tissue Donation: Canadian Public Awareness, Knowledge and Attitudes*, released November 2001.

In the current survey, the inhibitors to donation of greatest importance to the undecided are:

- Could make death a more difficult experience for loved ones
- Some people may not deserve transplants because they have abused their own health
- Death is too disturbing to think about
- Donation process might delay or complicate burial

Since 2001, the ideas that some people may not deserve transplants and that the donation process might delay or complicate the burial process have gained somewhat in importance.

Based on these findings, public awareness activities should be primarily directed at this population segment. In addition, it would seem that such activities would also serve to reinforce the beliefs and values of those who have already decided to donate and who have signed an organ donor card, who do not differ greatly from the undecided in their motivations.

Increasing the number of Canadians, from any population segment, to sign an organ donor card will also encourage more next of kin to agree to donation at the time of their loved ones death, since next of kin are strongly supportive of agreeing to a donation if their loved one has signed a card.

REGIONAL DATA TABLES

The attached statistical tables present the detailed findings of the survey for Canada and eight regions/provinces. The associated margins of error are reported for the unweighted sample sizes, based on results at the 95% level.

	N UNWEIGHTED	N WEIGHTED	MARGIN OF ERROR (%)
Canada	1,505	1,505	2.5
Atlantic Region	200	116	6.9
Quebec	353	363	5.2
Ontario	400	574	4.9
West	552	451	4.2
Manitoba	100	56	9.6
Saskatchewan	100	49	9.6
Alberta	150	149	8.0
British Columbia	202	197	6.9



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Banner X1

Table B Page 1.....B.	Do you or does anyone in your household work for an advertising or market research firm or the media?
Table C Page 2.....C.	Are you male or female?
Table D Page 3.....D.	Language of interview.
Table 1 Page 4.....1.	Have you ever heard anything about the topic of organ and tissue donation; that is, people donating their organs or their tissues after death?
Table 2 Page 5.....2.	How do you feel about organ and tissue donation, that is people donating their organs or their tissues after death?
Table 3 Page 6.....3.	Have you signed an organ donor card that gives permission for your organs or your tissues to be donated after death?
Table 4 Page 7.....4.	Are you aware of an organ or tissue registry in your province?
Table 5 Page 8.....5.	Have you put your name on a registry that gives permission for your organs or tissues to be used after death?
Table 6 Page 9.....6.	which of the following statements best describes your own situation?
Table 7 Page 10.....7.	which of the following statements best describes your own situation?
Table 8 Page 11.....8.	Have you discussed this decision with the person who would act on your behalf in the event of a medical emergency? Subsample: Those who have made a decision
Table 9a Page 12.....9a.	What is the MAIN reason that you have decided NOT TO donate your organs or tissues upon your death? Subsample: Those who have decided not to donate their organs or tissues
Table 9b Page 13.....9b.	Are there any other reasons? Subsample: Those who have decided not to donate their organs or tissues
Table 10 Page 14.....10.	What is the main reason you have not made a decision about organ and tissue donation? Subsample: Those who have not made a decision about organ and tissue donation
Table 11 Page 16.....11.	As far as you know is there...?
Table 12a Page 17.....12.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally. a) That you would be SAVING THE LIFE of a person who needs an organ or tissue transplant.
Table 12b Page 18.....12.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally. b) That you would be improving the QUALITY OF LIFE of a person who needs an organ or tissue transplant.
Table 12c Page 19.....12.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally. c) Because more organ donations are needed in this country today.
Table 12d Page 20.....12.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally. d) Because you do not need your organs or tissues after death.
Table 12e Page 21.....12.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally. e) Because your organs and tissues could help many people who need transplants.
Table 12f Page 22.....12.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally. f) Because scientific research using your organ and tissue donation could lead to treatments and cures for diseases.
Table 12g Page 23.....12.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally. g) If you were able to indicate that you want only specific organs or tissues donated.



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Table 12h Page 24.....12.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally. h) If people would remember you as a good and caring person for making this donation.
Table 12i Page 25.....12.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally. i) If your loved ones would feel comforted by your donation.
Table 12j Page 26.....12.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally. j) Because you believe that donating is the right thing to do.
Table 13a Page 27.....13.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate. a) Because you believe the procedures used to remove organs and tissues are too intrusive on the donor's body.
Table 13b Page 28.....13.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate. b) Because some people who receive organ transplants may not really deserve to receive them, since they have abused their own health through behaviors such as smoking, obesity, drug or alcohol use.
Table 13c Page 29.....13.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate. c) Because you think that donating your organs or tissues would make your death a more difficult experience for your loved ones.
Table 13d Page 30.....13.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate. d) Because you don't believe in organ and tissue donation.
Table 13e Page 31.....13.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate. e) Because death is too disturbing to think about.
Table 13f Page 32.....13.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate. f) Because donation might delay or complicate the burial arrangements for your family.
Table 13g Page 33.....13.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate. g) Because YOUR religious or spiritual beliefs do not support organ and tissue donation.
Table 13h Page 34.....13.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate. h) Because YOUR cultural beliefs and values do not support organ and tissue donation.
Table 13i Page 35.....13.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate. i) Because your FAMILY MEMBERS' religious or spiritual beliefs do not support organ and tissue donation.
Table 13j Page 36.....13.	Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate. j) Because your FAMILY MEMBERS' cultural beliefs and values do not support organ and tissue donation.
Table 14a Page 37.....14.	Please tell me if you think each of the following statements is definitely true, probably true, probably not true or is definitely not true. a) Anyone at any age can become an organ and tissue donor.
Table 14b Page 38.....14.	Please tell me if you think each of the following statements is definitely true, probably true, probably not true or is definitely not true. b) Doctors are committed to providing high quality care to dying patients and their families.
Table 14c Page 39.....14.	Please tell me if you think each of the following statements is definitely true, probably true, probably not true or is definitely not true. c) Rich people who need organ and tissue transplants are more likely to receive them in this country's hospitals than are poorer people who need transplants.



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Table 14d Page 40.....14.	Please tell me if you think each of the following statements is definitely true, probably true, probably not true or is definitely not true. d) The organ and tissue donation process could exploit people of colour, First Nations people, or other minority groups.
Table 14e Page 41.....14.	Please tell me if you think each of the following statements is definitely true, probably true, probably not true or is definitely not true. e) Doctors may prematurely declare a person to be dead in order to get potential organ and tissue donations.
Table 15 Page 42.....15.	Where have you seen, heard or read about organ and tissue donation and transplantation?
Table 16 Page 44.....16.	If you were looking for information about organ and tissue donation, where would you go?
Table 17 Page 46.....17.	Have you discussed the topic of organ and tissue donation with your close family members, either YOUR views and intentions or THEIR views and intentions?
Table 18 Page 47.....18.	How confident are you that your views and intentions with regard to organ and tissue donation after death will be respected?
Table 19 Page 48.....19.	What do you think happens in a situation where someone has signed an organ donor card or registered an organ and tissue donation registry but his or her family does not wish any organ donation to take place?
Table 20 Page 49.....20.	In your opinion, what SHOULD happen?
Table 21a Page 50.....21.	If you were in this difficult situation, would you be very, somewhat, not very or not at all likely to do give consent to an organ donation for a loved one who has died in each of the following situations? a) If he or she HAD SIGNED an organ donor card and had discussed with you that they wanted to donate?
Table 21b Page 51.....21.	If you were in this difficult situation, would you be very, somewhat, not very or not at all likely to do give consent to an organ donation for a loved one who has died in each of the following situations? b) If he or she HAD SIGNED an organ donor card but had never discussed their wish to donate with you.
Table 21c Page 52.....21.	If you were in this difficult situation, would you be very, somewhat, not very or not at all likely to do give consent to an organ donation for a loved one who has died in each of the following situations? c) If he or she HAD NOT SIGNED an organ donor card but had discussed with you that they wanted to donate.
Table 21d Page 53.....21.	If you were in this difficult situation, would you be very, somewhat, not very or not at all likely to do give consent to an organ donation for a loved one who has died in each of the following situations? d) If he or she HAD NOT SIGNED an organ donor card and had not discussed the issue with you.
Table 22 Page 54.....22.	Sometimes patients in a hospital do not respond to treatment in the intensive care unit and will not survive. When this happens, families may agree with doctors to withdraw life support. On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable, how acceptable is it to remove life support when a patient's family have agreed with doctors that there is no realistic chance of survival?
Table 23 Page 55.....23.	Which of the following is your understanding of brain death?
Table 24 Page 56.....24.	Currently in Canada, tissue donation but not organ donation is possible after cardiac death. Do you think the option of organ donation after cardiac death should be available to Canadians?
Table 25 Page 57.....25.	Prior to this survey, had you heard anything about the topic of donation after cardiac death?
Table 26a Page 58.....26.	On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable and 4 is the mid-point, how acceptable are each of the following. a) After families have agreed to remove life support they may also agree to organ donation after the patient dies a cardiac death.
Table 26b Page 59.....26.	On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable and 4 is the mid-point, how acceptable are each of the following. b) After it is agreed to withdraw life support and donate organs after death, the patient is moved to an operating room where life supports are withdrawn.
Table 26c Page 60.....26.	On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable and 4 is the mid-point, how acceptable are each of the following. c) In order for organ donation to occur under these circumstances the family would leave the dying patient within minutes after death.



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Table 26d Page 61.....26.	On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable and 4 is the mid-point, how acceptable are each of the following. d) The surgery to retrieve the organs might occur five minutes after the heart has stopped.
Table 26e Page 62.....26.	On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable and 4 is the mid-point, how acceptable are each of the following. e) Medications might be used before death to help maintain a patient's organs even if those medications will not benefit the patient directly and might also have a small chance of causing harm.
Table 26f Page 63.....26.	On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable and 4 is the mid-point, how acceptable are each of the following. f) Technical procedures might be performed before death to help maintain a patient's organs.
Table 27a Page 64.....27a.	If Canadian hospitals started offering organ donation after cardiac death, in other words after death that follows the withdrawal of life support as we have just described, how comfortable would you be with that decision?
Table 27b Page 65.....27b.	And if Canadian hospitals decided NOT to allow organ donation after cardiac death, how comfortable would you be with that decision?
Table 28a Page 66.....28.	Are you very, somewhat, not very, or not at all confident about each of the following? a) That strict standards will be put in place to guide all practices just described and ensure ethical conduct regarding donation after cardiac death.
Table 28b Page 67.....28.	Are you very, somewhat, not very, or not at all confident about each of the following? b) That doctors and health care staff will follow these strict ethical standards or practices.
Table 28c Page 68.....28.	Are you very, somewhat, not very, or not at all confident about each of the following? c) That doctors and health care staff will be motivated by the best interests of the dying patient and not the possibility of organ donation.
Table 28e Page 69.....28.	Are you very, somewhat, not very, or not at all confident about each of the following? e) That the process of providing optimal end of life care will not be affected by the organ and tissue donation process.
Table 28f Page 70.....28.	Are you very, somewhat, not very, or not at all confident about each of the following? f) That a patient's dignity will be recognized at the time of death when organ and tissue donation follows.
Table 28g Page 71.....28.	Are you very, somewhat, not very, or not at all confident about each of the following? g) That an organ donor could still have a normal funeral service in a normal time frame.
Table 29 Page 72.....29.	which of the following best describes your own present employment status?
Table 30 Page 73.....30.	what is the highest level of education that you have reached?
Table 31 Page 74.....31.	In what year were you born (age group)?
Table 32 Page 75.....32.	Are you...?
Table 33 Page 76.....33.	Are there any children under the age of 18 living in your household?
Table 34 Page 77.....34.	To which ethnic or cultural group do you and your ancestors belong?
Table 35 Page 79.....35.	what is your religious affiliation, if any?
Table 36 Page 80.....36.	were you born in Canada or in another country?
Table 37 Page 81.....37.	Into which of the following categories would you put the total annual income in 2004 of all the members of your household, including yourself, before taxes and deductions?



CCDT Public Opinion Survey

C. Are you male or female?

	REGION								
	TOTAL	Atl.	Que.	Ont. West	Man.	Sask.	Alb.	B.C.	
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Male	48	47	49	48	48	46	47	48	49
Female	52	53	51	52	52	54	53	52	51



CCDT Public Opinion Survey

D. Language of interview.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
English	77	100	5	100	100	100	100	100	100
French	23	-	95	*	-	-	-	-	-



CCDT Public Opinion Survey

1. Have you ever heard anything about the topic of organ and tissue donation; that is, people donating their organs or their tissues after death?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Yes	93	95	90	94	95	94	94	94	96
No	7	5	10	6	5	6	6	6	4
DK/NA	*	-	-	-	*	-	-	1	-



CCDT Public Opinion Survey

2. How do you feel about organ and tissue donation, that is people donating their organs or their tissues after death?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Strongly approve	71	71	79	66	70	64	65	70	73
Somewhat approve	25	25	18	28	25	31	29	26	23
Somewhat disapprove	2	2	1	2	2	2	2	3	1
Strongly disapprove	2	*	1	2	1	1	2	1	1
DK/NA	1	2	*	2	1	3	2	1	2



CCDT Public Opinion Survey

3. Have you signed an organ donor card that gives permission for your organs or your tissues to be donated after death?

	REGION								
	TOTAL	Atl.	Que.	Ont. West	Man.	Sask.	Alb.	B.C.	
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Yes	54	51	63	51	50	58	50	49	48
No	45	48	35	48	48	42	47	50	50
DK/NA	1	1	1	1	1	-	3	1	2



CCDT Public Opinion Survey

4. Are you aware of an organ or tissue registry in your province?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Yes	35	40	21	38	41	33	37	36	48
No	64	59	78	61	58	64	60	64	51
DK/NA	1	1	1	*	1	2	2	1	1



CCDT Public Opinion Survey

5. Have you put your name on a registry that gives permission for your organs or tissues to be used after death?

	REGION								
	TOTAL	Atl.	Que.	Ont. West	Man.	Sask.	Alb.	B.C.	
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Yes	17	27	13	15	20	18	13	10	30
No	81	70	86	82	78	82	83	87	69
DK/NA	2	3	1	2	2	-	5	3	1



CCDT Public Opinion Survey

6. Which of the following statements best describes your own situation?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
You have decided to donate your ORGANS at the time of your death	55	53	67	51	51	54	46	51	52
You have decided NOT TO donate your ORGANS at the time of your death	8	8	6	10	7	10	8	7	5
You have not made a decision about this	37	39	26	39	41	37	46	40	43
DK/NA	*	*	1	*	1	-	-	2	-



CCDT Public Opinion Survey

7. Which of the following statements best describes your own situation?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
You have decided to donate your TISSUES at the time of your death	39	32	49	35	37	34	35	39	36
You have decided NOT TO donate your TISSUES at the time of your death	8	11	7	10	7	11	7	8	6
You have not made a decision about this	51	56	41	54	55	55	58	52	57
DK/NA	2	2	3	1	1	1	1	1	1



CCDT Public Opinion Survey

8. Have you discussed this decision with the person who would act on your behalf in the event of a medical emergency?
Subsample: Those who have made a decision

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	963	71	268	354	270	37	27	91	115
UNWEIGHTED TOTAL	961	122	261	247	331	66	55	92	118
Yes	74	77	70	78	74	71	73	73	75
No	25	23	30	22	26	28	27	27	25
DK/NA	*	-	-	1	*	1	-	-	-



CCDT Public Opinion Survey

9a. What is the MAIN reason that you have decided NOT TO donate your organs or tissues upon your death?

Subsample: Those who have decided not to donate their organs or tissues

	REGION								
	TOTAL	Atl.	Que.	Ont. West	Man.	Sask.	Alb.	B.C.	
TOTAL	143	13	29	67	36	7	4	13	12
UNWEIGHTED TOTAL	140	21	29	46	44	11	8	13	12
Have a medical condition, can't donate	19	10	10	23	22	16	24	37	9
Religious / Spiritual beliefs	11	10	7	12	13	31	15	15	-
Personal preference / beliefs / just don't want to	10	14	4	13	10	11	25	9	7
Age / I'm too old	8	-	8	9	8	19	14	8	-
want to keep my organs / tissue / body intact	8	14	3	5	14	-	-	15	25
Don't know enough about it	5	5	-	7	6	-	-	8	8
Never thought about it	4	-	-	8	2	-	14	-	-
Believe the procedure will be abused	3	3	-	4	3	-	-	-	9
Don't trust doctors / system	3	3	-	4	3	-	-	-	8
Fear	2	-	7	-	3	-	-	-	8
want to decide specifically what organs are used for	2	6	-	-	5	7	-	-	10
I smoke cigarettes / I'm a smoker	2	-	4	-	3	-	-	-	10
Previous negative experience with transplant	2	-	-	2	2	9	-	-	-
Other	3	-	8	2	3	-	-	8	-
DK/NA	22	38	50	14	12	16	8	8	15



CCDT Public Opinion Survey

9b. Are there any other reasons?

Subsample: Those who have decided not to donate their organs or tissues

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	143	13	29	67	36	7	4	13	12
UNWEIGHTED TOTAL	140	21	29	46	44	11	8	13	12
Want to keep my organs / tissue / body intact	3	-	-	2	9	16	-	9	8
Want to decide specifically what organs are used for	3	-	-	4	3	-	-	-	8
Don't know enough about it	2	-	-	2	3	-	-	-	10
Have a medical condition, can't donate	1	-	-	-	5	-	-	15	-
Never thought about it	1	-	-	2	-	-	-	-	-
Don't trust doctors / system	1	-	-	2	-	-	-	-	-
Religious / Spiritual beliefs	1	-	-	-	3	-	-	9	-
Personal preference/ beliefs / just don't want to	1	-	-	-	3	-	-	9	-
Age / I'm too old	*	-	-	-	2	10	-	-	-
Other	3	-	12	-	2	-	14	-	-
DK/NA	85	100	88	89	69	74	86	59	74



CCDT Public Opinion Survey

10. What is the main reason you have not made a decision about organ and tissue donation?

Subsample: Those who have not made a decision about organ and tissue donation

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	816	68	164	324	261	33	29	83	116
UNWEIGHTED TOTAL	820	116	158	226	320	59	58	84	119
Haven't thought about it / never occurred to me	24	25	6	35	22	26	25	22	20
Don't know enough about it / unaware of it	16	15	17	14	18	20	11	14	22
Put it off / don't like to think about it	6	4	4	8	6	7	2	11	3
have a medical condition, can't donate / health reasons	5	5	*	6	8	3	6	7	10
Age / I'm too old to donate	4	3	3	5	3	2	4	1	4
Still trying to decide / hard choice	3	6	1	3	3	6	-	5	2
Age/ I'm too young to think about it	2	2	2	3	1	-	-	1	2
Don't know how to register	2	2	1	2	4	1	4	7	3
Not come up / haven't been asked	2	2	1	1	3	2	2	2	4
Don't plan on dying anytime soon	2	3	1	2	1	-	1	1	2
Don't trust doctors / system / procedure	1	2	2	1	1	-	-	2	2
Uncomfortable with the idea	1	2	-	2	1	-	2	-	1
No time / too busy	1	1	-	1	2	-	-	3	2
Religious beliefs	1	2	1	1	2	2	6	1	1
Need to discuss with family	1	-	1	1	2	2	2	-	2



CCDT Public Opinion Survey

10. What is the main reason you have not made a decision about organ and tissue donation?

Subsample: Those who have not made a decision about organ and tissue donation

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	816	68	164	324	261	33	29	83	116
UNWEIGHTED TOTAL	820	116	158	226	320	59	58	84	119
Don't think my organs are of value	1	1	-	2	1	1	-	1	-
Not a priority	1	1	1	1	1	-	-	1	1
Fear	1	2	2	-	*	-	-	-	1
It's not on driver's license	1	2	-	*	1	4	4	-	1
Want to decide specifically what they are used for	1	1	-	*	1	-	3	-	1
Family doesn't approve	1	-	-	*	1	2	3	1	-
Don't know what its used for	*	1	-	*	1	4	-	-	-
Other	5	4	6	5	4	8	5	2	3
DK/NA	24	28	54	12	20	16	28	20	19



CCDT Public Opinion Survey

11. As far as you know is there...?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
A great need	80	80	84	77	79	78	77	80	80
Some need	13	14	10	14	15	18	15	15	14
Little need	1	1	1	2	*	1	-	-	1
No need at all for MORE organ and tissue donations in this country	1	2	1	1	1	-	1	-	1
DK/NA	5	3	4	6	5	4	7	5	5



CCDT Public Opinion Survey

12. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally.

a) That you would be SAVING THE LIFE of a person who needs an organ or tissue transplant.

	REGION								
	TOTAL	Atl.	Que.	Ont. West	Man.	Sask.	Alb.	B.C.	
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	79	82	84	78	75	75	72	76	74
(6)	9	10	6	8	11	12	10	14	9
(5)	4	1	4	4	6	5	7	4	7
(4)	4	4	2	5	5	4	8	5	4
(3)	1	2	1	1	*	-	-	-	1
(2)	1	*	*	1	1	1	1	1	*
Not at all important (1)	2	1	2	2	3	2	3	1	4
TOTAL Important	92	93	94	90	91	92	88	93	90
TOTAL Not Important	3	3	3	3	4	3	4	1	5
MEAN	6.51	6.61	6.63	6.48	6.42	6.47	6.30	6.55	6.34
DK/NA	1	-	1	1	*	1	-	-	*



CCDT Public Opinion Survey

12. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally.

b) That you would be improving the QUALITY OF LIFE of a person who needs an organ or tissue transplant.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	74	78	80	73	69	67	70	69	69
(6)	11	9	8	10	15	21	11	15	13
(5)	6	7	5	7	6	5	6	6	7
(4)	5	3	4	6	6	5	7	7	4
(3)	1	*	*	2	-	-	-	-	-
(2)	1	1	1	1	1	1	2	1	2
Not at all important (1)	2	2	2	2	3	2	4	1	4
TOTAL Important	91	94	93	90	90	92	87	90	89
TOTAL Not Important	4	3	3	4	4	3	6	2	6
MEAN	6.42	6.54	6.54	6.38	6.33	6.40	6.24	6.41	6.28
DK/NA	*	*	*	*	1	-	-	1	1



CCDT Public Opinion Survey

12. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally.

c) Because more organ donations are needed in this country today.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	63	70	68	62	59	58	57	62	58
(6)	12	14	10	13	12	15	12	12	12
(5)	10	6	8	10	12	15	11	13	12
(4)	9	7	8	10	8	7	13	8	7
(3)	2	1	1	2	3	2	2	2	4
(2)	1	-	1	1	2	3	2	1	2
Not at all important (1)	2	2	3	1	2	1	2	2	3
TOTAL Important	85	90	87	84	84	88	80	87	82
TOTAL Not Important	5	3	5	5	7	6	6	5	8
MEAN	6.15	6.38	6.24	6.13	6.05	6.08	5.98	6.12	6.01
DK/NA	1	-	1	1	1	-	1	-	3



CCDT Public Opinion Survey

12. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally.

d) Because you do not need your organs or tissues after death.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	63	60	71	62	60	58	58	57	64
(6)	8	10	6	7	9	8	7	11	8
(5)	7	9	5	7	9	8	10	9	8
(4)	10	11	6	13	9	17	7	8	7
(3)	1	1	1	2	1	3	3	2	-
(2)	2	1	1	1	3	1	2	3	4
Not at all important (1)	8	5	9	7	7	4	10	7	7
TOTAL Important	78	79	83	76	77	73	76	77	79
TOTAL Not Important	10	7	11	10	11	8	15	12	11
MEAN	5.88	5.95	6.02	5.83	5.82	5.84	5.66	5.80	5.88
DK/NA	1	2	1	1	2	2	2	3	2



CCDT Public Opinion Survey

12. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally.

e) Because your organs and tissues could help many people who need transplants.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	70	73	78	67	67	72	69	64	67
(6)	11	13	8	11	12	10	9	14	13
(5)	8	6	6	9	10	6	7	13	9
(4)	6	5	5	8	6	8	11	6	5
(3)	1	*	*	1	*	-	-	1	-
(2)	1	1	1	*	1	2	1	1	2
Not at all important (1)	2	1	2	3	2	1	2	1	3
TOTAL Important	89	92	92	87	89	89	86	91	89
TOTAL Not Important	4	2	4	5	4	3	3	2	5
MEAN	6.32	6.47	6.46	6.23	6.28	6.39	6.25	6.29	6.24
DK/NA	*	*	-	1	*	1	-	-	*



CCDT Public Opinion Survey

12. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally.

f) Because scientific research using your organ and tissue donation could lead to treatments and cures for diseases.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	56	65	63	51	53	45	48	54	56
(6)	11	9	10	13	11	18	13	9	10
(5)	12	14	11	12	13	16	12	13	12
(4)	12	8	9	14	13	15	20	14	11
(3)	3	2	1	4	3	2	1	2	4
(2)	2	*	2	2	2	2	-	3	1
Not at all important (1)	3	2	3	3	4	3	6	4	4
TOTAL Important	79	88	85	76	77	78	73	77	78
TOTAL Not Important	8	4	5	9	9	7	7	10	9
MEAN	5.87	6.19	6.10	5.74	5.76	5.71	5.63	5.73	5.84
DK/NA	1	-	1	*	1	-	-	-	2



CCDT Public Opinion Survey

12. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally.

g) If you were able to indicate that you want only specific organs or tissues donated.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	27	30	32	27	24	36	20	24	22
(6)	10	8	9	12	11	7	15	12	11
(5)	13	17	11	13	13	17	16	14	10
(4)	19	21	14	21	19	19	21	20	18
(3)	5	3	4	5	5	4	6	1	9
(2)	4	4	3	3	4	5	1	5	4
Not at all important (1)	21	16	24	18	22	10	21	23	26
TOTAL Important	51	56	51	51	48	60	51	50	42
TOTAL Not Important	29	22	31	26	32	19	27	29	39
MEAN	4.43	4.68	4.43	4.50	4.27	4.99	4.37	4.31	4.02
DK/NA	2	1	4	2	1	3	-	1	1



CCDT Public Opinion Survey

12. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally.

h) If people would remember you as a good and caring person for making this donation.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	18	21	29	17	11	13	16	12	9
(6)	4	4	7	1	4	3	8	6	2
(5)	11	13	10	11	10	10	2	11	12
(4)	22	20	16	24	25	26	27	25	23
(3)	7	7	5	7	7	7	15	5	7
(2)	7	6	6	8	7	9	6	6	8
Not at all important (1)	30	28	25	31	34	32	26	33	37
TOTAL Important	33	39	45	29	25	26	25	29	22
TOTAL Not Important	44	40	36	46	49	48	47	44	53
MEAN	3.61	3.84	4.18	3.48	3.27	3.35	3.59	3.42	3.04
DK/NA	1	1	2	1	1	-	1	1	2



CCDT Public Opinion Survey

12. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally.

i) If your loved ones would feel comforted by your donation.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	34	38	44	31	29	41	24	30	25
(6)	10	12	7	10	11	10	9	11	12
(5)	13	12	11	12	16	11	17	18	15
(4)	21	23	18	24	20	22	23	22	18
(3)	4	3	3	5	5	4	8	4	6
(2)	4	3	3	5	5	4	7	6	4
Not at all important (1)	11	9	11	11	13	8	12	9	17
TOTAL Important	56	62	61	52	55	61	50	58	52
TOTAL Not Important	20	14	17	21	23	16	26	19	26
MEAN	4.89	5.17	5.19	4.77	4.72	5.18	4.51	4.87	4.52
DK/NA	3	1	4	2	2	1	1	1	3



CCDT Public Opinion Survey

12. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally.

j) Because you believe that donating is the right thing to do.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	62	61	76	59	56	50	57	61	54
(6)	12	12	11	12	12	14	6	14	13
(5)	8	10	4	8	11	11	15	10	12
(4)	11	12	6	14	11	13	16	9	12
(3)	2	1	*	2	2	4	2	1	3
(2)	1	1	1	1	1	2	2	1	1
Not at all important (1)	3	3	2	3	4	5	3	6	4
TOTAL Important	82	82	91	80	80	76	77	84	78
TOTAL Not Important	6	5	4	6	8	11	6	7	8
MEAN	6.07	6.04	6.43	5.99	5.88	5.68	5.84	5.99	5.86
DK/NA	1	*	-	1	1	1	-	-	2



CCDT Public Opinion Survey

13. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate.

a) Because you believe the procedures used to remove organs and tissues are too intrusive on the donor's body.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	5	7	6	4	4	5	4	6	3
(6)	3	4	3	3	2	3	3	2	2
(5)	4	3	4	5	5	6	8	4	4
(4)	13	12	14	14	12	15	10	15	10
(3)	6	8	4	6	6	7	2	6	7
(2)	8	7	7	8	9	10	9	10	9
Not at all important (1)	59	57	58	59	59	55	63	56	62
TOTAL Important	12	14	13	12	11	14	15	12	9
TOTAL Not Important	73	72	69	73	75	72	75	72	79
MEAN	2.24	2.37	2.31	2.23	2.16	2.35	2.13	2.30	2.01
DK/NA	2	1	4	1	1	-	1	1	2



CCDT Public Opinion Survey

13. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate.

b) Because some people who receive organ transplants may not really deserve to receive them, since they have abused their own health through behaviors such as smoking, obesity, drug or alcohol use.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	8	12	9	7	8	7	7	11	7
(6)	5	4	5	6	4	1	4	5	4
(5)	6	5	4	6	9	13	6	10	9
(4)	15	15	13	16	16	11	19	19	14
(3)	6	7	4	7	8	11	8	5	9
(2)	8	6	8	8	9	9	14	8	9
Not at all important (1)	50	51	57	48	45	48	42	41	49
TOTAL Important	20	21	17	20	22	21	17	26	20
TOTAL Not Important	64	63	68	63	62	68	64	53	66
MEAN	2.70	2.78	2.50	2.73	2.80	2.61	2.72	3.10	2.65
DK/NA	1	1	1	1	1	-	-	1	*



CCDT Public Opinion Survey

13. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate.

c) Because you think that donating your organs or tissues would make your death a more difficult experience for your loved ones.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	8	11	6	9	5	7	8	5	4
(6)	4	3	4	4	5	6	8	5	3
(5)	7	7	5	7	9	9	7	9	9
(4)	19	20	14	23	17	15	25	18	14
(3)	7	11	4	8	9	9	11	9	7
(2)	7	7	7	6	8	5	5	11	7
Not at all important (1)	47	41	57	42	46	49	34	42	52
TOTAL Important	19	21	15	20	19	22	23	19	16
TOTAL Not Important	61	59	68	56	63	63	50	62	67
MEAN	2.74	2.98	2.39	2.96	2.69	2.76	3.23	2.78	2.46
DK/NA	1	1	2	1	2	-	1	1	3



CCDT Public Opinion Survey

13. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate.

d) Because you don't believe in organ and tissue donation.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	8	10	8	9	8	5	9	8	8
(6)	2	1	3	2	2	5	2	1	1
(5)	4	6	3	3	4	3	3	5	4
(4)	10	8	13	10	9	10	13	9	7
(3)	3	4	3	3	4	4	1	5	4
(2)	5	6	6	4	6	6	7	6	6
Not at all important (1)	65	62	63	65	66	65	65	66	67
TOTAL Important	14	18	13	15	13	14	14	14	13
TOTAL Not Important	74	72	72	73	76	75	73	76	77
MEAN	2.22	2.33	2.26	2.24	2.13	2.16	2.24	2.17	2.06
DK/NA	2	2	1	2	2	2	-	1	3



CCDT Public Opinion Survey

13. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate.

e) Because death is too disturbing to think about.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	8	13	12	8	4	4	7	5	1
(6)	2	2	2	3	2	3	2	2	1
(5)	5	3	6	4	5	4	8	6	5
(4)	13	14	10	15	12	16	9	15	10
(3)	4	6	3	4	5	7	2	8	4
(2)	6	5	6	5	9	7	14	5	11
Not at all important (1)	61	57	60	61	62	58	58	58	67
TOTAL Important	16	17	20	16	11	10	17	13	8
TOTAL Not Important	71	68	68	69	76	73	74	71	81
MEAN	2.35	2.56	2.52	2.40	2.10	2.21	2.29	2.33	1.84
DK/NA	1	*	1	*	1	1	-	1	1



CCDT Public Opinion Survey

13. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate.

f) Because donation might delay or complicate the burial arrangements for your family.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	6	10	5	8	5	6	8	6	3
(6)	4	4	2	6	3	6	3	3	2
(5)	6	6	5	4	7	9	4	8	8
(4)	15	10	12	17	16	17	24	13	15
(3)	7	7	5	7	7	10	10	6	7
(2)	9	10	10	7	11	9	7	12	11
Not at all important (1)	53	52	58	51	51	42	45	51	55
TOTAL Important	16	20	12	17	15	21	15	17	12
TOTAL Not Important	69	69	73	65	69	61	62	69	73
MEAN	2.47	2.58	2.22	2.63	2.44	2.85	2.75	2.46	2.24
DK/NA	1	1	2	*	1	1	-	1	*



CCDT Public Opinion Survey

13. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate.

g) Because YOUR religious or spiritual beliefs do not support organ and tissue donation.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	8	12	5	10	6	9	10	6	5
(6)	3	3	3	3	3	5	3	3	2
(5)	3	1	2	3	3	4	1	3	3
(4)	9	9	8	11	7	6	9	7	6
(3)	2	3	1	2	3	5	3	2	3
(2)	5	7	5	4	7	5	7	7	7
Not at all important (1)	70	64	76	66	71	66	65	70	74
TOTAL Important	13	17	9	16	12	18	13	13	9
TOTAL Not Important	77	74	82	73	81	76	76	80	84
MEAN	2.08	2.34	1.81	2.28	1.97	2.27	2.20	2.00	1.80
DK/NA	1	1	1	1	1	-	1	1	1



CCDT Public Opinion Survey

13. Using a seven point scale where 1 means not at all important and 7 means extremely important and 4 is the mid-point, how important would each of these be for you personally as a reason why you might not donate.

i) Because your FAMILY MEMBERS' religious or spiritual beliefs do not support organ and tissue donation.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Extremely important (7)	8	11	5	10	7	10	8	8	5
(6)	2	2	1	2	2	3	3	3	1
(5)	4	4	4	3	4	4	3	4	4
(4)	10	10	10	11	10	9	16	10	10
(3)	4	5	2	4	5	5	6	4	6
(2)	7	6	7	5	8	4	7	10	7
Not at all important (1)	64	61	68	63	64	66	58	60	68
TOTAL Important	14	17	11	16	12	16	13	14	9
TOTAL Not Important	75	72	77	73	77	75	71	75	81
MEAN	2.19	2.39	2.00	2.31	2.14	2.27	2.39	2.25	1.96
DK/NA	1	1	1	1	*	-	-	1	-



CCDT Public Opinion Survey

14. Please tell me if you think each of the following statements is definitely true, probably true, probably not true or is definitely not true.

a) Anyone at any age can become an organ and tissue donor.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Definitely true	45	37	54	45	41	36	46	46	37
Probably true	30	43	24	29	33	40	28	32	33
Probably not true	13	10	11	14	15	13	19	16	15
Definitely not true	8	5	8	9	7	6	6	5	8
DK/NA	4	5	3	4	4	5	2	1	7



CCDT Public Opinion Survey

14. Please tell me if you think each of the following statements is definitely true, probably true, probably not true or is definitely not true.

b) Doctors are committed to providing high quality care to dying patients and their families.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Definitely true	56	63	57	56	55	50	58	55	55
Probably true	34	31	28	34	39	43	36	39	37
Probably not true	6	4	6	8	5	7	3	4	6
Definitely not true	2	2	5	1	1	-	3	1	1
DK/NA	1	1	4	1	*	-	-	1	*



CCDT Public Opinion Survey

14. Please tell me if you think each of the following statements is definitely true, probably true, probably not true or is definitely not true.

c) Rich people who need organ and tissue transplants are more likely to receive them in this country's hospitals than are poorer people who need transplants.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Definitely true	17	13	21	18	13	14	13	11	15
Probably true	30	36	30	28	31	26	28	36	30
Probably not true	28	29	22	30	31	35	31	31	31
Definitely not true	20	20	22	19	21	25	22	22	19
DK/NA	4	2	5	5	3	-	6	1	6



CCDT Public Opinion Survey

14. Please tell me if you think each of the following statements is definitely true, probably true, probably not true or is definitely not true.

d) The organ and tissue donation process could exploit people of colour, First Nations people, or other minority groups.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Definitely true	6	5	10	4	4	3	6	2	6
Probably true	14	14	12	16	13	16	11	15	12
Probably not true	36	42	28	37	41	49	39	39	40
Definitely not true	41	39	46	39	39	31	42	42	39
DK/NA	3	1	4	4	2	1	2	1	3



CCDT Public Opinion Survey

14. Please tell me if you think each of the following statements is definitely true, probably true, probably not true or is definitely not true.

e) Doctors may prematurely declare a person to be dead in order to get potential organ and tissue donations.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Definitely true	7	10	9	7	4	2	8	3	5
Probably true	13	14	13	13	13	12	16	15	10
Probably not true	35	35	25	38	38	42	37	37	39
Definitely not true	43	41	48	39	43	44	37	44	43
DK/NA	3	1	4	3	2	1	1	-	4



CCDT Public Opinion Survey

15. Where have you seen, heard or read about organ and tissue donation and transplantation?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Television	45	47	51	42	43	45	30	43	46
Newspaper	30	24	30	31	31	41	19	32	31
Driver's license / application	15	18	3	22	15	28	17	10	15
Magazines	15	18	4	18	19	23	16	19	18
Family and friends	13	18	14	12	11	11	23	10	8
Radio	9	5	6	10	12	11	13	14	10
Doctors's office	7	10	7	6	7	7	7	6	8
Internet	4	3	3	5	4	3	4	6	3
Hospital	4	9	2	5	4	1	2	7	4
At work	3	3	1	2	5	6	6	5	4
Books	2	2	1	2	4	5	1	4	4
Pamphlets / flyers / brochures / newsletters	2	3	1	2	4	1	7	3	6
School	2	2	2	2	2	3	5	3	1
Health Card / application / renewal	2	3	4	2	1	-	4	1	-
Presentations	1	-	5	1	*	-	1	-	1
Journals	1	1	*	1	1	-	-	2	1
Motor Vehicle Branch / Ministry of Transport	1	1	-	1	1	-	-	1	2
Non-profit organization	1	1	1	*	2	-	4	2	1
Department/ Ministry of Health	1	*	1	1	1	-	-	1	2
Media / news (general)	1	-	-	1	1	1	1	1	1
Advertisement	1	1	*	1	1	-	1	1	1



CCDT Public Opinion Survey

15. Where have you seen, heard or read about organ and tissue donation and transplantation?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Community events	*	-	1	*	*	-	1	-	-
Organization where you get card (unspecified)	*	1	-	-	-	-	-	-	-
Other	4	4	2	4	5	2	4	5	6
Nowhere	5	3	6	5	5	5	4	5	4
DK/NA	3	2	2	3	3	2	1	5	2



CCDT Public Opinion Survey

16. If you were looking for information about organ and tissue donation, where would you go?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Internet sources	52	41	47	57	51	42	44	52	55
Doctors/health professionals	30	38	29	28	30	26	26	34	29
Hospital	6	9	2	6	8	10	9	6	8
Library	4	2	2	4	6	8	11	3	5
Provincial government	3	4	4	2	3	3	4	2	3
Family/friends	2	1	2	2	2	-	3	2	3
Department/ Ministry of Health	1	3	-	2	1	3	3	1	-
Red cross	1	3	1	1	1	-	4	1	-
Health / blood clinic / pharmacy	1	2	-	1	2	2	3	4	1
Federal government	1	1	2	1	1	-	1	-	2
Newspaper	1	-	3	1	*	-	1	-	-
Driver's license / application	1	-	1	2	1	2	-	1	-
Phonebook / Yellow Pages	1	2	-	*	2	5	3	1	1
Motor Vehicle Branch / Ministry of Transport	1	1	-	*	1	1	-	-	2
School	*	-	1	-	1	1	2	1	1
Organization where you get card (unspecified)	*	1	1	*	1	1	-	1	1
Non-profit organization	*	*	1	*	1	2	2	1	-
Television	*	*	1	-	-	-	-	-	-
Magazines	*	-	*	*	*	-	-	-	*
At work	*	1	*	-	-	-	-	-	-



CCDT Public Opinion Survey

16. If you were looking for information about organ and tissue donation, where would you go?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Journals	*	-	-	*	-	-	-	-	-
Books	*	-	-	*	-	-	-	-	-
Lawyer	*	-	*	-	*	1	-	-	-
Radio	*	-	*	-	-	-	-	-	-
Pamphlets / flyers / brochures / newsletters	*	-	-	-	*	-	1	-	-
Other	3	3	2	4	4	4	3	4	3
Nowhere	1	-	5	*	1	-	1	-	1
DK/NA	7	10	8	6	6	10	2	6	6



CCDT Public Opinion Survey

17. Have you discussed the topic of organ and tissue donation with your close family members, either YOUR views and intentions or THEIR views and intentions?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Yes	58	60	62	57	57	63	50	59	56
No	41	40	38	43	43	37	50	41	44
DK/NA	*	-	-	*	-	-	-	-	-



CCDT Public Opinion Survey

18. How confident are you that your views and intentions with regard to organ and tissue donation after death will be respected?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Very confident	64	71	56	65	68	75	68	73	62
Somewhat confident	27	22	36	25	22	16	17	21	27
Not very confident	4	2	4	3	4	1	4	3	5
Not at all confident	4	4	2	4	4	4	7	2	5
DK/NA	2	1	2	2	2	4	5	1	1



CCDT Public Opinion Survey

19. What do you think happens in a situation where someone has signed an organ donor card or registered an organ and tissue donation registry but his or her family does not wish any organ donation to take place?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
The wishes of the deceased person who has signed the donor card or registered with an organ and tissue donation registry are followed	64	69	74	60	59	56	56	57	62
The wishes of the family or next of kin who oppose the organ donation are followed	29	26	19	33	32	38	33	36	27
Other	1	-	*	-	2	2	1	1	2
DK/NA	7	6	6	8	7	4	10	5	9



CCDT Public Opinion Survey

20. In your opinion, what SHOULD happen?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
The wishes of the deceased person who has signed the donor card or registered with an organ and tissue donation registry are followed	89	93	91	88	88	90	88	89	87
The wishes of the family or next of kin who oppose the organ donation are followed	9	6	7	10	9	8	9	9	8
Other	*	-	*	*	1	1	-	-	1
DK/NA	2	1	2	2	2	1	2	1	3



CCDT Public Opinion Survey

21. If you were in this difficult situation, would you be very, somewhat, not very or not at all likely to do give consent to an organ donation for a loved one who has died in each of the following situations?

a) If he or she HAD SIGNED an organ donor card and had discussed with you that they wanted to donate?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Very likely	88	90	84	88	91	93	87	93	90
Somewhat likely	9	7	12	9	7	5	10	5	8
Not very likely	1	1	2	1	1	2	1	-	1
Not at all likely	2	1	3	1	1	-	1	1	1
DK/NA	*	-	*	-	*	-	-	1	-



CCDT Public Opinion Survey

21. If you were in this difficult situation, would you be very, somewhat, not very or not at all likely to do give consent to an organ donation for a loved one who has died in each of the following situations?

b) If he or she HAD SIGNED an organ donor card but had never discussed their wish to donate with you.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Very likely	71	69	70	69	74	61	75	82	71
Somewhat likely	20	21	20	21	20	32	14	13	23
Not very likely	4	4	4	5	2	3	5	-	3
Not at all likely	5	5	5	5	4	3	5	5	2
DK/NA	1	*	1	1	1	1	2	-	*



CCDT Public Opinion Survey

21. If you were in this difficult situation, would you be very, somewhat, not very or not at all likely to do give consent to an organ donation for a loved one who has died in each of the following situations?

c) If he or she HAD NOT SIGNED an organ donor card but had discussed with you that they wanted to donate.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Very likely	59	56	57	58	61	51	56	69	58
Somewhat likely	26	27	23	26	30	35	33	25	31
Not very likely	7	9	9	8	4	7	7	1	5
Not at all likely	7	7	10	8	4	6	5	4	4
DK/NA	1	1	2	*	1	1	-	1	2



CCDT Public Opinion Survey

21. If you were in this difficult situation, would you be very, somewhat, not very or not at all likely to do give consent to an organ donation for a loved one who has died in each of the following situations?

d) If he or she HAD NOT SIGNED an organ donor card and had not discussed the issue with you.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Very likely	22	22	26	20	22	17	25	26	18
Somewhat likely	27	23	20	30	29	23	17	35	28
Not very likely	18	20	15	17	22	26	18	17	25
Not at all likely	31	35	35	32	27	34	39	22	26
DK/NA	2	-	4	1	1	-	1	-	3



CCDT Public Opinion Survey

22. Sometimes patients in a hospital do not respond to treatment in the intensive care unit and will not survive. When this happens, families may agree with doctors to withdraw life support.

On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable, how acceptable is it to remove life support when a patient's family have agreed with doctors that there is no realistic chance of survival?

		REGION								
		TOTAL	Atl.	Que.	Ont. West	Man.	Sask.	Alb.	B.C.	
TOTAL		1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL		1505	200	353	400	552	100	100	150	202
Very acceptable	(7)	60	61	56	61	61	60	64	64	58
	(6)	10	9	8	11	13	13	9	11	15
	(5)	7	7	7	6	6	6	8	7	5
	(4)	13	12	16	12	12	15	9	7	14
	(3)	1	1	1	1	2	-	2	3	2
	(2)	2	1	2	2	1	4	2	1	1
Not at all acceptable	(1)	6	7	7	6	4	1	5	5	5
TOTAL Acceptable		77	77	71	78	80	79	81	83	78
TOTAL Not Acceptable		9	9	11	9	8	5	9	9	7
MEAN		5.87	5.88	5.67	5.89	5.98	6.02	6.00	6.05	5.92
DK/NA		2	2	3	1	1	1	1	1	1



CCDT Public Opinion Survey

23. Which of the following is your understanding of brain death?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
The patient is dead	29	23	28	32	28	25	33	31	25
The patient is in a coma with no realistic chance of survival	49	53	48	45	54	53	47	52	57
The patient is in a coma with some chance of survival	8	8	13	7	6	6	3	6	6
The patient is in a coma with a good chance of survival with serious brain impairment	10	13	7	12	10	14	10	10	8
DK/NA	4	3	5	4	3	1	7	1	4



CCDT Public Opinion Survey

24. Currently in Canada, tissue donation but not organ donation is possible after cardiac death. Do you think the option of organ donation after cardiac death should be available to Canadians?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Yes	79	83	80	77	82	78	81	83	82
No	8	3	8	9	7	8	7	7	7
Depends	9	10	10	9	9	10	10	9	8
DK/NA	4	4	3	5	2	3	1	1	3



CCDT Public Opinion Survey

25. Prior to this survey, had you heard anything about the topic of donation after cardiac death?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Yes	13	9	13	11	15	10	18	14	16
No	87	91	87	89	85	90	82	85	84
DK/NA	*	-	-	-	*	-	-	1	-



CCDT Public Opinion Survey

26. On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable and 4 is the mid-point, how acceptable are each of the following.

a) After families have agreed to remove life support they may also agree to organ donation after the patient dies a cardiac death.

	REGION									
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.	
TOTAL	1505	116	363	574	451	56	49	149	197	
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202	
Very acceptable	(7)	56	59	56	54	57	49	55	59	60
	(6)	10	8	11	10	10	11	11	8	11
	(5)	8	8	8	8	9	8	9	11	7
	(4)	17	15	17	19	15	25	15	14	13
	(3)	2	1	1	2	2	-	1	4	2
	(2)	1	1	*	1	1	2	1	1	1
Not at all acceptable	(1)	5	6	5	6	5	5	5	4	4
TOTAL Acceptable		74	76	75	72	76	68	75	77	78
TOTAL Not Acceptable		8	8	6	8	8	6	8	9	8
MEAN		5.80	5.82	5.86	5.72	5.84	5.60	5.79	5.85	5.92
DK/NA		1	1	2	1	1	1	2	1	1



CCDT Public Opinion Survey

26. On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable and 4 is the mid-point, how acceptable are each of the following.

b) After it is agreed to withdraw life support and donate organs after death, the patient is moved to an operating room where life supports are withdrawn.

		REGION								
		TOTAL	Atl.	Que.	Ont. West	Man.	Sask.	Alb.	B.C.	
TOTAL		1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL		1505	200	353	400	552	100	100	150	202
Very acceptable	(7)	46	49	50	42	48	43	49	47	50
	(6)	13	12	13	14	13	11	9	17	12
	(5)	11	11	9	12	12	17	11	13	10
	(4)	18	18	18	18	17	19	16	15	17
	(3)	3	1	2	4	3	6	2	3	3
	(2)	2	1	1	2	2	1	2	1	2
Not at all acceptable	(1)	5	4	5	6	4	2	6	2	5
TOTAL Acceptable		71	72	72	68	74	71	69	77	72
TOTAL Not Acceptable		9	7	7	11	8	8	10	6	9
MEAN		5.61	5.72	5.73	5.45	5.68	5.57	5.59	5.79	5.65
DK/NA		2	3	3	2	1	1	4	1	1



CCDT Public Opinion Survey

26. On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable and 4 is the mid-point, how acceptable are each of the following.

c) In order for organ donation to occur under these circumstances the family would leave the dying patient within minutes after death.

		REGION								
		TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL		1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL		1505	200	353	400	552	100	100	150	202
Very acceptable	(7)	37	39	46	32	36	28	35	36	37
	(6)	11	10	10	11	11	9	15	11	11
	(5)	11	8	11	10	13	10	11	17	11
	(4)	22	23	17	25	22	27	23	18	25
	(3)	4	4	3	3	4	6	5	5	4
	(2)	3	4	2	4	3	7	-	4	2
Not at all acceptable	(1)	10	10	7	13	9	12	7	9	9
TOTAL Acceptable		58	57	66	53	60	47	62	64	59
TOTAL Not Acceptable		17	18	12	21	17	25	12	18	15
MEAN		5.04	5.05	5.45	4.77	5.05	4.58	5.25	5.07	5.12
DK/NA		2	2	5	2	1	1	4	-	2



CCDT Public Opinion Survey

26. On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable and 4 is the mid-point, how acceptable are each of the following.

d) The surgery to retrieve the organs might occur five minutes after the heart has stopped.

		REGION								
		TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL		1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL		1505	200	353	400	552	100	100	150	202
Very acceptable	(7)	42	46	48	37	42	36	48	41	43
	(6)	10	9	9	9	13	7	8	12	16
	(5)	12	11	9	12	13	16	10	16	11
	(4)	18	18	15	20	17	24	18	17	16
	(3)	4	4	4	6	3	4	3	2	3
	(2)	3	2	2	5	2	4	2	3	1
Not at all acceptable	(1)	8	8	9	9	7	7	6	6	8
TOTAL Acceptable		64	65	66	59	68	58	66	69	70
TOTAL Not Acceptable		16	14	15	19	12	15	12	11	13
MEAN		5.25	5.38	5.41	5.02	5.39	5.07	5.51	5.41	5.44
DK/NA		2	2	3	2	2	3	4	3	1



CCDT Public Opinion Survey

26. On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable and 4 is the mid-point, how acceptable are each of the following.

e) Medications might be used before death to help maintain a patient's organs even if those medications will not benefit the patient directly and might also have a small chance of causing harm.

		REGION								
		TOTAL	Atl.	Que.	Ont. West	Man.	Sask.	Alb.	B.C.	
TOTAL		1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL		1505	200	353	400	552	100	100	150	202
Very acceptable	(7)	26	28	29	24	28	20	30	29	28
	(6)	10	9	7	11	11	10	9	11	11
	(5)	11	10	10	11	13	16	11	14	12
	(4)	20	24	19	22	18	23	20	19	16
	(3)	6	5	5	6	8	10	11	6	7
	(2)	6	5	7	5	7	8	7	6	7
Not at all acceptable	(1)	18	18	23	19	14	11	8	15	15
TOTAL Acceptable		47	47	45	46	51	46	50	53	52
TOTAL Not Acceptable		30	28	34	30	28	29	26	27	29
MEAN		4.38	4.45	4.24	4.31	4.57	4.38	4.72	4.60	4.57
DK/NA		2	*	2	1	3	2	3	1	4



CCDT Public Opinion Survey

26. On a scale of 1 to 7, where 1 means not at all acceptable and 7 means very acceptable and 4 is the mid-point, how acceptable are each of the following.

f) Technical procedures might be performed before death to help maintain a patient's organs.

	TOTAL	REGION								
		Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.	
TOTAL	1505	116	363	574	451	56	49	149	197	
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202	
Very acceptable	(7)	31	34	41	26	28	27	31	26	29
	(6)	9	6	8	9	12	10	8	11	14
	(5)	13	13	11	12	15	15	15	20	12
	(4)	20	22	15	22	21	22	19	19	23
	(3)	6	5	3	8	7	7	8	7	7
	(2)	4	5	3	4	4	5	4	3	4
Not at all acceptable	(1)	14	12	15	17	11	13	10	13	9
TOTAL Acceptable		53	53	61	47	54	52	54	56	54
TOTAL Not Acceptable		24	22	21	29	22	25	23	22	20
MEAN		4.69	4.77	5.01	4.42	4.76	4.60	4.78	4.68	4.86
DK/NA		3	3	3	2	3	1	4	2	3



CCDT Public Opinion Survey

27a. If Canadian hospitals started offering organ donation after cardiac death, in other words after death that follows the withdrawal of life support as we have just described, how comfortable would you be with that decision?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Very comfortable	42	46	42	38	45	37	48	45	46
Somewhat comfortable	43	42	39	46	43	47	36	42	44
Not very comfortable	8	6	8	9	7	11	9	7	6
Not at all comfortable	6	6	7	7	5	5	4	6	4
DK/NA	1	-	3	1	*	-	2	-	*



CCDT Public Opinion Survey

27b. And if Canadian hospitals decided NOT to allow organ donation after cardiac death, how comfortable would you be with that decision?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Very comfortable	8	9	11	8	7	9	11	5	6
Somewhat comfortable	34	34	29	36	37	40	30	41	35
Not very comfortable	32	34	26	35	33	28	35	30	38
Not at all comfortable	23	23	28	20	22	23	21	24	21
DK/NA	2	-	6	1	1	-	4	-	1



CCDT Public Opinion Survey

28. Are you very, somewhat, not very, or not at all confident about each of the following?

a) That strict standards will be put in place to guide all practices just described and ensure ethical conduct regarding donation after cardiac death.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Very confident	40	45	41	41	38	43	45	38	36
Somewhat confident	46	47	47	44	49	46	40	51	51
Not very confident	8	5	6	8	8	9	8	8	9
Not at all confident	4	4	4	5	3	1	5	3	4
DK/NA	1	-	2	1	1	2	2	-	1



CCDT Public Opinion Survey

28. Are you very, somewhat, not very, or not at all confident about each of the following?
b) That doctors and health care staff will follow these strict ethical standards or practices.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Very confident	45	49	46	45	44	41	56	45	40
Somewhat confident	46	43	45	47	48	54	36	48	49
Not very confident	5	5	3	5	5	5	2	4	5
Not at all confident	3	2	5	2	3	1	3	2	5
DK/NA	1	1	1	1	1	-	3	1	*



CCDT Public Opinion Survey

28. Are you very, somewhat, not very, or not at all confident about each of the following?

c) That doctors and health care staff will be motivated by the best interests of the dying patient and not the possibility of organ donation.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Very confident	40	41	38	41	42	41	50	47	36
Somewhat confident	46	46	48	45	47	49	40	45	49
Not very confident	9	9	9	10	7	9	3	6	7
Not at all confident	4	3	4	4	4	1	4	2	6
DK/NA	1	2	2	1	1	-	3	-	2



CCDT Public Opinion Survey

28. Are you very, somewhat, not very, or not at all confident about each of the following?

e) That the process of providing optimal end of life care will not be affected by the organ and tissue donation process.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Very confident	37	38	35	36	39	31	54	41	37
Somewhat confident	49	48	48	48	50	60	35	49	53
Not very confident	9	8	10	12	6	8	4	7	5
Not at all confident	3	3	3	3	3	1	4	3	4
DK/NA	2	3	4	1	1	1	2	-	2



CCDT Public Opinion Survey

28. Are you very, somewhat, not very, or not at all confident about each of the following?

f) That a patient's dignity will be recognized at the time of death when organ and tissue donation follows.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Very confident	48	49	47	47	50	39	62	54	48
Somewhat confident	41	41	43	39	41	56	29	39	42
Not very confident	6	7	4	7	5	6	3	4	6
Not at all confident	4	2	4	5	2	-	2	3	3
DK/NA	1	1	2	2	1	-	4	1	*



CCDT Public Opinion Survey

28. Are you very, somewhat, not very, or not at all confident about each of the following?
g) That an organ donor could still have a normal funeral service in a normal time frame.

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Very confident	60	61	54	62	63	57	69	67	61
Somewhat confident	33	32	39	30	32	37	25	28	35
Not very confident	3	3	3	4	3	4	2	4	2
Not at all confident	2	3	1	2	1	1	1	1	1
DK/NA	2	*	2	3	1	1	2	1	1



CCDT Public Opinion Survey

29. Which of the following best describes your own present employment status?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Working full-time	52	49	51	53	53	51	47	58	52
Working part-time	9	9	8	10	10	10	6	10	10
Unemployed or looking for a job	3	5	4	3	2	1	5	1	3
Stay at home full-time	6	7	7	4	6	7	4	9	5
Student	5	4	5	5	6	6	10	5	5
Retired	22	24	22	22	21	24	22	18	22
Disability pension	1	1	2	1	1	-	5	1	2
DK/NA	1	1	2	1	1	1	2	-	1



CCDT Public Opinion Survey

30. What is the highest level of education that you have reached?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Some elementary (grades 1-6)	1	1	1	*	*	1	1	-	-
Completed elementary (grades 7 or 8)	2	3	4	1	1	1	3	-	2
Some high school (grades 9-11)	9	13	14	6	6	8	3	8	5
Completed high school (grades 12 or 13)	16	17	20	14	13	13	14	13	13
Some community college, vocational, trade school	9	3	11	10	8	3	7	9	10
Completed community college, vocational, trade school	23	25	18	25	24	25	28	28	19
Some university	11	13	3	13	15	13	21	14	15
Completed university (Bachelor's Degree)	16	13	19	12	20	24	13	17	23
Post graduate/professional school (Master's Degree, Ph.D., etc.)	13	10	7	17	12	9	9	12	14
DK/NA	1	1	2	1	*	1	1	-	-



CCDT Public Opinion Survey

31. In what year were you born (age group)?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
18-24	10	10	12	8	9	11	11	10	8
25-34	20	22	20	19	21	20	22	19	24
35-44	20	21	20	21	19	18	25	18	19
45-54	19	16	17	18	20	15	16	26	19
55-64	15	17	15	15	14	16	9	14	14
65+	15	13	14	16	15	19	16	12	15
DK/NA	2	1	3	1	1	1	1	1	1



CCDT Public Opinion Survey

32. Are you...?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Married or living as a couple	60	58	62	60	61	56	47	61	66
widowed	7	4	7	8	7	9	10	5	8
Separated	3	5	3	3	4	3	5	4	4
Divorced	6	8	4	6	8	5	5	13	5
Single	21	24	21	22	20	25	34	16	17
DK/NA	2	2	3	1	*	1	-	1	-



CCDT Public Opinion Survey

33. Are there any children under the age of 18 living in your household?

	REGION								
	TOTAL	Atl.	Que.	Ont. West	Man.	Sask.	Alb.	B.C.	
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Yes	34	38	32	36	34	31	26	35	35
No	64	61	66	63	66	67	74	64	65
DK/NA	1	1	2	2	*	2	-	1	-



CCDT Public Opinion Survey

34. To which ethnic or cultural group do you and your ancestors belong?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Canadian	33	25	58	26	25	16	31	24	28
British (English, Irish, Scottish, Welsh)	27	42	1	34	34	37	21	33	38
French (Quebécois, Franco Ontarian, Franco Manitoban, Acadian)	13	7	37	6	4	3	6	5	4
Other European (Russian, Scandinavian, Greek, etc.)	6	3	1	8	9	7	8	12	8
German	5	3	1	3	11	8	17	12	9
Caucasian / white / Anglo-Saxon	3	7	-	3	5	2	3	7	4
Aboriginal (North American Indian, Metis, Inuit, Dene, Mohawk, Cree, etc.)	3	3	1	2	5	6	6	5	6
Ukrainian	2	1	-	1	5	11	6	6	3
Italian	2	1	1	3	2	1	-	3	2
Dutch	2	1	-	1	4	5	3	5	3
Polish	2	-	*	2	3	6	3	3	1
Central Asian/Middle Eastern or North African	1	-	1	2	1	1	-	1	1
South Asian (East Indian, Sri Lankan, Pakistani)	1	-	-	2	1	-	1	1	2
Chinese	1	1	*	1	1	-	-	2	2
West Indian (Caribbean)	1	-	1	2	*	1	-	-	*
South or Latin American	1	-	*	1	1	-	-	1	2
Sub-Saharan African (Black)	1	*	1	1	*	-	-	-	1



CCDT Public Opinion Survey

34. To which ethnic or cultural group do you and your ancestors belong?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Southeast Asian (Vietnamese, Cambodian, Malaysian, Filipino)	*	-	-	1	1	3	-	-	1
Mennonite	*	-	-	*	1	4	2	1	-
Portuguese	*	-	1	1	-	-	-	-	-
Jewish	*	-	-	1	*	1	-	1	-
American	*	*	-	*	1	-	1	1	1
Other East Asian (ex. Japanese)	*	-	-	1	*	-	-	-	1
Other	1	1	1	1	1	1	5	1	1
DK/NA	8	16	4	11	5	10	7	3	4



CCDT Public Opinion Survey

35. What is your religious affiliation, if any?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Catholic (Roman/ Ukrainian)	37	38	80	25	18	19	21	18	17
United Church	8	9	-	10	10	18	12	12	7
Anglican	7	14	1	9	8	10	7	8	8
Protestant	3	2	1	3	3	2	2	6	2
Orthodox (Christian, Eastern Orthodox)	2	1	1	3	4	2	1	5	3
Baptist	2	9	-	2	2	2	-	4	*
Presbyterian	2	2	-	3	2	1	-	1	4
Muslim	2	-	1	3	1	-	1	1	-
Christian (unspecified)	1	1	-	2	2	2	3	3	2
Lutheran	1	1	*	1	3	3	6	2	3
Pentecostal	1	2	-	2	2	2	1	1	2
Fundamentalist/ Evangelical	1	-	-	1	2	2	2	3	*
Buddhist	1	-	1	*	1	-	2	-	2
Mennonite	*	-	-	*	1	6	2	-	-
Jewish	*	-	-	1	1	2	-	1	-
Jehovah's Witnesses	*	1	*	*	1	-	1	1	1
Mormon	*	1	-	-	1	-	1	1	1
Hindu	*	-	*	1	-	-	-	-	-
None/Atheist/Agnostic	24	14	12	26	35	25	31	31	41
Other	2	2	1	3	4	1	4	2	6
DK/NA	3	2	2	4	2	3	2	1	2



CCDT Public Opinion Survey

36. Were you born in Canada or in another country?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
Canada	84	95	91	76	86	91	96	88	81
Another country	15	4	7	24	13	8	4	12	19
DK/NA	1	1	2	1	*	1	-	-	-



CCDT Public Opinion Survey

37. Into which of the following categories would you put the total annual income in 2004 of all the members of your household, including yourself, before taxes and deductions?

	REGION								
	TOTAL	Atl.	Que.	Ont.	West	Man.	Sask.	Alb.	B.C.
TOTAL	1505	116	363	574	451	56	49	149	197
UNWEIGHTED TOTAL	1505	200	353	400	552	100	100	150	202
\$10,000 or less	3	9	3	2	3	6	7	3	1
\$10,001 to \$20,000	8	10	10	7	7	4	13	5	8
\$20,001 to \$30,000	9	16	8	8	11	11	10	14	9
\$30,001 to \$40,000	10	14	12	8	8	11	11	6	7
\$40,001 to \$50,000	10	8	12	10	10	10	11	9	10
\$50,001 to \$60,000	9	12	8	6	11	9	12	12	9
\$60,001 to \$70,000	6	6	3	5	8	11	5	7	9
\$70,001 to \$80,000	6	6	3	7	7	6	5	7	8
\$80,001 to \$90,000	4	3	3	4	5	7	4	5	4
\$90,001 to \$100,000	4	2	3	6	3	2	1	3	4
More than \$100,000	14	8	9	19	15	13	10	16	15
DK/NA	16	8	25	16	13	10	11	12	15