

NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

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Title

Experiences of Canadians without a primary care clinician

Priority 1 (Research Category)

Survey research or cross-sectional study

Presenters

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Abstract

Context- Primary care is the bedrock of an effective healthcare system. More than one-in-five people in Canada have no access to primary care yet little is known about their experiences and preferences. Objective- To characterize the healthcare-seeking behaviours and preferences for system reform of Canadians without a primary care clinician. Study Design and Analysis- National bilingual online survey distributed in Fall 2022. Setting- Canada. Population Studied- Adults 18 years and over in Canada. Outcome Measures- Sociodemographic characteristics of people without a family physician or nurse practitioner (primary care clinician), related healthcare seeking behaviours, importance of primary care attributes, and preferences towards reorganizing primary care. Results- 22.0% of respondents reported not having a primary care clinician. This was significantly more likely for those who identified as: men, younger than 65, residents of British Columbia, Quebec, or Atlantic Canada, French-speakers, college- or trade school- educated, making \$30,000-\$69,999, or having poor or fair health. 83.1% of respondents without a primary care clinician said they were looking for one. Men and those without private health benefits were significantly less likely to be looking. Significantly more respondents without a primary care clinician, versus those with a clinician, reported visiting a walk-in clinic in the last year (71.7% vs. 41.2%) and they were significantly less likely to be satisfied (40.5% vs. 55.3%). Respondents without a primary care clinician were more open to a variety of system reforms or ways of delivering care that would expand team- and neighbourhood-based care. Conclusion- Canadians without a primary care clinician differ from their attached peers by sociodemographic characteristics, walk-in clinic utilization

patterns, and preferences for system reform. Their experiences should be considered when designing primary care reforms.

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