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CANADA DENTAL BENEFIT BASELINE SURVEY

Final Report

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Canada 

Canada Dental Benefit Baseline Survey

Final Report

Prepared for: Health Canada
Supplier: The Strategic Counsel
March 2023

This public opinion research report presents the results of an online survey conducted by The Strategic Counsel on behalf of Health Canada. The research study was conducted with 2,200 parents of children under 12 with a household income of less than \$90,000 between March 3 and March 30, 2023.

Cette publication est aussi disponible en français sous le titre: **Enquête de référence sur la Prestation dentaire canadienne – Sommaire**

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Table of Contents

I.	Executive Summary	1
A.	Background	2
B.	Research Objectives	2
1.	Purpose.....	2
2.	How the Research Will Be Used	2
3.	Objectives and Key Research Questions.....	3
C.	Methodology in Brief	3
D.	Total Contract Value	4
E.	Key Findings	4
F.	Conclusions and Recommendations	8
II.	Detailed Findings	11
A.	Attitudes Towards Dental Care	12
B.	Access to and Use of Dental Services.....	16
C.	Barriers to Accessing Dental Care	28
D.	Views on the Canada Dental Benefit	33
1.	Awareness of the Canada Dental Benefit	33
2.	Attitudes Towards the Canada Dental Benefit	38
3.	Motivators and Detractors to Applying for the Canada Dental Benefit	39
E.	Recall and Impact of Advertising on the Canada Dental Benefit.....	44
1.	Unaided Advertising Recall	44
2.	Unaided Recall: Sources	45
3.	Unaided Recall: Message Takeaway	47
4.	Aided Advertising Recall	49
5.	Aided Recall: Sources.....	52
6.	Aided Recall: Message Takeaway	53
7.	Aided Recall: Assessment of Ads	55
8.	Aided Recall: Impact of the Ads.....	58
F.	Profile of Respondents.....	59
1.	Demographic Profile in Brief.....	59
III.	Detailed Methodology.....	69
A.	Sample Design	70
Additional Information on Online Panel	72	
B.	Questionnaire Design.....	72
C.	Pre-test.....	72
D.	Fieldwork and Length of Survey.....	73
E.	Final Dispositions	73
F.	Study Limitations.....	74
IV.	Appendix	75
A.	Online Panel Questionnaire (English and French)	76
B.	Recruit by Telephone to Online Screener (English and French)	108

LIST OF TABLES

<u>TABLE 1. LEVEL OF CONCERN REGARDING HEALTH AND CHILDCARE-RELATED ISSUES IN CANADA</u>
<u>TABLE 2. LEVEL OF CONCERN REGARDING HEALTH AND CHILDCARE-RELATED ISSUES IN CANADA</u>
<u>TABLE 3. PARENT – IMPORTANCE OF VISITING A DENTAL OFFICE REGULARLY</u>
<u>TABLE 4. CHILDREN – IMPORTANCE OF VISITING A DENTAL OFFICE REGULARLY</u>
<u>TABLE 5. VIEWS ON DENTAL CARE FOR ADULTS AND CHILDREN</u>
<u>TABLE 6. ACCESS TO DENTAL SERVICES</u>
<u>TABLE 7. PARENT – LAST VISIT TO A DENTAL OFFICE OR ORAL HEALTH PROFESSIONAL</u>
<u>TABLE 8. PARENT – FREQUENCY OF VISITING A DENTAL OFFICE OR ORAL HEALTH PROFESSIONAL</u>
<u>TABLE 9. PARENT – REASONS FOR VISITING THE DENTIST</u>
<u>TABLE 10. CHILDREN – LAST VISIT TO A DENTAL OFFICE OR ORAL HEALTH PROFESSIONAL</u>
<u>TABLE 11. SCHEDULING DENTAL APPOINTMENTS FOR CHILD/CHILDREN</u>
<u>TABLE 12. PAYING FOR DENTAL SERVICES FOR CHILD/CHILDREN</u>
<u>TABLE 13. CHILDREN – FREQUENCY OF VISITING A DENTAL OFFICE OR ORAL HEALTH PROFESSIONAL</u>
<u>TABLE 14. CHILDREN – REASONS FOR VISITING THE DENTIST</u>
<u>TABLE 15. BARRIERS TO ACCESSING DENTAL CARE FOR ONESELF</u>
<u>TABLE 16. BARRIERS TO ACCESSING DENTAL CARE FOR ONE’S CHILD/CHILDREN</u>
<u>TABLE 17. AWARENESS OF THE CANADA DENTAL BENEFIT</u>
<u>TABLE 18. SOURCE(S) OF AWARENESS</u>
<u>TABLE 19. SEARCHED FOR INFORMATION ON THE CANADA DENTAL BENEFIT IN LAST 3 MONTHS</u>
<u>TABLE 20. WHAT IS KNOWN ABOUT THE CANADA DENTAL BENEFIT</u>
<u>TABLE 21. SUPPORT/OPOSE THE CANADA DENTAL BENEFIT</u>
<u>TABLE 22. APPLIED/PLANNING TO APPLY FOR THE CANADA DENTAL BENEFIT</u>
<u>TABLE 23. MOTIVATORS TO APPLYING FOR THE CANADA DENTAL BENEFIT</u>
<u>TABLE 24. MOTIVATORS TO RE-APPLYING FOR THE CANADA DENTAL BENEFIT</u>
<u>TABLE 25. BARRIERS TO APPLYING FOR THE CANADA DENTAL BENEFIT</u>
<u>TABLE 26. UNAIDED RECALL OF ADVERTISING ABOUT THE CANADA DENTAL BENEFIT</u>
<u>TABLE 27. UNAIDED RECALL: SOURCES</u>
<u>TABLE 28. UNAIDED RECALL: MESSAGE TAKEAWAY</u>
<u>TABLE 29. AIDED RECALL OF ADVERTISING ABOUT THE CANADA DENTAL BENEFIT</u>
<u>TABLE 30. AIDED RECALL: SOURCES</u>
<u>TABLE 31. AIDED RECALL: MESSAGE TAKEAWAY</u>
<u>TABLE 32. PERCEIVED EFFECTIVENESS OF THE ADS</u>
<u>TABLE 33. ACTIONS TAKEN AS A RESULT OF EXPOSURE TO THE ADS IN MARKET</u>
<u>TABLE 34. HOUSEHOLD INCOME</u>
<u>TABLE 35. PROVINCE OF RESIDENCE</u>
<u>TABLE 36. GENDER</u>
<u>TABLE 37. AGE OF PARENT</u>
<u>TABLE 38. MARITAL STATUS</u>
<u>TABLE 39. AGE OF CHILDREN IN HOUSEHOLD</u>
<u>TABLE 40. AGE OF CHILDREN IN HOUSEHOLD</u>
<u>TABLE 41. NUMBER OF PEOPLE IN HOUSEHOLD</u>
<u>TABLE 42. EDUCATION</u>
<u>TABLE 43. EMPLOYMENT STATUS</u>
<u>TABLE 44. ETHNICITY</u>
<u>TABLE 45. LANGUAGE FIRST LEARNED AT HOME AND STILL UNDERSTAND</u>
<u>TABLE 46. LANGUAGE MOST OFTEN SPOKEN AT HOME</u>
<u>TABLE 47. WEIGHTING SCHEME OF BASE SAMPLE</u>
<u>TABLE 48. ONLINE DISPOSITIONS</u>
<u>TABLE 49. TELEPHONE RECRUIT TO ONLINE CALL DISPOSITIONS</u>

I. Executive Summary

Executive Summary

A. Background

As part of the Government of Canada's plan to improve dental care for Canadians, the federal government passed legislation in November 2022 for the implementation of a new, interim Canada Dental Benefit. This benefit is intended to help lower dental costs for eligible families earning less than \$90,000 per year, allowing children under 12 who do not have access to private dental care insurance to get the dental care they need while the Government of Canada develops a comprehensive, long-term, national dental care program.

Applications to the Canada Dental Benefit opened on December 1, 2022. As part of the first stage, parents and guardians can apply if the child receiving dental care is under 12 years old and does not have access to private dental insurance. For each eligible child, a tax-free payment of \$260, \$390, or \$650 is available, depending on the family's adjusted net income. For this benefit, one can apply for a maximum of two payments for each eligible child. The first benefit period is for children under 12 years old as of December 1, 2022 who receive dental care between October 1, 2022 and June 30, 2023.

B. Research Objectives

1. Purpose

To support the promotion of this benefit, Health Canada is committed to running an advertising campaign targeting parents of children under 12 within the income threshold for this benefit. To evaluate the effectiveness and reach of marketing and advertising activities regarding the Canada Dental Benefit, more information is needed to understand current levels of awareness among target beneficiaries, their intended uptake of the program, and what barriers might exist to accessing the benefit and dental care. Additionally, Health Canada is utilizing a subset of the Advertising Campaign Evaluation Tool (ACET) to evaluate and refine communications used to advertise the benefit in order to improve future efforts.

In 2002, following a Cabinet directive identifying the need for a standard advertising evaluation approach across departments the ACET was created. The main objectives were to bring rigor and consistency to ad campaign evaluation and to develop norms for key ad metrics against which campaigns could be evaluated. While ACET is not a requirement for advertising campaigns with less than \$1 million in media buy, a post-campaign evaluation is desired to inform the next phases of this initiative.

2. How the Research Will Be Used

The research findings will help to inform and refine future communications, advertising, and marketing activities on the Canada Dental Benefit to ensure that they better reach and resonate with the key target audience. Furthermore, the findings will inform the development of messaging for the comprehensive, long-term, national dental care program. The research will also assist in identifying opportunities to improve the uptake of the benefit and the barriers that exist to accessing the benefit and dental care in order to ensure these can be addressed in communications.

3. Objectives and Key Research Questions

The primary objective of this research is to establish a baseline level of awareness and assess the barriers to access among those eligible to receive the Canada Dental Benefit. More specifically, this research study was designed to address the following:

- Determine the level of awareness of eligibility for the Canada Dental Benefit among parents of children under 12 with a household income of less than \$90,000;
- Identify the barriers to accessing the Canada Dental Benefit and dental care;
- Measure levels of awareness and the impact of existing communications strategies using the ACET framework; and
- Identify any opportunities for improving uptake of the Canada Dental Benefit.

C. Methodology in Brief

A 15-minute online survey was administered to 2,200 adult Canadians, aged 18 and older who met the eligibility criteria for the interim Canada Dental Benefit. Eligible respondents included only those with at least one child in the household under 12 years of age and whose household income was under \$90,000 per year.

Of the total sample of n=2,200 Canadian parents who completed the survey, n=2,000 comprised the base sample. A strict quota was set on this portion of the sample to ensure that approximately 70% of respondents did not have access to private dental care insurance (another requirement to be eligible for the Canada Dental Benefit). The remainder (30%) comprised those who did have dental insurance. The sample was structured in this manner to allow for comparisons in the attitudes and behaviours between those with and without access to insurance coverage.

Regional quotas were also applied to the base sample, and monitoring was undertaken while the survey was in field in order to obtain broad representation from all regions of Canada. A disproportionate sampling plan was employed, including oversampling in Atlantic Canada, the Prairies, and British Columbia to ensure sufficiently robust samples in these areas to be able to analyze the results within and between regions. A weighting scheme was applied in order to bring the final sample back into line with the distribution of the population in Canada, by region¹. Given the highly targeted audience for this survey no additional quotas were set for gender or age.

Two additional 'sample boosts' of n=100 each were undertaken to increase representation from ethnic groups as well as those residing in rural and remote areas of Canada. This approach was taken based on the assumption that the nationwide online panel used to deploy the base sample may not yield sufficient completes to provide sufficient insight into these two segments of the population.

This was a non-probability sample primarily relying on a commercial online panel. As such, a margin of error cannot be applied to the final sample and no inferences can be made to the broader target population. The fieldwork was conducted between March 3rd and 30th, 2023.

¹ The weighting scheme was developed to align the data regionally with Census 2021 data from Statistics Canada.

D. Total Contract Value

The contract value was \$198,398.62 including HST.

E. Key Findings

All respondents report **high levels of concern about accessing affordable dental care** in Canada and being able to obtain the services of a dentist or oral health professional.

- Nine in ten respondents (91%) are concerned (61% *very concerned*) about the affordability of dental care in Canada. Levels of concern are slightly higher among those without access to private dental insurance – 93% are concerned and 65% are *very concerned* – compared to those who do have insurance coverage – 88% are concerned overall and 52% are *very concerned*.
- Concern about accessing the services of a dentist or oral health care professional is also high (81% overall; 46% *very concerned*), although slightly lower than the level of concern about affordability of dental care in Canada. Again, those without access to dental insurance express higher levels of concern, compared to those without (87% overall and 52% *very concerned* vs. 70% overall and 32% *very concerned*, respectively).
- By comparison, 84% of respondents are *somewhat* or *very concerned* about accessing a family doctor, 83% are concerned about accessing mental health services and about the affordability of childcare, and 80% are concerned about accessing childcare services.

In terms of attitudes towards dental care, there is a **high degree of importance placed on regular visits to a dental office** – 94% say it's important for themselves; 97% say it's important for their children.

- Financial assistance to ensure families have regular access to dental care is viewed as vital. Among those without access to private dental insurance well over four in five say that if they had some extra money they would schedule more regular dental appointments both for themselves (88%) and for their children (86%). This compares with about two thirds or slightly more among those with dental insurance who say the same – 70% of this group would be more inclined to schedule regular dental appointments for themselves and 65% would do so for their children.

There are **marked differences between those with and without access to private dental insurance regarding the frequency of and reasons for visits to a dental office** for themselves and their children.

Those with insurance coverage are more likely to have access to dental services for the whole family and to visit the dentist on a more regular basis compared to those without coverage.

- About half of all respondents (51%) say they have access to dental services for the whole family, although this is lower for those without insurance (45%) compared to those who have dental coverage (63%). About one in five (19%) currently have access only for their children, and this proportion is higher for those without access to insurance (21%) versus those with dental coverage (13%). This result suggests that families without dental insurance may be prioritizing dental care for the children over the adults in their family. Just slightly fewer than one in five (17%) say they do not have access to any dental services at all, and this is higher among those without private dental coverage (21%) compared to those with coverage (9%). Just over one in ten (13%) report

having access to an oral health professional or dentist only for themselves, and there was no difference based on insurance coverage with respect to this finding.

- Respondents were asked about their patterns regarding dental care and visits to a dental office both for themselves and their children. In terms of their own dental care:
 - Parents with dental coverage are more likely to say they have visited a dental office in the last 6 to 12 months compared to those without private dental insurance (70% vs. 57%).
 - Those with dental insurance are more likely to report visiting the dentist yearly or more often relative to those who do not have access to private dental insurance (77% vs. 65%). 24% of those without insurance say they visit only when required or when there is an emergency vs. 15% of those with insurance, and this is higher among those with lower household incomes (less than \$40,000 annually).
 - Most visit the dentist for routine cleanings – although this is the case more so for those with insurance than without (86% vs. 74%). Other reasons given for going to the dentist included for preventive care (similar among those with/without insurance – 59%/60%) and for urgent dental care (identified more frequently as a reason for visiting by those without coverage than those with (61% vs. 47%).
- With respect to dental care for their child or children:
 - Roughly similar proportions of those with/without insurance have taken their child to the dentist within the last 6 months to a year (71% vs. 65%, respectively). Those with insurance (91%) are more likely than those without (84%) to say they take their child to the dentist at least yearly or more frequently.
 - In line with the approach they take for themselves, about two-thirds or more of respondents, regardless of access to private dental insurance, say they take their children in for routine cleanings and preventive care. Notably, a higher proportion of those without insurance acknowledged taking their child to the dentist for urgent care (55%) compared to those with insurance (44%).
- In terms of scheduling appointments, women are more likely to say they make the dental appointments for their children all the time (76%), compared to men (51%). And, in terms of paying for dental services for their child or children, many respondents indicate they pay either by cash or debit (47%) or via a credit card (44%).
 - Notably, just over half (54%) of those without access to insurance pay cash, compared to just under one third (31%) of those with insurance. Another 46% of those without private insurance coverage pay using a credit card, 28% go to a free clinic, and 24% say their dentist office provides flexible payment options through a payment plan. By contrast, over half (59%) of those with insurance coverage indicate their costs are covered.

There are a **wide range of issues which act as barriers to accessing dental services, impacting both adults and children**. Foremost among these is the cost of the service, followed by a lack of insurance, and the cost of getting to the dentist or oral health professional. While there are clear differences in the frequency with which each is cited based on access to private dental insurance coverage, the differences are starker when it comes to barriers specifically preventing parents from taking their children to an oral health professional.

- Across the board, the cost of accessing dental services for children is the most frequently mentioned barrier, both by those without insurance (43%) as well as those with dental coverage (36%). Among those without insurance coverage, another 34% mention lack of insurance as a barrier (vs. 16% of those with coverage); 29% mention the cost of the service because they have more than one child requiring dental care (vs. 19%); and 29% mention the cost of getting to the dentist (vs. 15%). Other barriers are also cited such as lack of access to a dentist, inconvenient location or lack of time, etc., but these were mentioned by one in five or fewer respondents (regardless of insurance coverage).

Many have heard something about the Canada Dental Benefit (64% of all respondents), although relatively few are well informed about it (22%). Over one-third (36%) have not heard anything about the benefit. Awareness of the benefit appears to have been generated mainly through coverage in the news, although one quarter to one third also identified social media and friends or family as a source of information. The announcement of the benefit generated significant interest among the target audience, with 54% of those without insurance (and aware of the benefit) reporting having looked for information about it in the last 3 months. Interest was also reasonably high among those with access to private dental insurance (40%).

- There was some top-of-mind awareness of the key features of the program, mainly that families with children under 12 and low income families were eligible. The fact that the benefit is directed at lower income households is somewhat more well known among those with insurance than without (25% vs. 15% cited this in response to an open-ended question asking what they knew about the Canada Dental Benefit). Interestingly, those with dental insurance are also more likely to be aware that the program is targeted to those without dental insurance (16% vs. 5%).

There are **high levels of support for the Canada Dental Benefit (CDB), across the board – overall 87% of respondents support it** and this does not vary significantly between those with/without insurance coverage. Almost two thirds (64%) strongly support the introduction of the interim CDB.

- Just under one quarter (23%) of those with no access to insurance say they have applied for the benefit and another 55% say they are planning to apply. Of note, 43% of those with insurance have also indicated they have either applied (9%) or are planning to (35%).
- A key motivator for those without insurance to apply for the program is the health of their family and children (51%). Other motivators are mentioned but to a lesser extent among the group without insurance, including: the amount of the benefit paid (35%), easy access to information about the benefit (33%), having more than one child (32%), an easy application process (31%) and urgent dental needs for children (30%). Notably 26% in this group also mention that the program had been recommended by their child's healthcare provider, compared to 14% in the group who have dental insurance.
- The main barriers to applying for the program, among those without insurance are varied and include: their child doesn't have urgent dental care needs (28%), believing they don't meet the eligibility criteria (27%), and that it still costs too much to get dental care (27%). Another 18% said the eligibility criteria are confusing or complicated.

The Government of Canada's advertising campaign about the Canada Dental Benefit appears to have broken through, generating good levels of unaided and aided recall in a fairly crowded media marketplace. **Just over one third of all respondents (35%) have seen, heard, or read something about the Canada Dental Benefit in the last 3 months** (unaided recall), while just over one in five (22%) recall seeing, hearing or reading the ads, after being exposed to some examples of the advertising campaign in the survey (aided recall).

- **Unaided recall** is higher among those with access to private dental insurance (41%) compared to those without (32%).
- With respect to the sources for unaided recall, the top 5 included: having seen the ad on an internet website (29%), on Facebook (25%), on TV (also at 25%), while undertaking an Internet search (23%), and on YouTube (20%). Radio was mentioned by another 14%, followed by Instagram (11%), a poster in a dental office (also at 11%), Twitter (10%), streaming services (9%), on a mobile app (8%), and while taking public transit (7%). Other sources were mentioned, but only by 6% or less for each.
- While there is some variability in the sources cited for unaided recall by gender, educational status, household income, language and region, as well as by those with/without insurance, the top 5 sources cited are generally the same across all demographic groups and sub-groups of the target audience.
- Across all respondents, **aided recall** at 22% is 18 points lower than unaided recall (35%). As with unaided recall, those who have insurance coverage are also more likely to recall the ads on an aided basis compared to those without coverage (28% vs. 20%).
- The top 5 sources mentioned in terms of aided recall are identical to what was mentioned for unaided recall, although YouTube was the most frequently mentioned (42%), followed by TV (33%), Facebook (30%), an internet website (24%), and an Internet search (17%).
- When asked about the main point that the ads were trying to communicate, responses coalesced around the purpose of the benefit – dental or oral health care (mentioned by 33%) and dental care for children (31%). Another 19% mentioned the focus of the program or benefit on lower income families.
- Assessments of the ads are highly positive across the board – they are viewed as relaying information about an important topic, prompting respondents to think that childhood dental care is important, providing new information, catching respondents' attention, and being relevant and clear. About three quarters (74%) of those who recall seeing the ads agree that they prompted them or made them more likely to apply for the benefit (82% among those without access to private dental insurance vs. 61% for those with insurance coverage). By a fairly wide margin those without access to private dental insurance generally rate the perceived effectiveness of the ads more highly compared to those with access to insurance.
- Regarding the impact of the ads, many of those without access to private dental insurance took a range of actions in response to having seen, read or heard them, including thinking more about dental care for their children (44%), sharing the information with someone else (36%), visiting the dedicated website (35%), as well as thinking more about dental care for themselves (34%). Another 28% took their child/children to get dental care using the benefit payment, 27% submitted an application, and 26% booked an appointment at the dentist for the child/children to get dental services.

F. Conclusions and Recommendations

The study results indicate that the interim Canada Dental Benefit is addressing a clear need among those without dental insurance who also meet the other requirements in order to be eligible for the benefit, such as household income and age of children. Affordability is a key issue, particularly for those with more than one child. While many parents, regardless of their ability to access private dental insurance, are taking their children to the dentist on a regular basis (e.g., at least yearly), those without insurance are more likely to cite a lack of coverage and the cost of dental services for multiple children who need dental care as barriers. And, although many parents report taking their children to the dentist for routine cleanings and preventive care, a significantly higher proportion of those without insurance visit the dentist's office to obtain urgent care for their child/children or schedule appointments for their children only when absolutely necessary – this is particularly the case among the subset of the target audience with less than \$40,000 annual household income. Almost nine in ten of those without insurance indicate that having some extra money would increase the likelihood they would schedule more regular visits to the dentist for their child or children, compared to seven in ten of those with insurance coverage. Moreover, those without access to dental insurance exhibit a higher likelihood of paying for dental services in cash or by credit card. They are also more likely to visit free dental clinics or to negotiate a flexible payment plan with their dental provider.

Overall, the introduction of the Canada Dental Benefit is strongly supported by the target audience. The campaign appears to have prompted interest among those with and without dental insurance. Recall among the target audience for the benefit, on both on an unaided and aided basis, while modest does suggest that key messages relating to the purpose and nature of the benefit as well as the eligibility criteria are penetrating to some extent. Moreover, the ads have had an impact prompting a significant percentage of the target audience to consider dental care for their children, look for more information about the benefit and visit the landing page or dedicated website. The ads have also generated a reasonable level of word-of-mouth marketing activity along with early indications that the target audience has either booked an appointment or taken their child/children to get dental care using the benefit payment(s).

Notably, support for the benefit is higher among visible minorities, a group which also reported higher levels of awareness of and familiarity with the Canada Dental Benefit along with higher application rates. Interest in the CDB is particularly high among visible minority groups and those who self-identified as Indigenous, with a higher share of these communities reporting that they have looked for information about it in the past 3 months. Additionally, visible minorities and Indigenous respondents are among those groups who generally responded more positively to the ads and reported uptake of the CDB based on having seen the ad is higher among visible minorities relative to other sub-groups. At the same time, it should be noted that Indigenous respondents report that they and their child/children frequent the dentist with regularity despite the fact that a relatively small proportion (10%) of this community indicate having private dental coverage. Other issues regarding access to dental care within their communities should be examined as well as Indigenous respondents are more likely to cite the dental office location being inconvenient as a barrier.

Some variations in the experiences and attitudes of parents based on household income and gender were evident which could inform future communications on this initiative or the expanded Dental Care Benefit.

A higher proportion within the subset of those with lower household incomes (under \$40,000 annually) are without access to a dental professional and are among the least likely to have visited a dental office within the last 6 months, compared to those with annual household incomes above \$40,000. A higher proportion of this subset are also more likely to visit a dentist only when there is an emergency, while being far less likely to report taking their children to the dentist for preventive care. Cost is also mentioned as a key barrier by a larger share of those in lower income households relative to those in the higher income bracket (e.g., between \$60,000 to just under \$90,000 annually). It is important to note, however, that when asked about how they pay for dental services those with a household income of less than \$20,000 annually are more likely to say that the cost of dental services for their child/children is covered by insurance relative to those in the higher income brackets. This suggests that children residing in households at the lowest end of the eligibility range for the CDB, based on household income, may qualify for other programs offered at the provincial or territorial level (e.g., the Healthy Smiles Ontario).

Connecting with women in particular is key to increasing uptake of the interim CDB. Women exhibit higher levels of awareness of the Canada Dental Benefit and are more likely to have sole responsibility within the family unit for scheduling dental appointments. From a communications perspective, women are more motivated to apply for the benefit to improve the health of their family and children.

Any additional communications efforts should also consider families with younger and older children (within the 0-11 age range eligible for the interim CDB), and those with larger households. A higher percentage of those with older children and in larger households report having applied for the benefit, and those with multiple children indicate having more than one child needing dental care is both a barrier to access as well as a key motivator for applying. While the research suggests that parents may be prioritizing the dental needs of older children in the household, respondents with children aged 5 or younger are more likely to recall having seen, read, or heard about Government of Canada advertising of the Canada Dental Benefit compared to those with children aged 9 to 11. An additional advertising push targeting those with younger children may prompt habit forming preventive dental care at an earlier age. Dental education for parents with young children, highlighting the benefits of regular dental care may prove beneficial.

Note to the Reader

Unless otherwise noted, results shown in this report are expressed as percentages and may not add up to 100% due to rounding and/or multiple responses to a given question.

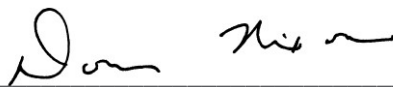
Throughout the report, the findings presented are reflective of the base sample (n=2,000). Results from 'sample boosts' are only presented when significant differences were noted relative to the base sample. The results for each 'sample boost' (i.e., visible minority and remote/rural) include both the oversample of n=100 and any additional completes from respondents within the base sample that met the defined criteria for a visible minority or residing in a remote or rural area.

Only statistically significant differences between sub-groups, according to the Z-test at a 95% confidence interval, are presented throughout the report.

Statement of Political Neutrality

I hereby certify as Senior Officer of *The Strategic Counsel* that the deliverables fully comply with the Government of Canada political neutrality requirements outlined in the Government of Canada's Policy on Communications and Federal Identity and Directive on the Management of Communications. Specifically, the deliverables do not include information on electoral voting intentions, political party preferences, party standings with the electorate, or ratings of the performance of a political party or its leaders.

Signed:



Donna Nixon, Partner

II. Detailed Findings

A. Attitudes Towards Dental Care

To provide some context, and prior to examining respondents' views on and behaviours regarding dental care, respondents were asked a limited series of questions to gauge their overall level of concern about this issue relative to others.

Respondents express a high level of concern for an array of health and childcare-related issues. Four in five respondents, or more, say they are *somewhat or very concerned* about each of the six issue areas evaluated. Affordability of dental care in Canada tops the list, with 91% of respondents being *somewhat or very concerned* about this issue, followed by accessing a family doctor (84%), accessing mental health services (83%), affordability of childcare in Canada (83%), accessing the services of a dentist or an oral health professional (81%) and accessing childcare services (80%).

Men (85%) exhibit greater concern specifically in relation to accessing the dental services, compared to women (79%). This is also the case among parents with children between 6 and 12 years of age: 83% of parents with children aged 6-8 and 81% of parents aged 9-11 are concerned, compared to 77% of parents with children 5 or younger. Those without access to dental insurance express higher levels of concern compared to those with dental coverage both we respect to affordability of dental care (93% vs. 88%) and access to dental services (87% vs. 70%).

TABLE 1. LEVEL OF CONCERN REGARDING HEALTH AND CHILDCARE-RELATED ISSUES IN CANADA

% Very/Somewhat Concerned

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
Affordability of dental care in Canada	91	90	92	90	92	91	88	93
Accessing a family doctor	84	84	83	81	84	83	81	85
Accessing mental health services	83	83	83	79	83	85	81	84
Affordability of childcare in Canada	83	86	81	84	84	78	83	83
Accessing the services of a dentist or oral health care professional (e.g., dental assistant, dental hygienist, dental surgeon, etc.)	81	85	79	77	83	81	70	87
Accessing childcare services	80	84	79	81	81	76	77	82

Q8. How concerned are you about each of the following issues?

Base: Total sample

Other demographic variations include the following:

- University-educated parents (86%) express higher levels of concern about accessing the services of a dentist or oral health care professional, relative to those with a college education or trade certification (78%) and those with high school education or less (76%).
- Respondents who reside 5 to 25 kilometres from a dental clinic (84%) as well as those who reside more than 25 kilometres from dental services (87%) are more likely say they are somewhat or very

concerned about access to these services as compared to those who are under 5 kilometres distance (75%).

- Those whose first language is neither English nor French (94%) and Anglophones (92%) exhibit higher levels of concern about the affordability of dental care compared to Francophones (88%).
- Indigenous parents (89%) report being more concerned, compared to the average, about accessing the services of a dentist or oral health care professional.
- Visible minorities (89%) also express greater concern about access to dental services.

Regionally, concern about the affordability of dental care in Canada is higher in British Columbia (95%) although close to or more than nine in ten respondents in all regions say they are somewhat or very concerned about this issue (94% in Manitoba and Saskatchewan, 93% in Atlantic Canada, 90% in Alberta, 91% in Ontario, and 88% in Quebec).

While the level of overall concern about dental care in Canada is quite high, it masks the fact that a significant proportion of respondents are acutely concerned about affordability in particular. As the table below shows, over six in ten respondents (61%) are *very concerned* about being able to afford dental care. This drops to half or slightly fewer saying they are very concerned about accessing a family doctor (50%), the affordability of childcare (50%), accessing mental health services (47%), accessing the services of a dentist or oral health care professional (46%), and accessing childcare services (45%).

A higher proportion of women (63%) say they are very concerned relative to men (57%) about affordability. In terms of accessing dental services, those with children aged 6 and older (48%) are more likely to very concerned about this issue, compared to those with children aged 5 or younger (39%). Those without access to dental insurance are more likely to be very concerned compared to those with coverage on both fronts - affordability (65% vs. 52%, respectively) and access (52% vs. 32%, respectively).

TABLE 2. LEVEL OF CONCERN REGARDING HEALTH AND CHILDCARE-RELATED ISSUES IN CANADA
% Very Concerned

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
Affordability of dental care in Canada	61	57	63	60	62	63	52	65
Accessing a family doctor	50	49	51	49	51	49	49	50
Affordability of childcare in Canada	50	51	49	49	50	46	46	51
Accessing mental health services	47	44	49	46	47	47	46	47
Accessing the services of a dentist or oral health care professional (e.g., dental assistant, dental hygienist, dental surgeon, etc.)	46	48	45	39	48	48	32	52
Accessing childcare services	45	43	45	48	43	39	40	47

Q8. How concerned are you about each of the following issues?

Base: Total sample

In terms of other demographic variations, those who speak a language other than English or French at home (72%) are more likely to say they are *very concerned* about the affordability of dental care in Canada compared to Anglophones (60%) and Francophones (59%).

In terms of accessing dental services, Indigenous respondents (58%) are more likely to report being *very concerned*, as are visible minorities (53%).

There are no significant regional variations when examining only the segment of respondents who expressed the highest levels of concern about affordability of and access to dental care.

The vast majority of respondents (94%) believe it is important that they visit a dentist regularly, at least once a year or more often. Just under two thirds (62%) feel it is *very important* and another third (32%) say it is *somewhat important*. Very few (5%) believe regular visits to the dentist are not important or were not sure (1%).

Views on the importance of regular dental visits do not vary significantly by the gender of the parent, age of one's child/children or insurance coverage.

TABLE 3. PARENT – IMPORTANCE OF VISITING A DENTAL OFFICE REGULARLY

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
IMPORTANT	94	94	94	94	94	94	95	94
Very important	62	60	64	61	63	62	60	63
Somewhat important	32	34	30	32	31	32	35	30
Not that important	4	4	4	5	5	4	4	5
Not important at all	1	1	1	1	1	2	1	1
NOT IMPORTANT	5	5	5	6	5	6	4	6
Not sure	1	1	1	1	1	<1	<1	1

Q13. How important do you feel it is for you to visit a dental office or oral health professional on a regular basis (that is, at least once a year or more often)? Base: Total sample

There are also no differences in the perceived importance of regular dental visits across demographic groups or by region.

Respondents were also asked about the importance of having their child/children visit a dental office on a regular basis. Results to this question were similar. Almost unanimously, parents feel regular dental visits are important (97%). Notably, a larger proportion say it is *very important* that their children visit a dentist regularly (75%) than say the same is true with respect to themselves (62%).

Women (78%) are more likely to say that ensuring their child/children visit the dentist regularly is *very important* compared to men (70%).

TABLE 4. CHILDREN – IMPORTANCE OF VISITING A DENTAL OFFICE REGULARLY

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
IMPORTANT	97	97	98	98	97	97	97	97
Very important	75	70	78	76	74	76	75	75
Somewhat important	22	27	20	22	23	21	23	22
Not that important	2	2	2	1	2	2	2	2
Not important at all	<1	1	<1	1	<1	<1	1	<1
NOT IMPORTANT	2	3	2	2	2	2	2	2
Not sure	<1	1	<1	<1	1	<1	1	<1

Q20. How important do you feel it is for you to visit a dental office or oral health professional on a regular basis (that is, at least once a year or more often)? Base: Total sample

In every region, well over nine in ten respondents say it is important that their child/children visit a dental office or oral health professional regularly and perceived importance is highest in Manitoba/Saskatchewan (99%).

Respondents were presented with a series of agree-disagree statements to further assess their attitudes on dental care for both adults and children and to evaluate the extent to which affordability is a barrier to receiving regular care. Respondents again emphasized the importance of dental care with 95% *agreeing* that, in the ideal, they would like their children and themselves to receive regular dental care. Four in five agree that if they had a bit of extra money, they would schedule more regular visits for themselves (82%) and for their children (80%). However, over half (59%) also agree that they would schedule dental appointments for their children only when absolutely necessary, although of those agreeing to this statement just 28% *strongly agree*.

Men are more likely than women to agree that they would schedule more regular appointments for their children if they had some extra money (83% vs. 78%), but also that they would be inclined to schedule appointments only when necessary (64% vs. 56%). Parents of older children are more likely to agree that extra money would prompt them to schedule more regular visits compared to those with younger children (82% for parents with children aged 9-11; 83% among those children aged 6-8; 79% among those with children under age 6).

Agreement with three of the four statements is higher among those without dental insurance:

- 88% agree that having extra money would increase the likelihood they would schedule more regular dental visits for themselves (vs. 70% among those with dental coverage);
- 86% agree they would do the same for the children (vs. 65% among those with dental coverage); and
- 62% agree they would only schedule dental appointments for their children when absolutely necessary (vs. 52% among those with dental coverage).

TABLE 5. VIEWS ON DENTAL CARE FOR ADULTS AND CHILDREN

% Strongly/Somewhat Agree

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
Ideally, I would like my children and me to receive regular dental care	95	95	95	94	94	96	96	95
If I had a bit of extra money, I would schedule more regular dental care appointments for myself.	82	82	82	79	83	82	70	88
If I had a bit of extra money, I would schedule more regular dental care appointments for my children	80	83	78	76	80	81	65	86
I only schedule dental care appointments for my children when absolutely necessary.	59	64	56	58	61	57	52	62

Q22. To what extent do you agree or disagree with each of the following statements? Base: Total sample

University-educated respondents (85%) are more likely to agree that they would schedule more regular dental care appointments for their children if they had a bit more money relative to those with a college education or trades certification (76%) and those with high school or less (74%). This is also true among respondents who are married or in a common-law partnership (82%), relative to those who are separated, divorced or widowed (74%) and those who have never married (73%).

Regionally, respondents who reside in Manitoba/Saskatchewan (69%) and British Columbia (66%) are more likely to agree with the statement that they would only schedule dental appointments for their children when absolutely necessary compared to those in Ontario (59%), Quebec (51%) and Atlantic Canada (50%). Those residing in urban areas (60%) are also more likely to agree with this statement, compared to rural residents (52%).

B. Access to and Use of Dental Services

To gauge access to dental care services, respondents were asked whether they currently have a dentist or oral health professional who provides dental services for themselves and their family. About half of respondents (51%) have a dentist or oral health professional who provides dental services for the whole family. Roughly similar proportions indicate they only have a dentist for their children (19%), do not have a dentist or oral health professional at all (17%), or have an oral health professional who only provides dental services for themselves (13%).

Across key demographics, men (17%) are more likely to only have a dentist for themselves compared to women (11%). Conversely, women (53%) are more likely to indicate having a dentist who provides dental services for the whole family compared to men (47%). Parents of children aged 5 or younger (21%) are more likely to not have a dentist or oral health professional providing services to either themselves or their family, compared to those with older children aged 6 to 11 (14%). A larger proportion of parents with older children (aged 9 to 11) (57%) report having a dentist or oral health professional for the whole family compared to parents of younger children aged 6 to 8 (52%) or 5 or younger (49%).

With respect to access to dental insurance, respondents with access to dental insurance (63%) are more likely to indicate they have a dentist or oral health professional for the whole family compared to those

who do not have dental coverage (45%). Conversely, parents without access to dental insurance are more likely to report that they do not have an oral health professional (21%) or that they only have a dentist or oral health professional for their children (21%), relative to those with access to insurance (9% and 13%, respectively).

TABLE 6. ACCESS TO DENTAL SERVICES

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
Yes, for the whole family	51	47	53	49	52	57	63	45
Yes, only for myself	13	17	11	13	12	11	14	13
Yes, only for my child/children	19	20	18	17	22	19	13	21
No	17	16	18	21	14	14	9	21

Q9. Do you currently have a dentist or oral health professional who provides dental services to you and/or your family?
Base: Total sample

Parents residing in remote or rural areas (58%) are more likely to say they have a dentist for the whole family relative to the average. Conversely, respondents who identify as a visible minority are more likely to report not having a dentist (20%) or that they only have a dentist for themselves (19%) compared to the average.

While there are no significant differences reported by region, other variations across demographic groups include:

- Older parents, aged 45 years and older (19%), are more likely to say they have access to a dentist only for themselves compared to those aged 35 to 44 (11%) and those aged 18 to 34 (14%);
- A higher proportion of respondents living in larger households of 5 people or more (56%) say they have a dentist or oral health professional for the whole family (vs. those in smaller households comprising 2 to 4 members (49%)); and
- Those more likely to be without a dentist or oral health professional for themselves or their family:
 - Have a high school education or less (24%), compared to those with a college level or trades/apprenticeship training (14%) and those with a university education (16%);
 - Have a lower household income (less than \$40,000 annually) (30%), compared to households with an income of \$40,000 to \$59,999 (16%) or \$60,000 to \$89,999 (10%); and
 - Speak a language other than English or French at home (40%) compared to Anglophones (17%) or Francophones (11%).

The majority (61%) of parents have visited an oral health professional in the past six months (40%) or the past year (21%). Over one in ten (14%) indicate that they last visited a dentist more than a year ago but less than two years ago. A similar proportion (15%) last saw a dentist sometime within the last two to five years (9% 2 years to less than 3 years ago; 4% 3 years to less than 4 years ago; and 2% 4 years to less than 5 years ago). Fewer than one in ten (8%) say that it has been five years or more (7%) since they last visited or they have never been to a dentist (1%). A small proportion (2%) do not recall when their last visit was.

Those with dental insurance (49%) are more likely to report having been to a dentist office or an oral health professional within the past six months relative to those without dental coverage (36%). Conversely, those without dental insurance are more likely to indicate that more time has passed since their last visit. More say that it has been two to three years (10%), three to four years (5%) or five years or more (7%) since their last visit, when compared to those with dental insurance.

TABLE 7. PARENT – LAST VISIT TO A DENTAL OFFICE OR ORAL HEALTH PROFESSIONAL

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
In the past 6 months	40	39	41	39	43	38	49	36
In the past year	21	22	20	20	20	23	21	21
1 year to less than 2 years ago	14	15	14	15	13	14	13	14
2 years to less than 3 years ago	9	10	8	8	9	8	5	10
3 years to less than 4 years ago	4	5	4	4	3	5	3	5
4 years to less than 5 years ago	2	2	3	2	3	3	2	3
Five or more years ago	7	6	7	8	7	6	5	7
Never	1	1	1	1	1	1	1	1
I can't recall	2	1	2	2	1	2	2	2

Q10. When was the last time you visited a dentist office or an oral health professional?

Base: Total sample

Those who were more likely to have visited a dental office or oral health professional within the past 6 months include:

- Indigenous respondents (61%);
- Households with an annual household income between \$60,000-\$89,999 per year (47%) relative to those with annual household incomes of \$40,000 to \$59,999 (36%) or less than \$40,000 a year (33%);
- Respondents living within 5 kilometres of a dental office (47%), compared to those living 5-25 kilometres (40%) and more than 25 kilometres away (30%); and
- Francophones (45%) relative to Anglophones (38%).

Older parents aged 45 years and older (27%) are more likely to report having been to the dentist within the past year compared to younger parents aged 18 to 34 (20%) or 35 to 44 (19%).

Those who are more likely to report having last seen a dentist or oral health professional five or more years ago have:

- A high school level education or less (12%) relative to those with college or trades/apprenticeship training (8%) and a university degree (3%); and
- An annual household income of less than \$40,000 (12%) versus those with a household income of \$40,000 to \$59,999 (7%) and \$60,000 to \$89,999 (3%).

There were no significant differences in responses to this question based on region across the country.

Respondents who have seen a dentist in the past or could not recall their last visit were asked a follow-up question about the frequency with which they visit a dental office or oral health professional. About one in five (19%) say they visit every three months (14%) or more (6%). Just under one quarter (24%) report their frequency of visits as every six months. A similar proportion (26%) visit every 9 months (10%) or 12 months (16%). Over one in five (21%) state that they only frequent a dentist or oral health professional when there is a required dental need such as a cavity (13%) or they have a dental emergency (8%).

Those with access to dental insurance are more likely to report frequenting a dental office every six months (34%), every nine months (12%) or yearly (19%) compared to those without insurance. On the contrary, respondents without dental insurance are more likely to say they only frequent a dental office when it is required (14%) or there is a dental emergency (10%).

Men are more likely to report visiting an oral health professional every three months (18%) or more (7%) relative to women (11% and 4% respectively). On the other hand, a higher proportion of women report visiting the dentist when there is an emergency (10%) compared to men (5%).

TABLE 8. PARENT – FREQUENCY OF VISITING A DENTAL OFFICE OR ORAL HEALTH PROFESSIONAL

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	1978	737	1238	928	817	738	633	1345
	%	%	%	%	%	%	%	%
More often than once every 3 months	6	7	4	4	6	5	2	7
About every 3 months	14	18	11	8	17	12	10	15
About every 6 months	24	26	23	26	25	22	34	20
About every 9 months	10	10	10	8	9	12	12	8
About every 12 months	16	15	17	18	14	18	19	15
Less often than once a year	8	7	9	9	7	8	7	9
Only when required (e.g., cavity, etc.)	13	11	14	15	12	13	10	14
Only when there is an emergency (e.g., accident, severe pain, etc.)	8	5	10	10	9	9	5	10
Other	1	<1	1	1	1	1	-	1
Cost issues/only when I can afford it	1	<1	1	<1	1	<1	-	1
Other	<1	<1	<1	<1	-	<1	-	<1
Never	1	1	2	1	1	1	1	1

Q11. How frequently do you visit a dental office or oral health professional?

Base: Have visited a dentist office or an oral health professional

Regionally, respondents in Quebec (23%) report visiting a dentist yearly, compared to those residing in other parts of the country including Manitoba and Saskatchewan (14%) the Atlantic (13%), Ontario (13%), and British Columbia or the North (12%). Similarly, those residing in remote or rural areas (20%) are more likely to say they visit a dentist every 12 months relative to the average.

In terms of other demographics, the following differences were noted:

- Although a small proportion of respondents indicate frequenting a dentist *more often than once every three months*, those more likely to do so:

- Are Indigenous (14%);
- Have a higher household income of \$60,000 to \$89,999 (8%) relative to those with lower household incomes (4% for \$40,000 to \$59,999 and 3% for less than \$40,000);
- Have a higher level of educational attainment (7% with a university education) relative to those with college level or trades/apprenticeship training (4%) or a high school degree or less (4%); and
- Are employed (7%), compared to those who are unemployed and looking for work (2%) and those not in the workforce (3%).
- Respondents more likely to report frequenting the dentist *every 3 months* are:
 - Indigenous (34%);
 - University-educated (21%) relative to those with college level or trades/apprenticeship training (9%) or a high school degree or less (5%);
 - Living more than 25 kilometres from a dental clinic (21%) compared to those living 5-25 kilometres (13%) or less than 5 kilometres away (10%);
 - Those with a higher household income of \$60,000 to \$89,999 (20%) relative to those with lower household incomes (12% for \$40,000 to \$59,999 and 5% for less than \$40,000);
 - Employed (17%), compared to those who are unemployed and looking for work (3%) and those not in the workforce (4%); and
 - Married or common-law (16%) relative to those who are separated, divorced, or widowed (7%) and single (4%).
- Those more likely to report visiting an oral health professional *every six months* are:
 - Part of a visible minority (31%) compared to the average; and
 - Employed (27%), compared to those unemployed and looking for work (15%) and those not in the workforce (20%).
- Respondents with a lower household income (less than \$40,000 per year) (19%) are more likely to report frequenting the dentist *only when required* relative to those with household incomes of \$40,000 to \$59,999 (14%) and \$60,000 to \$89,999 (8%).
- Respondents more likely to say they visit the dentist *only when there is an emergency* are:
 - Those with a high school education or less (16%) relative to those with a college diploma or trades/apprenticeship training (10%) and those who are university-educated (3%);
 - Not in the workforce (17%) or unemployed and looking for work (14%) compared to those who are employed (5%);
 - Single (16%) compared to those who are married/living common-law or are divorced, widowed or separated (7% each).
 - Households with an income of less than \$40,000 (14%) compared to those with a household income of \$40,000 to \$59,999 (9%) and households with an income of \$60,000 to \$89,999 (4%).

Respondents who visit a dentist with some frequency were asked about different reasons for visiting an oral health professional. Over three quarters (78%) see a dental hygienist for regular routine cleanings. Just under three in five (59%) go to a dentist for preventive dental care exams, while over half (56%) say they visit for urgent dental needs.

As might be expected, those with dental insurance (86%) are more likely to visit a dental hygienist for regular routine cleanings than those without dental coverage (74%). Conversely, respondents without dental coverage (61%) are more likely to visit for urgent dental needs than those with insurance (47%).

TABLE 9. PARENT – REASONS FOR VISITING THE DENTIST

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	1536	608	926	687	634	569	531	1004
	%	%	%	%	%	%	%	%
For regular routine cleanings with a hygienist	78	76	80	78	80	81	86	74
For preventive dental care exams	59	60	59	54	64	59	59	60
For urgent dental needs (e.g., cavity, pain, an accident, etc.)	56	54	57	53	57	58	47	61
Other	1	1	2	1	1	2	1	1
Orthodontist/braces/Invisalign	1	<1	1	<1	<1	1	1	<1
Crowns/fillings	<1	<1	<1	<1	<1	1	<1	<1
Other	1	1	1	<1	1	<1	1	1
None of the above	1	1	1	1	1	1	<1	1

Q12. In which of the following cases do you go to a dentist or oral health professional?

Base: Visit with some frequency (Every 3 months, 6 months, 9 months, 12 months or less often than once a year at Q.11)

Regionally respondents residing in Quebec (64%) report going to a dentist for urgent dental needs more often than those residing in British Columbia or the North (55%), the Atlantic (53%), Manitoba and Saskatchewan (52%) or Ontario (51%).

Respondents who are more likely to go to a dentist or oral health professional for *regular cleanings with a dental hygienist*:

- Have a college level education or trades/apprenticeship training (85%), compared to those with a university degree (76%) or high school education or less (75%);
- Are Francophones (83%), relative to Anglophones (78%) or those who speak another language at home (69%);
- Have a higher household income (of \$60,000 to \$89,999 annually) (82%), relative to those with a lower household income (of less than \$40,000) (71%); and
- Live in a smaller household (with 2 to 4 people) (80%) compared to a larger household (of 5 or more people) (75%).

Those more likely to report going to a dentist for *preventive dental care exams* are:

- Indigenous (73%);
- Francophones (69%), compared to Anglophones (58%) and those who speak another language at home (49%);
- Households with higher incomes of \$60,000 to \$89,999 (68%) relative to those with lower household incomes (59% for \$40,000 to \$59,999 and 40% for less than \$40,000);
- Parents aged 35-44 (63%) relative to those aged 18-34 (57%) and those 45 years or older (54%);

- Employed (62%), versus those unemployed and looking for work (37%) and those not in the workforce (52%);
- Married or living common-law (63%) compared to those who are single (51%) or divorced, widowed or separated (42%); and
- Larger households with 5 or more people (64%), relative to smaller households with 2 to 4 people (58%).

To better understand dental habits with respect to their child/children, parents were asked the same series of questions regarding last visit to a dental office, frequency of visiting an oral health professional and reasons for visiting a dental office in relation to their child/children. The majority (67%) of parents have brought their child to the dentist within the last six months (46%) or year (21%). One in five (20%) say it has been more than a year (12% for one year to less than two years ago; 5% for two years to less than three years ago; 3% for three years to less than four years ago; and 1% for four years or more). One in ten (11%) indicate that they have never taken their child/children to a dental office or oral health professional. A very small proportion (2%) did not recall the last visit they made for their child/children.

Parents of children aged 5 and younger (21%) are more likely to say that they have never taken their child/children to an oral health professional relative to those with children aged 6-8 (3%) and 9 to 11 (2%). Similarly, women (14%) are more likely to say this compared to men (7%).

Respondents with children aged 6 to 8 (53%) are more likely to report having taken their child to the dentist within the past six months compared to those with children aged 5 and younger (41%) or aged 9 to 11 (48%).

As might be expected, those with access to dental insurance (52%) are more likely to say they last took their child/children under the age of 12 years old to the dentist within the past six months relative to those without insurance (43%).

TABLE 10. CHILDREN – LAST VISIT TO A DENTAL OFFICE OR ORAL HEALTH PROFESSIONAL

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
In the past 6 months	46	46	46	41	53	48	52	43
In the past year	21	21	21	19	21	27	19	22
1 year to less than 2 years ago	12	13	11	11	13	11	10	12
2 years to less than 3 years ago	5	6	4	4	5	5	3	6
3 years to less than 4 years ago	3	4	2	1	3	5	1	3
4 years to less than 5 years ago	<1	<1	<1	<1	<1	<1	<1	<1
Five or more years ago	1	<1	1	<1	<1	1	<1	1
Never	11	7	14	21	3	2	13	10
I can't recall	2	2	1	2	1	1	1	2

Q15. When was the last time you took your child/one of your children under 12 years of age to a dental office or oral health professional?

Base: Total sample

Regionally, respondents residing in Quebec (26%) report visiting a dental office or oral health professional for their child under 12 in the past year compared to those residing in Ontario (20%), Manitoba and Saskatchewan (19%), Alberta (19%), and British Columbia or the North (16%). Additionally, those living in remote or rural areas (14%) are more likely to say they have never visited the dentist with their child relative to the average (11%).

Demographic differences for those who were more likely to indicate having taken their child to the dentist within the past 6 months include:

- Indigenous respondents (67%), relative to the average (46%) are more likely to report they last brought their child to a dental office within the past 6 months; and
- Households with higher incomes of \$60,000 to \$89,999 (51%) are more likely to have been to an oral health professional with their child/children within the past 6 months compared to households with incomes less than \$60,000 (42% for HHI of \$40,000 to \$59,999 and 40% for HHI less than \$40,000).

Older parents aged 45 and older (28%) compared to those who are aged 35 to 44 (21%) and those aged 18 to 34 (19%) are more likely to report taking their child to a dentist within the past year.

Those who are more likely to indicate never having taken their child to a dentist include:

- Younger parents (19%) relative to those who are aged 35 to 44 (7%) and those aged 45 and older (7%);
- Parents with a high school education or less (18%) compared to parents with a college level education or trades/apprenticeship training (11%) and parents with a university level education (8%); and
- Households with an income of less than \$40K (16%) compared to households with an income of \$40,000 to \$59,999 (11%) and households with an income of \$60,000 to \$89,999 (8%).

When asked about who in the household is responsible for scheduling dental appointments for their child/children, a vast majority of survey respondents (86%) report that they personally schedule appointments for their child/children all (66%) or most (21%) of the time. Similar proportions indicate they only schedule appointments for their children some of the time (6%) or that someone else does the scheduling (7%) entirely.

Women (76%) are more likely than men (51%) to say they personally schedule appointments for their child/children all of the time. Conversely, men are more likely to report that they either schedule appointments most of the time, some of the time or that someone else schedules the appointments entirely (28%, 9%, and 13%, respectively) relative to women (16%, 5%, and 4%, respectively). Significant differences by age of child or access to insurance were not observed.

TABLE 11. SCHEDULING DENTAL APPOINTMENTS FOR CHILD/CHILDREN

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	1778	692	1081	744	793	727	558	1220
	%	%	%	%	%	%	%	%
I do, all of the time	66	51	76	62	65	69	64	67
I do most of the time	21	28	16	23	21	18	19	21
I do, some of the time	6	9	5	8	6	6	8	6
Someone else schedules the appointments	7	13	4	7	8	7	9	7

Q16. In your household, who makes dental appointments for your child/children?

Base: Have taken child under 12 years old to dental office or oral health professional

By region, no notable differences were observed.

With respect to demographic differences, parents who are married or living common law (23%) are more likely to say they make appointments for their children most of the time relative to parents who are separated, divorced, or widowed (13%) or single (10%).

To better understand how parents fund their child's/children's dental visits, parents who indicated they had previously taken their child to a dental office were asked about how they usually pay for dental services. A plurality of respondents (47%) say they pay for dental services for their child/children in cash. A little less than half (44%) report using their credit card to cover the costs. Over three in ten (35%) report that dental care costs are covered. A similar number of respondents indicate using a free dental clinic (22%) or that their dentist offers a payment plan (20%).

Those without insurance are more likely to state the following (relative to those with insurance):

- I pay in cash (54% vs. 31%);
- I pay using a credit card (46% vs. 37%);
- I go to a free dental clinic (28% vs. 9%); and
- The dentist offers a payment plan (24% vs. 10%).

TABLE 12. PAYING FOR DENTAL SERVICES FOR CHILD/CHILDREN

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	1778	692	1081	744	793	727	558	1220
	%	%	%	%	%	%	%	%
I pay in cash (or debit)	47	54	43	42	47	48	31	54
I pay using a credit card	44	46	42	40	46	42	37	46
Costs are covered (e.g., through private dental insurance, social assistance, disability assistance program, etc.)	35	28	39	37	35	33	59	24
I go to a free dental clinic	22	25	20	17	23	20	9	28
The dentist office offers a payment plan	20	23	17	16	21	18	10	24
Other	1	1	1	1	1	<1	2	<1
I pay out of pocket for extra fees that aren't covered/partial coverage	1	<1	1	1	1	<1	1	<1
I go to another country (where it's cheaper)	<1	<1	-	<1	-	-	-	<1
Other	<1	<1	<1	<1	<1	-	1	<1

Q17. Which of the following best reflects how you usually pay for dental services for your child/children?

Base: Have taken child under 12 years old to dental office or oral health professional

By region, parents in Alberta (26%) are more likely to report that their dentist offers a payment plan compared to parents residing in Quebec (19%) and Ontario (18%).

By income, notable differences include:

- Parents with a household income of \$60,000 to \$89,999 are more likely to report that:
 - They pay in cash (55% compared to 43% for HHI of \$40,000 to \$59,999 and 37% for HHI of less than \$40K);
 - They pay using a credit card (55% compared to 41% for HHI of \$40,000 to \$59,999 and 26% for HHI of less than \$40K);
 - They pay through a payment plan setup through the dental office (28% compared to 15% for HHI of \$40,000 to \$59,999 and 9% for HHI of less than \$40K); and
 - They use a free dental clinic (28% compared to 17% for HHI of \$40,000 to \$59,999 and 16% for HHI of less than \$40K).
- Parents with a household income of less than \$20K (59%) are more likely to report that the cost of dental services for their child/children is covered relative to parents with higher household incomes.

Additionally, respondents who identified as part of a visible minority (30%) are more likely to report using a free dental clinic for their child/children compared to the average (22%).

When asked about the frequency with which they take their child/children to a dental office, just under one-third (31%) say they visit the dentist every 6 months. Under a quarter (22%) report taking their child/children every 12 months or every 3 months or more (16% every 3 months, 7% more than once every 3 months). One-in-ten (11%) say they take their child/children every 9 months. A smaller proportion of respondents take their child/children to the dentist more infrequently – less often than once a year (6%), only when required (6%), and only when there is an emergency (1%). Very few respondents overall (less than 1%) say they never take their child/children to the dentist.

Women are more likely to say they take their child/children to a dental office about every 12 months or less (25% and 7%, respectively) compared to men (16% and 3%, respectively). Conversely, men are more likely to indicate taking their child/children to see an oral health professional about every 3 months or more (21% and 9%, respectively) relative to women (13% and 5%, respectively).

By age of child, parents of younger children, 5 years of age or less (27%), are more likely to report frequenting an oral health profession about every 12 months relative to those with older children (23% for children aged 9 to 11 and 19% for children aged 6 to 8). Contrarily, parents of older children aged 9 to 11 (14%) are more likely to say they frequent every 9 months relative to those with younger children (11% for children aged 6 to 8 and 9% for children 5 years of age or less). A higher proportion of parents with children aged 6 to 8 (18%) indicate their child frequents the dentist every 3 months compared to those with children aged 9 to 11 (13%) and children aged 5 years or less (10%).

A higher proportion of parents with access to insurance say they take their child/children to a dentist about every 6 months or 12 months (42% and 25%, respectively) relative to those without access to insurance (26% and 20%, respectively).

TABLE 13. CHILDREN – FREQUENCY OF VISITING A DENTAL OFFICE OR ORAL HEALTH PROFESSIONAL

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	1778	692	1081	744	793	727	558	1220
	%	%	%	%	%	%	%	%
More often than once every 3 months	7	9	5	5	7	6	4	8
About every 3 months	16	21	13	10	18	13	8	19
About every 6 months	31	33	30	33	32	29	42	26
About every 9 months	11	10	12	9	11	14	12	11
About every 12 months	22	16	25	27	19	23	25	20
Less often than once a year	6	3	7	6	5	6	4	6
Only when required (e.g., cavity)	6	6	6	7	5	6	4	7
Only when there is an emergency (e.g., accident, severe pain)	1	1	1	1	1	1	<1	2
Never	<1	<1	1	1	1		1	<1
Other	<1	<1	<1	-	<1	<1	-	<1
Cost issues/only when I can afford it	<1	-	<1	-	<1	-	-	<1
Other	<1	<1	<1	-	<1	<1	-	<1

Q18. How frequently do you take your child/children to visit a dental office or oral health professional?

Base: Have taken child under 12 years old to dental office or oral health professional

Regionally, respondents residing in Quebec (33%) are more likely to say they frequent the dental office for their child/children about every 12 months compared to those residing in the Atlantic (21%), Ontario (20%), Manitoba and Saskatchewan (20%), Alberta (17%) and British Columbia and the North (11%). Similarly, respondents living in remote or rural areas (29%) are more likely to indicate bringing their child to the dentist about every 12 months relative to the total sample.

Respondents who are more likely to say they bring their child to a dental office every 3 months include:

- Indigenous (38%); and
- Households with an income of \$60,000 to \$89,999 (23%) relative to those with a HHI of \$40,000 to \$59,999 (13%) and those with a HHI less than \$40K (7%);

Parents with an income of less than \$40K (30%) are more likely to report bringing their child to a dentist about once a year relative to those with higher household incomes (24% for HHI of \$40,000 to \$59,999 and 16% for HHI of \$60,000 to \$89,999).

Respondents who identified as belonging to a visible minority are more likely to say they frequent the dentist for their child/children about every 9 months or only when required (14% and 8%, respectively) compared to the average.

Respondents who take their child/children to the dentist with some frequency (i.e., those who visit less than once a year or at least once a year) were asked about different reasons for visiting an oral health professional. Over three-quarters (77%) report that they take their child/children to see a dental hygienist for regular routine cleanings. Two-thirds (66%) say they will bring their child/children to a dentist for preventive dental care exams while half (51%) say they visit for urgent dental needs.

By gender, a higher proportion of women (80%) say they take their child/children for regular routine cleanings with a hygienist relative to men (73%). Parents of older children aged 9 to 11 (81%) also indicate visiting a dentist for routine cleanings compared to parents of younger children aged 5 years or less (74%).

Respondents with access to dental insurance (84%) are more likely to say they take their child/children to an oral health professional for regular routine cleanings relative to those without insurance (74%). Conversely, a higher proportion of parents without insurance (55%) say they take their child/children for urgent dental needs compared to those with insurance (44%).

TABLE 14. CHILDREN – REASONS FOR VISITING THE DENTIST

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	1870	696	1170	875	766	690	612	1258
	%	%	%	%	%	%	%	%
For regular routine cleanings with a hygienist	77	73	80	74	79	81	84	74
For preventive dental care exams	66	66	65	61	68	66	64	66
For urgent dental needs	51	49	53	47	54	55	44	55
Other	1	1	1	2	1	1	1	1
Orthodontist/braces/Invisalign	<1	<1	<1	<1	<1	1	<1	<1
Crowns/fillings	<1		<1	<1	<1	<1		<1
When child is old enough/child is too young	<1	<1	<1	1	-	-	<1	<1
Other	<1	<1	<1	<1	<1	<1	<1	<1
None of the above	2	2	2	3	1	1	2	2

Q19. In which of the following cases [would / do] you take your child/children to a dentist or oral health professional?

Base: Excludes “only when required/emergency” at Q18

In terms of demographic differences, parents with a household income of \$60,000 to \$89,999 (71%) are more likely to report taking their child/children to a dentist for preventive dental care exams relative to those with lower household incomes (65% for \$40,000 to \$59,999 and 56% for less than \$40K).

C. Barriers to Accessing Dental Care

Two follow up questions were included to assess, in detail, the barriers that exist to accessing dental care services for oneself and one's child/children. Overall, the main barriers to accessing dental care are related to the costs associated with the services.

Respondents were first asked to select from a list of 11 statements which, if any, prevents *themselves* from visiting a dental office or oral health professional on a regular basis. More than half of parents indicate it is costs of the dental care services (55%) that is preventing them and over one third (36%) say it is because they do not have insurance coverage for their dental expenses. The travel costs of getting to/from the dentist is also a barrier for three in ten (30%) parents, suggesting this is an area where further financial assistance could be provided.

Other secondary barriers include:

- The anxiety or fear of visiting a dentist/an oral health professional (19%);
- An inability to miss work/school (17%);
- Lengthy waitlists to access a dentist/oral health professional (17%); and
- A general lack of time (16%) to dedicate to receiving dental care.

Only one in ten (9%) say that they visit the dentist regularly for themselves, which is more common among those who have access to dental insurance (16%).

Looking at the key banner variables, those who are more likely to say that the barriers they face are related to costs – either in terms of overall costs of the services and a lack of insurance - are women (61% and 39%, respectively), those with children under 5 years of age (61% and 38%, respectively), and those without access to dental insurance (57% and 44%, respectively). Those with children aged 6-11, are more likely to cite lack of access to professionals (17% with children aged 6-8; 16% with children aged 9-11) and inadequate dental services (13% with children aged 6-8; 11% with children aged 9-11) as greater barriers, compared to those with a child/children aged 5 and younger. Lastly, parents without dental insurance are more likely to face several of the barriers listed, with the exception anxiety/fear or issues related to timing/waitlists.

TABLE 15. BARRIERS TO ACCESSING DENTAL CARE FOR ONESELF

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
Cost of the service	55	46	61	61	54	55	52	57
Lack of insurance	36	30	39	38	34	37	20	44
Cost of getting to the dentist or oral health professional	30	29	30	32	30	28	23	33
Anxiety or fear	19	18	19	18	19	19	20	18
Can't miss school or work	17	18	16	15	18	15	20	15
Waitlists are too long	17	22	13	14	17	18	16	17
Don't have the time	16	17	16	16	16	17	19	15
Lack of access to a dentist or oral health professional	15	20	13	11	17	16	7	19
Location of dentist or oral health professional is not convenient to get to	15	18	13	14	15	13	9	17
Trouble getting or paying for childcare	14	16	13	14	14	12	10	16
Dental services are inadequate	11	16	9	7	13	11	5	14
Other	1	1	1	1	1	1	1	1
No teeth/I wear denture	<1	-	<1	<1	-	<1		<1
Lack of trust/often try to push unnecessary procedures	<1	<1	<1	<1	<1	-	<1	<1
Other	<1	<1	1	<1	1	1	1	<1
I visit regularly	9	8	10	9	10	9	16	5

Q14. Which of the following prevents you from visiting a dental office or oral health professional on a regular basis?
Base: Total sample

A larger proportion of parents who identified as part of a visible minority group were more likely to say a number of factors prevents them from visiting a dentist/oral health professional, including:

- The costs of travelling to/from the office (36%);
- Lengthy waitlists (22%);
- Trouble getting or paying for childcare (20%);
- Being unable to access a dentist/oral health professional (20%);
- The inconvenience of getting to a dental office (20%); and
- A view that dental services provided are inadequate (16%).

While there are no notable differences in terms of barriers between those living in rural/remote communities and those residing in urban centres, there were some variations across other key demographic/regional variables as follows:

- Barriers related to paying for the dental care services for themselves – including the *overall costs* and a *lack of dental insurance* – are experienced more by those who:
 - Were never married (72% and 47%, respectively);
 - Have an annual household income of less than \$40,000 per year (70% and 45%, respectively);

- Are not in the workforce (69% and 43%, respectively) or unemployed (68% and 48%, respectively); and
- Have a lower educational attainment of high school or less (67% and 42%, respectively).
- Those more likely to cite the *cost of getting to/from the dentists office* are:
 - Those with larger households of 5 or more people (37%), compared to those with smaller households of 2 to 4 people (28%);
 - Those whose nearest dental clinic is 25 kilometres or more away from their home (33%), compared to those who live less than 5 kilometres away (27%); and
 - Younger parents aged 18 to 34 (32%) and 35 to 44 (30%), compared to older parents (aged 45 and older) (24%).
- Those who identify as European (25%) and who are Francophones (22%) are least likely to cite the *transportation costs* as barrier.
- *Anxiety or fear* is more likely to prevent those with a lower education attainment (who completed high school or less) (26%) from accessing dental care, relative to those who have a college level education or trades/apprenticeship training (18%) or are university-educated (16%).
- Issues related to the time associated with accessing dental care services – including *being absent from work/school, lengthy waitlists or not having to the time to attend* – are barriers cited more often for parents who are:
 - Indigenous (29%, 24% and 19%, respectively)
 - University-educated (20%, 23% and 19%, respectively);
 - Have a household income between \$60,000-\$90,000 (19%, 20% and 19%, respectively);
 - Are employed (20%, 19% and 18%, respectively); and
 - Are married or in a common law relationship (18%, 19% and 17%, respectively).
- *Being absent from work or school* is also more of a barrier for parents who are younger (19% for those 18-34 years of age) and who identify as Anglophones (18%).
- The *location of the dental clinic being inconvenient* (30%), *a lack of access to dentists* (29%), and *inadequate dental services* (22%) are barriers more commonly faced by Indigenous respondents.
- Residents of Manitoba and Saskatchewan are more likely to cite *long waitlists* as a barrier (27%), compared to the other provinces/territories. *Inadequate dental services* are more of an issue in British Columbia or the North compared to any other region across the country.

Later in the survey, parents were asked a similar question, as to what prevents them from taking *their child/children* to a dental office or oral health professional on a regular basis. Much of the response was similar to the barriers faced by parents themselves. However, the proportions were slightly lower for each statement below, suggesting that there is more of a variety in the barriers parents experience when trying to access dental care for their child/children compared to when accessing for themselves.

Two in five cite the costs of dental services (40%) as barriers, while another one quarter of parents are unable to access dental services for their children on a regular basis due to not having private dental insurance (28%) or the expense of getting to dentist/oral health professional (25%). A similar proportion of parents in the target group also find it difficult to afford the costs of the service on a regular basis if they have multiple children (26%).

Other secondary barriers that affect access for children are:

- An inability to miss school/work (19%);
- The anxiety or fear of visiting a dentist/an oral health professional (17%); and
- The location is inconvenient (16%).

Almost double when compared to parents themselves, 17% say that they visit the dentist regularly for their child/children. This proportion rises to 25% among those who have access to insurance (versus 13% without dental coverage) and is also higher among women (18%), compared to men (14%).

Similar to the previous findings, the cost of dental services is indicated as more of a barrier by parents with young children – aged 5 and younger (45%), those without access to dental insurance (43% vs. 36% with) and women (42% vs. 38% of men). Parents who have older children, aged 6-11, are more likely to cite the higher costs associated with having multiple children (30% with a child aged 9-11; 29% with child aged 6-8) compared to those with children 5 and younger (26%) and not being able to miss school/work (20% vs. 16% for children 5 and younger) as barriers. Those without dental insurance are more likely to say they encounter all of barriers listed, with the exception of not being able to miss school/work or not having the time.

TABLE 16. BARRIERS TO ACCESSING DENTAL CARE FOR ONE’S CHILD/CHILDREN

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
Cost of the service	40	38	42	45	39	40	36	43
Lack of insurance	28	27	29	29	29	29	16	34
Cost of the service because I have more than one child requiring dental care	26	26	26	26	29	30	19	29
Cost of getting to the dentist or oral health professional	25	27	23	23	24	26	15	29
Can’t miss school or work	19	21	18	16	20	20	20	19
Anxiety or fear	17	19	16	15	18	18	15	18
Lack of access to a dentist or oral health professional	17	23	14	13	19	16	10	20
Location of dentist or oral health professional is not convenient to get to	16	21	13	14	18	15	10	19
Don’t have the time	15	17	13	13	16	14	14	15
Other	3	2	4	6	1	1	4	3
Child is too young/has no teeth yet	2	1	3	4	<1	<1	3	2
Special needs child/autistic	<1	-	<1	<1	<1	<1	<1	<1
Child is scared/cries a lot/hates it	<1	-	<1	<1	<1	-	<1	<1
Other	1	1	<1	1	1	<1	1	<1
I visit regularly	17	14	18	14	17	17	25	13

Q21. Which of the following, if any, prevent you from taking your child/children to a dental office or oral health professional on a regular basis?

Base: Total sample

Those who identified as a visible minority were more likely to cite the following as preventing them from being able to access dental care for their child/children.

- Costs of travelling to/from the office (34%);
- The cost of the services because of having multiple children (30%)
- Being unable to access a dentist/oral health professional (23%);
- Being absent from school/work (23%); and
- The inconvenience of getting to a dental office (21%).

Similar to the previous question, no significant are noted by those living in rural/remote communities versus more urban centres.

Several differences by demographics, in terms of barriers faced by parents, are outlined below.

- *Cost of dental services* are more likely to prevent the following groups from accessing dental care services for their children:
 - Residents of Manitoba/Saskatchewan (49%), compared to all other provinces;
 - Those who are unemployed (52%) or not employed/not in the workforce (45%), compared to those who are employed (38%);
 - Those who make less than \$60,000 in household income (48% less than \$40,000; 44% \$40,000 to \$59,999), compared to those who make \$60,000 to \$89,999 annually (34%); and
 - Those who identify as speaking a language, other than English/French at home (53%), compared to Anglophones (40%) and Francophones (38%).
- Those living in the Prairies (37%) and/or who make less than \$40,000 in household income (34%) are more likely to view a *lack of dental insurance* as a barrier.
- Challenges with regards to the *costs of dental services for multiple children* are higher among parents:
 - Who have larger households of 5 or more people (36%), relative to those with smaller household of 2 to 4 people (23%);
 - Those who need to travel 25 kilometres or more to a dental clinic (33%), relative to those who live 5 to 25 kilometres (25%) or less than 5 kilometres (23%) away; and
 - Aged 35-44 (29%), relative to aged 18 to 34 (24%) or 45 and older (23%).
 - This is also the case for those living in Western Canada – Manitoba/Saskatchewan (33%), British Columbia/North (33%) and Alberta (30%), compared to Central (25% Quebec and 22% Ontario) and Atlantic Canada (24%).
- Similar to the previous findings, those who cite *an inability to miss school or work*:
 - Are Indigenous (28%)
 - Are university-educated (23%), compared to those college educated or have a trades certification (16%) or high school education (15%).
 - Whose nearest dental clinic is 25 kilometres or more away from their home (23%), compared to 5 to 25 kilometres (19%) or less than 5 kilometres away (16%);
 - Are employed (22%), compared to those who are unemployed (11%) or not in the workforce (8%); and
 - Have a household income between \$60,000-\$89,999 (22%), compared to those with less than \$40,000 annually (14%).
- The *dental office location being inconvenient* is more likely to prevent those who:

- Identify as Indigenous (33%);
- Nearest dental clinic is 25 kilometres or more away from their home (26%); relative to those 5 to 25 kilometres (15%) or less than 5 kilometres away (13%);
- Are university-educated (23%) versus lower attainment (10%);
- Have a higher household income (\$60,000 to \$89,999 annually) (22%), relative to lower income households (12% \$40,000-\$59,999; 11% less than \$40,000);
- Employed (19%), relative to unemployed (13%) or not in the workforce (6%); and
- Are under the age of 45 (17%), relative to those 45 and older (12%).
- Those living in Atlantic Canada (25%) and Quebec (21%) are more likely to say they bring their child/children to a dentist on a regular basis, compared to Alberta (17%), Ontario (16%), British Columbia or the North (12%) and Manitoba and Saskatchewan (8%).
- The *costs of getting to the dentist* (32%), *a lack of access to dentists* (30%), *not having the time* (23%) and *anxiety or fear* (22%) are barriers more commonly faced by Indigenous respondents.

D. Views on the Canada Dental Benefit

A series of questions were posed to all parents to assess their awareness of the Canada Child Benefit, attitudes towards the program, and better understand the motivators and barriers to applying for the benefit.

1. Awareness of the Canada Dental Benefit

There are modest levels of awareness of the Government of Canada's Canada Dental Benefit, with almost two thirds of parents (64%) citing that they are aware of the program. However, a smaller proportion of those who are aware say they are *well-informed* (22%), while the plurality say that they *don't know much about the project* (42%). Over one third (36%) of parents have not heard of the program.

As per the table below, awareness is higher among certain subgroups of the population, including those who have access to dental insurance (73%, versus 60% who do not), women (68% versus 58% of men), and parents of children aged 5 and younger (68%) and aged 9 to 11 (67%), compared to aged 6 to 8 (62%).

TABLE 17. AWARENESS OF THE CANADA DENTAL BENEFIT

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
No, I have not heard anything about the program	36	42	32	32	38	33	27	40
Yes, I have heard of it, but don't know much about the program	42	39	44	46	40	43	53	37
Yes, I have heard of it and am well informed about the program	22	19	24	22	22	24	19	24
NET YES	64	58	68	68	62	67	73	60

Q23. Have you heard about the Government of Canada's Canada Dental Benefit for children under 12?
Base: Total sample

Those with visible minority status are much more likely to say they have heard about the Canada Dental Benefit and are well informed about the program (27%).

Awareness is generally higher among those who are not employed/not in the workforce (72%), were never married (71%), have a lower household income (less than \$40,000 annually) (69%); and older parents (45 years old or older) (69%). Awareness does not vary significantly across regions, but those living in rural and remote communities are more likely to be aware of the program (69%), but not know much about it (47%).

Among those who are aware of the Canada Dental Benefit, the plurality recall hearing about it in the news media (40%). Other common sources of awareness cited by similar proportions of respondents include on social media (30%), through family or friends (29%) or on an advertisement (21%).

There are several differences when it comes to sources recalled based on the parent's gender. Overall, men are more likely than women to have heard about the Canada Dental Benefit on social media (34%), through friends/family (32%), on an ad (25%), or through a healthcare provider (23%) or an oral health professional/dentist office (17%). Meanwhile, women are more likely to cite the CRA website or CRA My Account (7%) or another source (15%).

Those who did not have dental insurance are more likely to hear about the Canada Dental Benefit from the following sources, compared to those who have dental insurance:

- On social media (32%);
- In an advertisement (23%);
- From a healthcare provider (18%) or an oral health professional/dental office (16%); and
- In a blog post (8%).

There are no differences by the age of one's child/children.

TABLE 18. SOURCE(S) OF AWARENESS

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	1285	432	851	638	506	497	463	823
	%	%	%	%	%	%	%	%
On the news/in the media	40	41	39	39	41	39	44	37
On social media	30	34	28	29	28	29	27	32
From friends/family	29	32	27	29	27	28	27	30
Saw or heard an ad	21	25	19	18	22	24	18	23
From a healthcare provider	15	23	11	13	16	15	10	18
From an oral health professional/dental office	13	17	11	11	15	13	9	16
In a blog	6	9	4	4	5	6	3	8
Other	11	4	15	13	11	9	9	12
CRA/CRA website/CRA account	5	2	7	6	6	4	4	6
Government (website, letter, email...)	2	1	3	2	2	1	2	2
Mail/letter (general)	2	<1	3	3	1	2	2	2
Email (general)	1	<1	1	1	1	1	<1	1
Website/online (general)	<1	-	<1	<1	1	<1	-	<1
TV/radio	<1	<1	<1	<1	<1	1	1	<1
Other	1	1	1	1	1	1	<1	1
DK/NA/REF	<1	-	<1	<1	<1	<1	<1	-

Q24. Where did you hear about the Canada Dental Benefit?

Base: Have heard of Government of Canada's Canada Dental Benefit for children under 12

- Compared to the main sample, parents who are part of a visible minority are more likely to have heard about the program *through a medical professional* – either a healthcare provider (22%) or through a dental/oral health professional's office (17%). They are also more likely to cite *blogs* (10%) as a source of their awareness.
- Those residing in rural or remote communities are more likely to attribute their awareness to the *CRA website/ CRA My Account* (7%), *traditional mail/letters* (6%), or *another source* (19%).
- Parents who are more likely to have heard about the Canada Dental Benefit on the *news/in the media* include those with higher annual household incomes (\$60,000 to \$89,999) (45%) and who primarily speak English at home (41%).
- Those more likely to have heard about the program *on social media* include those who must travel 25 kilometres or more to access a dental clinic (37%) and/or have a higher educational attainment (36% for university or greater).
- Hearing from *family/friends* was more common among residents of British Columbia/North (37%) and younger parents, aged 18-34 years old (34%).
- While relatively few say they saw or heard an advertisement about the Canada Dental Benefit, those more likely to have seen this are parents who report having to travel 25 kilometres or more to access a dental clinic (28%) and those with higher annual household incomes (\$60,000 to \$89,999) (25%).
- Indigenous parents are more likely to have heard about the program through a healthcare provider (24%).

Those aware of the program were then asked if they have looked for any information about the Canada Dental Benefit in the last three months. Results were split on this question, suggesting that about half of parents had looked for information (49%), while the other half had not (51%). Parents who do not have access to private dental insurance are more likely to cite having searched for information (54%), compared to those who do (40%).

TABLE 19. SEARCHED FOR INFORMATION ON THE CANADA DENTAL BENEFIT IN LAST 3 MONTHS

		TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	1285	432	851	638	506	497	463	823	
	%	%	%	%	%	%	%	%	
Yes	49	52	48	50	48	49	40	54	
No	51	48	52	50	52	51	60	46	

Q25. In the last 3 months, have you looked for information about the Canada Dental Benefit?
Base: Have heard of Government of Canada's Canada Dental Benefit for children under 12

Parents more likely to have searched for information about the Canada Dental Benefit in the past three months include those who are:

- Indigenous (64%);
- University-educated (57%);
- Part of a visible minority group (56%);
- With larger households of 5 or more individuals (55%); and
- Married (52%).

Those residing in rural and remote communities (59%) were more likely to not have looked for any information on the benefit, compared to the average (51%).

Those aware of the Canada Dental Benefit program were then asked, on an open-ended basis, to share what they know about the program. While results suggest that overall knowledge is low, about one in five know that the interim program is targeted specifically to those who have children under 12 years of age (19%) and another 17% are aware that the program is to help cover dental expenses specifically for child. There was also strong awareness that to qualify for the program you must be considered a low-income family (19%), with some participants stating explicitly the less than \$90,000 annual household income threshold. Fewer than one-in-ten know that the program is being implemented by the federal government (9%) and is targeted to those who do not have private dental insurance (9%).

Women are more likely to know that the program is targeted to help families with children under the age of 12 (22%), is for those families who do not have private dental insurance (10%) and that the program is open for applications (7%). Men are knowledgeable that the program is being run by the Government of Canada/CRA (12%), as are parents with children aged 5 and younger (12%). In terms of access to dental insurance, parents who have access are more likely to cite the program as being for low-income families (25%) and for those, unlike themselves, who do not have insurance (16%). Those without dental insurance are more likely to know that the program is to help families with children.

TABLE 20. WHAT IS KNOWN ABOUT THE CANADA DENTAL BENEFIT

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	1285	432	851	638	506	497	463	823
	%	%	%	%	%	%	%	%
For children under 12/helps families with children under 12/covers dental expenses of children under 12	19	14	22	17	18	20	17	20
Helps low-income families/income must fall below a certain amount to qualify/below \$90K	19	20	18	20	20	16	25	15
Service for children/helps families with children/covers dental expenses for children	17	17	17	16	17	15	13	20
Affordability/financial assistance/helps offset costs/helps pay for dentist	14	13	15	16	15	14	14	15
Government program/run by the government/CRA	9	12	8	12	9	7	9	10
For those who don't have private insurance	9	6	10	10	9	10	16	5
It's available/can apply for it	6	4	7	7	6	6	5	6
Eligibility/must meet eligibility requirements/eligibility is restricted	6	5	6	5	5	7	4	6
Free dental for kids/provides children with paid dental care	5	6	5	4	5	6	7	5
Miscellaneous payment mentions (e.g., pays an amount per child, \$100, \$450...)	5	5	5	6	4	6	4	6
Good program/worth using	4	7	3	3	6	2	3	5
Available for 2 periods/two payments/offered for a period of two years	3	2	3	3	2	3	2	3
I don't qualify for it	2	1	3	2	3	2	4	1
\$650 per child (twice a year)	2	1	3	2	2	2	2	2
Coverage/what's covered (e.g., basic dental services)	1	1	1	2	1	1	1	1
Amount isn't much/it isn't enough	1	1	1	1	1	1	1	1
Easy to use/hassle-free/simple application process	1	1	1	1	2	1	<1	2
\$390 per child (twice a year)	<1	<1	-	-	<1	-	-	<1
\$260 per child (twice a year)	<1	-	<1	-	<1	<1	-	<1
Nothing/Not much/don't know the details	9	8	9	9	7	8	10	8
Other	5	8	3	4	5	5	3	6
DK/NA/REF	1	<1	1	1	1	1	1	1

Q26. What do you know about the Canada Dental Benefit?

Base: Have heard of Government of Canada's Canada Dental Benefit for children under 12

There are limited differences by visible minority status or other demographics in terms of the main things they know about the Canada Dental Benefit program.

There are only a few other significant different when it comes to regional breaks. Most notably, parents residing in Quebec are more likely than those in any other provide to cite specifically that the Canada Dental Benefit provides financial assistance to help off-set dental care costs (21%). Respondents from Alberta are more likely to believe that the program is for those who do not have private insurance (15%), specifically when compared to those living in Quebec (9%) and Ontario (6%). Those living in rural and remote communities are more likely to say they do not know much/the details regarding the Canada Dental Benefit (12%), compared to the average (9%).

2. Attitudes Towards the Canada Dental Benefit

There is strong support for the Canada Dental Benefit program, with almost nine in ten (87%) parents stating that they support the program, with close to two thirds (64%) stating that they ‘strongly’ support this program.

There are no differences by gender and age of the child in terms of support/opposition to the program. However, those without access to any form of dental insurance are generally more supportive (88%) than those without (85%).

TABLE 21. SUPPORT/OPOSE THE CANADA DENTAL BENEFIT

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
SUPPORT	87	86	88	88	87	88	85	88
Strongly support	64	63	65	66	59	68	61	66
Somewhat support	23	23	23	22	28	21	24	23
Neither support nor oppose	9	10	8	8	9	8	10	8
Somewhat oppose	2	2	2	2	2	2	3	1
Strongly oppose	1	1	1	1	1	1	1	1
OPOSE	2	2	3	3	2	3	4	2
Don't know	1	1	2	2	2	1	1	2

Q27. Do you support or oppose the interim Canada Dental Benefit?

Base: Total sample

Support for the Canada Dental Benefit Program is greater among those who are part of a visible minority group (90%), live 25 kilometres or more away from a dental clinic (91%) or identify as a Francophone (90%). There are no significant differences by region in terms of support or opposition of the program.

Almost half of parents surveyed (49%) say they are planning to apply for the Canada Dental Benefit, while another one in five (19%) already have applied. One third of parents have not applied and don't plan to (22%) or are unsure (11%).

Men (23%) and those with children aged 6 to 11 (21% aged 9 to 11; 20% aged 6 to 8) are more likely to say they have already applied for the benefit. Intention to apply is higher among those who do not have insurance (55%). Those with dental insurance (16%) and women (12%) are more likely to be unsure of their application status. Interestingly, 9% of those with access to a private dental insurance plan say they have applied to the program, however it's likely that they have/will be declined. This suggests that there is an opportunity to better inform/clarify those with insurance that they are likely ineligible to receive the benefit.

TABLE 22. APPLIED/PLANNING TO APPLY FOR THE CANADA DENTAL BENEFIT

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
NET YES	67	73	64	65	69	69	43	78
Yes, I have applied	19	23	16	15	20	21	9	23
Yes, I am planning to apply	49	50	48	50	49	48	35	55
No, I have not applied and do not plan to	22	18	24	24	20	21	41	13
Not sure	11	8	12	12	11	10	16	9
<i>TOTAL EXCLUDING NOT SURE</i>								
NET YES	75	80	73	73	77	77	51	86
Yes, I have applied	21	25	18	17	22	23	10	25
Yes, I am planning to apply	55	55	54	56	55	53	41	60
No, I have not applied and do not plan to	25	20	27	27	23	23	49	14

Q28. Have you applied to or are you planning to apply for the Canada Dental Benefit?

Base: Total sample

Application rates are reportedly higher among those:

- Who live at least 25 kilometres or more from a dental office (33%)
- Who are visible minorities (24%);
- With 5 or more people living in their household (24%);
- With an annual household income of \$60,000-\$89,999 (23%);
- Who are university-educated (22%);
- Who have older children (21% aged 9-11; 20% aged 6-8); and
- Are married/common law (20%).

Application rates are also higher in British Columbia and the North (27%) compared to other regions across the country, and lower among those residing in Alberta (14%) and Atlantic Canada (11%). Respondents residing in Atlantic Canada are also more likely to say that they are unsure of their application status (17%). Notably, those living in rural and remote communities are more likely to have not applied/not plan to (25%) or are unsure of their application status (17%).

3. Motivators and Detractors to Applying for the Canada Dental Benefit

Parents who indicated that they have applied or are planning to apply for the Canada Dental Benefit were asked two follow up questions. The first was to select from a list of 8 different attributes, which encouraged/are encouraging them to apply for the benefit. Respondents could also enter their own open-ended response.

By a wide margin, the health of one's family and children (52%) is identified as the key attribute that would encourage parents to apply to the program. About one-third of respondents identify the amount of the payment received through the program (36%) and the ease of accessing reliable information (32%) as

motivators. An easy process for applying (30%), having multiple children eligible for the benefit (30%), and having a child/children with urgent dental needs (29%) are cited by three-in-ten parents.

Results by gender show that women are more motivated to ensure the health of their family/children (56%) and by having multiple children that are eligible for the benefit (34%). Comparatively, being able to easily access reliable information about the program (36%) and recommendations from the child's healthcare provider(s) (28%) were stronger motivators for men to apply.

Those with younger children (aged 5 and younger) were more motivated to apply to ensure their child/children are healthy (57%) but are less motivated (compared to parents with children aged 6 to 11) by their child having urgent dental needs (25%) or the program being recommended by a healthcare professional (16%).

Parents without access to dental insurance are more encouraged by having multiple children that require dental care (32%) and on the counsel of their child's healthcare provider (26%).

TABLE 23. MOTIVATORS TO APPLYING FOR THE CANADA DENTAL BENEFIT

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	1343	545	796	608	565	516	276	1067
	%	%	%	%	%	%	%	%
Health of my family and children	52	46	56	57	51	51	55	51
Amount of the benefit payment	36	35	37	39	35	36	41	35
Easy access to reliable information about the benefit	32	36	29	28	32	28	28	33
Easy application process	30	33	28	27	29	32	28	31
I have more than one eligible child requiring dental care	30	26	34	33	36	37	25	32
My child/children had urgent dental needs (e.g., cavity, pain, accident, etc.)	29	30	29	25	32	34	25	30
I have a good understanding/knowledge of the benefit	26	28	25	23	27	23	25	27
The program was recommended by my child's healthcare provider	23	28	20	16	24	22	14	26
Other	1	<1	1	1	<1	1	1	<1
Financial assistance for dental care/free money	<1	<1	<1	1	<1	<1	1	<1
Other	<1	<1	<1	<1	-	<1	<1	<1
None of the above	2	1	2	2	1	1	2	2

Q30. Which of the following, if any, encouraged/are encouraging you to apply for the benefit?

Base: Have applied for Canada Dental Benefit

Having a good understanding of the program (32%) and the program being recommended by one's child's healthcare provider (29%) are more significant motivators for those who are visible minorities.

The health of one's family and/or children is more of a motivator for those:

- Who are not employed/not in the workforce (71%) or who are unemployed but looking for work (64%)
- Who are less educated (62% high school or less, 57% have attended college/trade school);
- Who have a lower average household income (less than \$40,000 annually) (61%);
- Those who live within 5 kilometres of a dental office (56%); and
- Those who have between 2-4 people living in their household (54%).

There are limited variations in motivators by region, except for the health of one's family/children was more motivating for those in rural/remote communities (64%).

Next, participants were shown another list with 8 different statements and were asked, when thinking about applying for the benefit/applying for the benefit again, which of the following aspects would most encourage them to do so? Again, respondents could also enter their own open-ended response.

While there were a range of responses, the top motivators for reapplying include if situations arise in which one's child/children has an urgent dental need (43%), if the benefit payments are increased (36%) and if parents have generally more knowledge about the Canada Dental Benefit program (35%). Three in ten parents also are motivated by improved access to trusted sources with information on the program (30%), a change/expansion of the eligibility criteria (30%) and improvements to the easy and efficiency of the application process (30%).

Looking across key variables, there are limited differences by age of the child and access to dental care, with the following exceptions:

- Those without access to private dental insurance would be more motivated to apply if their child/children had urgent dental needs (45%).
- Those with younger children (aged 5 and younger) were more likely to say none of these factors were motivators for them to apply (8%).

There are some significant differences among males, who are more motivated by being more informed – including having a better understanding of the program (40%) and being able to easily access reliable information (33%). Improving the application process (33%) and referrals from their child's healthcare provider (32%) were also stronger motivators for this group.

TABLE 24. MOTIVATORS TO RE-APPLYING FOR THE CANADA DENTAL BENEFIT

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	1343	545	796	608	565	516	276	1067
	%	%	%	%	%	%	%	%
If my child/children had urgent dental needs (e.g., cavity, pain, accident)	43	42	43	43	43	44	35	45
If benefit payments are increased	36	35	36	35	33	39	36	36
If I had a better understanding/knowledge of the benefit	35	40	32	32	35	32	31	36
If there was easier access to reliable information about the benefit	30	33	27	26	29	31	30	30
If the eligibility criteria were changed or expanded	30	29	30	27	29	32	30	29
If the application process was improved (e.g., it was easier, quicker, etc.)	30	33	27	27	31	28	30	29
If the program was recommended by my child's healthcare provider	29	32	26	27	28	27	25	30
If I lived close to a dental office or oral health professional	17	19	16	15	17	15	18	17
Other	1	<1	1	1	<1	1	1	<1
None of the above	5	2	8	8	6	5	6	5

Q31. Which of the following, if any, would encourage you to apply for the benefit again?

Base: Have applied for Canada Dental Benefit

There are no significant differences in the results to this question based on those who are part of a visible minority group versus those who are not.

Regionally, the only difference noted is that those in Quebec and/or in rural/remote communities are more likely so say that none of these factors would encourage them to reapply (10%).

One follow-up question was asked to those who did not apply (and are not planning to) or are unsure about applying to assess the potential barriers. Overall, the largest barrier cited was the lack of knowledge about whether or not they are eligible for the program which is mentioned by more than two in five (41%) parents. Less than one in five parents mentioned their child not having any urgent need for dental care (18%), the significant costs of dental care, even with the program payments (16%), and the eligibility criteria being confusing/complicated (16%) as preventing them from applying. Issues related to proximity/traveling to a dental office and a general lack of time for visits were not seen as barriers to applying for Canada Dental Benefit.

A lack of awareness around meeting eligibility criteria for the program was a barrier cited more frequently by those with access to private dental insurance (53%) and women (45%), compared to men (33%). Instead, men are more likely to point to their child having special needs/anxiety/fear of the dentist (14%) and issues related to living far from a dentist (10%) or not being able to access transportation to a dental office (7%) as barriers. Those without access to insurance more often cite the full range of statements listed as barriers, with the exception of those related to eligibility criteria.

TABLE 25. BARRIERS TO APPLYING FOR THE CANADA DENTAL BENEFIT

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	657	200	455	332	256	229	362	296
	%	%	%	%	%	%	%	%
I don't meet the eligibility criteria/am unsure if I meet the eligibility criteria	41	33	45	41	46	43	53	27
My child doesn't have urgent dental needs (e.g., cavity, pain, accident)	18	16	19	18	14	15	10	28
It still costs too much to get dental care	16	18	16	16	16	14	8	27
The eligibility criteria are confusing/complicated	16	17	16	17	18	15	15	18
I don't know where to find reliable information about the program	12	15	11	15	13	9	9	16
The application process is confusing/complicated	12	10	12	9	15	12	9	15
My child has special needs, anxiety or fears about dental care	9	14	7	7	9	10	7	12
The application process is time consuming	9	11	8	8	12	6	7	11
I don't live near a dental office or oral health professional	5	10	4	5	5	5	3	8
I don't have time to take my children	4	5	4	5	3	4	2	6
I am unable to get to dental care (e.g., I don't have access to transportation)	4	7	2	4	3	5	2	6
I don't have the necessary documentation to apply (e.g., Social Insurance Number, Canada Child Benefit payment, new Canadian)	4	3	4	3	3	4	2	6
Other	9	8	9	10	8	11	9	9
Costs are covered (e.g., through private dental insurance, social assistance, disability assistance program, etc.)	7	6	8	9	6	10	9	6
Other	1	2	1	1	2	1	-	3
None of the above	12	13	12	13	11	12	13	12

Q29. Which of the following, if any, would prevent you from applying for the benefit?

Base: Not sure or haven't applied for Canada Dental Benefit

Small base sizes restrict the ability to reliably compare differences across other demographic subgroups, including those who identify as visible minorities.

Regionally, parents living in Atlantic Canada were most likely to say that none of the above were barriers to applying, compared to those in other regions across the country. Dental care still costing too much for parents was cited more in Western Canada – Manitoba/Saskatchewan (24%), BC and the North (24%), and Alberta (22%) compared to other provinces across the country.

E. Recall and Impact of Advertising on the Canada Dental Benefit

Applications for the interim Canada Dental Benefit opened on December 1, 2022 to children under age 12 in families with an adjusted family net income of less than \$90,000 and without access to private dental insurance. Prior to and following the launch of the Benefit, the Government of Canada undertook to raise awareness of it via a wide-ranging advertising campaign utilizing social and traditional media and online advertising platforms.

The following sections assess levels of awareness of the Canada Dental Benefit among and the overall impact of the advertising among those who claim to have seen it.

1. Unaided Advertising Recall

All respondents were asked whether they recalled having seen, read, or heard any Government of Canada advertising about the Canada Dental Benefit within the last three months. Just over one third (35%) had while the remainder (65%) did not.

Women (37%) are more likely than men (32%) to recall the advertising. Recall was also higher among those with access to private dental insurance (41%) compared to those without (32%).

TABLE 26. UNAIDED RECALL OF ADVERTISING ABOUT THE CANADA DENTAL BENEFIT

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
Yes	35	32	37	39	31	36	41	32
No	65	68	63	61	69	64	59	68

Q32. In the last three months, have you seen, read or heard any Government of Canada advertising about the Canada Dental Benefit?

Base: Total sample

Respondents with household incomes under \$40,000 annually (39%) are also more likely to say they recall the advertising particularly in comparison to those with an annual household income of \$60,000 to just under \$90,000 (32%).

Levels of recall are relatively consistent across the regions, although higher in Ontario (37%) than Quebec (30%).

Sub-Group Analysis: Differences between those with and without dental insurance

Many of the same demographic variations noted above are also evident within the sub-group of respondents who do not have access to private dental insurance, although caution should be taken in examining these differences given the small sample sizes when examining the data at this level. Looking exclusively at the sub-group of those without dental insurance, recall of Government of Canada advertising about the Canada Dental Benefit is higher among:

- Respondents who are separated/divorced or widowed (43%) and those who have never married (40%) vs. those who are married or living in a common law relationship (29%);
- Those with a high school education or less (39%) vs. those with a university education (28%);
- Respondents whose annual household income is under \$40,000 (38%) vs. those with a household income of \$60,000 to just under \$90,000 (28%); and
- Women (34%) vs. men (29%).

Among the sub-group of those who have access to private dental insurance, recall is higher for:

- Those aged 18-34 (48%) vs. those aged 45 or older (34%);
- Anglophones (45%) vs. Francophones (31%) and
- Those with children aged 5 or younger (44%) vs. those with children between the ages of 9 and 11 (35%).

2. Unaided Recall: Sources

For those who recalled the advertising about the Canada Dental Benefit (35% of all respondents), the top five sources included: advertising on an Internet website (29%), on Facebook (25%), TV (25%), and while conducting an Internet search (23%) and on YouTube (20%). Fewer than one in five cited radio (14%), Instagram (11%), a poster in a dental facility (11%). One in ten, or fewer, respondents mentioned Twitter (10%), streaming services (9%), a mobile app (8%), public transit advertising (7%), outdoor billboards (6%), digital screens (5%), Spotify (4%), the CRA website/account (4%), information in the mail or a letter (3%), podcasts (3%) and Pinterest (3%). The Government of Canada was mentioned as a source by 1% of respondents.

Women (32%) are more likely than men (24%) to recall seeing, hearing, or reading about the Canada Dental Benefit on an Internet website. This was also the case for parents with children aged 6-8 (32%) and those with children under 6 years of age (31%), relative to those with children aged 9-12 (24%).

Respondents without access to dental insurance are more likely to recall seeing a poster in a dental facility (13%) or to have seen the advertising on a streaming service (11%), compared to those without dental coverage (8% and 5%, respectively).

TABLE 27. UNAIDED RECALL: SOURCES

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	703	238	464	366	254	267	264	440
	%	%	%	%	%	%	%	%
Internet website	29	24	32	31	32	24	33	27
Facebook	25	22	27	28	22	28	26	25
TV	25	31	22	23	20	28	29	23
Internet search	23	23	23	22	26	22	22	24
YouTube	20	28	15	17	16	19	19	20
Radio	14	17	13	14	14	18	16	14
Instagram	11	17	8	12	10	8	8	13
Poster in a dental facility	11	14	9	9	13	9	8	13
Twitter	10	14	8	9	11	8	10	10
Streaming services (e.g., Netflix, Prime Video, Crave Canada, Disney+, etc.)	9	14	6	8	9	8	5	11
Mobile app	8	12	6	8	7	8	8	9
Public transit (bus, train, subway)	7	14	3	7	6	5	5	8
Outdoor billboard	6	11	3	4	7	6	5	6
Digital screen (in residential building)	5	5	5	6	3	4	6	4
Spotify	4	7	3	4	5	4	5	4
Other transit (taxi/rideshare stop, airport)	4	8	2	4	4	3	3	4
Podcasts	3	6	2	5	4	3	3	4
Pinterest	3	5	2	2	3	4	3	3
CRA/CRA website/CRA account	4	2	5	5	5	3	4	4
Government (website, letter, email...)	1	<1	1	<1	1	<1	1	<1
Mail/letter (general)	3	<1	3	3	2	3	3	2
Other	2	<1	3	2	3	3	1	2
DK/NA/REF	<1	-	<1	-	<1	<1	<1	<1

Q33. Where have you seen, read or heard this ad about the Canada Dental Benefit?

Base: Have seen, read or heard advertising about the Canada Dental Benefits

Sources vary according to educational status, household income, language, and visible minority status:

- Respondents with a university education are more likely than others to recall seeing, hearing, or reading about the advertising via YouTube (29%), Instagram (15%), a poster in a dental facility (15%), Twitter (14%), streaming services (12%), public transit advertising (11%), outdoor billboards (9%), digital screens (7%), Pinterest (6%), and podcasts (6%).
- Those with annual household incomes in the range of \$60,000 to \$89,999 are more likely than those with lower household incomes to cite the following sources: Twitter (14%), streaming services (13%), and Pinterest (5%).
- Respondents who speak a language other than English or French at home are more likely to say they recall seeing, hearing, or reading about the Canada Dental Benefit on an Internet website (38% vs. Francophones at 20%) or while undertaking an Internet search (37%). Francophones are more likely to cite radio (20%) as a source compared to Anglophones (13%) or those who speak a language other than English or French (9%).

- Visible minorities (31%) are more likely to indicate having seen the advertising on Youtube relative to the average (20%).

Across the regions, there were several variations of note:

- Respondents in Ontario (34%) are more likely than those in Manitoba/Saskatchewan (21%) and Quebec (20%) to recall the advertising on an Internet website.
- Alberta-based respondents (31%) are more likely to cite YouTube as a source compared to those in Ontario (20%), Manitoba/Saskatchewan (15%) and Quebec (13%).

Compared to those living in rural areas, respondents residing in urban centers are more likely to have cited the following as sources: YouTube (22% vs. 8% among rural residents), Instagram (12% vs. 6%), Twitter (11% vs. 3%), streaming services (10% vs. 3%), a mobile app (9% vs. 3%), public transit (8% vs. 2%), digital screens (6% vs. 1%), Spotify (5% vs. 1%), and podcasts (4% vs. 1%).

Sub-Group Analysis: Differences between those with and without dental insurance

Among the target audience of those who do not have access to private dental insurance, there are a number of demographic variations with respect to where respondents recall having seen the advertising and these tend to be mainly on the basis of gender, household income and language:

- Women (31%) are more likely than men (20%) to recall seeing the advertising on an Internet website. By contrast, men are more likely than women to have seen the advertising on TV (30% vs. 19%), YouTube (29% vs. 15%), and on Instagram (21% vs. 9%).
- Those residing in households with an annual income of \$60,000 to just under \$90,000 (33%) are more likely to report seeing the advertising on YouTube compared to those with household incomes between \$40,000 to just under \$60,000 (19%) and those whose household income is under \$40,000 (8%). The higher income segment (33%) is also more likely than those in the lowest income segment (18%) to say they recall having seen the advertising on Facebook.
- Anglophones (29%) are more likely than Francophones (18%) to have seen the advertising on an Internet website. Francophones (34%) are more likely to recall having seen the advertising on Facebook, compared to Anglophones (23%).

The sample size at the sub-cell level is too small to be able to report on differences among those with dental insurance.

3. Unaided Recall: Message Takeaway

When asked what they remembered about the ad, some respondents recalled details relating to the focus of the benefit on dental care generally (13%) or specific to children (9%). Others recalled that the benefit was aimed at lower income families (9%), was a government program (9%) or was aimed at children under 12 years of age (8%). Another 7% recalled that the ad mentioned the requirement to apply for the benefit. Smaller proportions recalled various other aspects of the ad relating to specifics of the program such as the dollar amount of coverage on a per child basis, the availability of the benefit over 2 periods, or the imagery from the ad (between 1% and 5%). Just over one in ten respondents (13%) did not recall anything in particular about the ad.

Women are more likely than men to say they recall that the benefit aimed at helping lower income families (11% vs. 4%, respectively).

TABLE 28. UNAIDED RECALL: MESSAGE TAKEAWAY

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	703	238	464	366	254	267	264	440
	%	%	%	%	%	%	%	%
Dental care/dental benefits/helping offset costs of oral care	13	15	11	13	13	12	13	13
Children dental benefit/dental care for children	9	9	9	10	11	8	9	10
Helps low-income families/income must fall below a certain amount to qualify/below \$90K	9	4	11	10	8	8	8	9
Government program/run by the government	9	10	8	10	7	7	9	8
For children under 12	8	8	8	8	5	8	7	9
Just saying you can apply/to apply/enroll in it/shows how to fill out form	7	6	8	6	9	7	6	7
Eligibility/eligibility is restricted/I may be eligible	6	5	7	5	5	8	7	6
Informative/info about the program/what is offered	6	4	7	8	7	4	6	6
Children shown/happy children/smiling/happy smiles	5	10	2	3	5	7	2	7
About the program/benefits/benefits of the program	4	6	4	5	4	4	5	4
It's available/being implemented/new	3	4	3	4	4	3	3	3
Family benefit/for families/help for families	3	4	3	4	4	2	4	3
Good/it's good/good idea	3	4	2	4	3	1	3	3
For those who don't have private insurance	2	2	3	3	3	1	4	2
Miscellaneous payment mentions (e.g., pays an amount per child, \$100, \$450...)	2	3	2	2	2	3	2	3
Canada Dental Benefit	2	3	1	2	1	4	2	2
It's free/free dental care	2	3	2	2	1	2	3	1
Online ad/saw on website	2	<1	2	2	2	2	3	1
Accessible/easy to use/convenient/quick	1	2	1	1	<1	2	2	1
Children program/it's for children	1	2	1	1	1	2	2	1
News report on TV/Media/Discussed during news broadcast	1	<1	1	2	1	1	1	1
Available for 2 periods/two payments/offered for a period of two years	1	1	1	1	1	<1	<1	1
\$650 per child (twice a year)	1	-	1	1	<1	1	2	1
Mailout/received letter	1	<1	1	1	1	1	1	1
Saw on social media (e.g., Facebook)	1	<1	1	1	1	1	2	<1
Ads caught my attention/Funny	1	2	<1	1	1	<1	1	1
Word out mouth/heard about it/friends and family told me	1	<1	1	1	1	2	1	<1
Just the name/mention of it	1	-	1	1	1	-	1	1
Poster/Video in Dentist office	1	1	<1	1	<1	-	2	-
Radio ad/heard on radio	<1	1	<1	-	-	1	1	<1
\$260 per child (twice a year)	<1	-	<1	-	<1	<1	-	<1
\$390 per child (twice a year)	<1	-	<1	-	<1	<1	-	<1
Nothing/Not much	13	10	14	14	11	15	13	13
Other	9	11	7	7	8	8	9	8
DK/NA/REF	9	4	11	7	10	11	8	9

Q34. What do you remember about the ad?

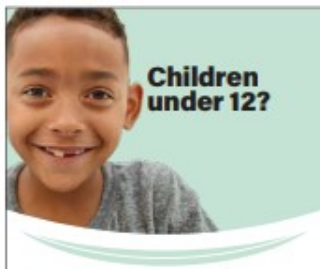
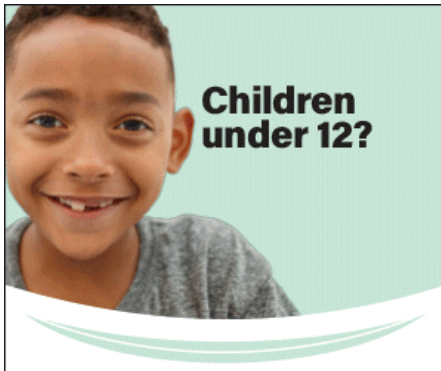
Base: Have seen, read or heard advertising about the Canada Dental Benefits

There were no other demographic or regional variations of note. Additionally, further examination of demographic variations for the two sub-groups of those with and without dental insurance is limited due to small cell sizes across each of the response categories.

4. Aided Advertising Recall

All respondents were shown three different examples of ads used in the campaign, including a digital banner ad, an out-of-home ad developed for placement in public transit stations and on outdoor screens, and a video ad for use on social media, connected TV and YouTube.

Digital Banner Ad



Out-of-Home Ad



Smile!
The Canada Dental Benefit is here for kids under 12
Find out how eligible families with an income under \$90,000 can get up to \$650 for dental care.
Canada.ca/dental

Souriez!
La Prestation dentaire canadienne est arrivée pour les enfants de moins de 12 ans
Découvrez comment les familles admissibles dont le revenu est inférieur à 90 000 \$ peuvent recevoir jusqu'à 650 \$ en soins dentaires.
Canada.ca/dentaire

Video Ad



To reduce any response bias, the order in which the three concepts were shown to respondents was rotated across the entire sample. Following this, respondents were asked specifically if they had seen, read, or heard these ads over the last 12 to 16 weeks. Just over one in five (22%) had, while the remainder (78%) did not.

Similar to the results on the question gauging unaided recall, those respondents with access to private dental insurance (28%) are more likely to have recalled the ads after being exposed to them in the survey compared to those without dental coverage (20%).

TABLE 29. AIDED RECALL OF ADVERTISING ABOUT THE CANADA DENTAL BENEFIT

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	2000	745	1251	939	822	745	638	1362
	%	%	%	%	%	%	%	%
Yes	22	23	22	25	20	22	28	20
No	78	77	78	75	80	78	72	80

Q35. Over the past 12-16 weeks, have you seen, read or heard these ads?
Base: Total sample

Those more likely to recall the ad include:

- Households with an annual income between \$40,000 and \$59,999 (25%) relative to those with a household income of \$60,000 to just under \$90,000 (21%).
- Families with children under the age of 6 (25%), compared to those with children between the ages of 6 and 8 (20%).

Regionally, respondents in Ontario (26%) are more likely to recall seeing the ads relative to those in Quebec (19%) and Manitoba/Saskatchewan (17%).

Further examination of the two sub-groups of those with and without access to dental coverage does not reveal any additional demographic variations of note.

5. Aided Recall: Sources

Among those who recalled the ads, a variety of sources were mentioned. Most frequent mentions were of YouTube (42%), TV (33%), Facebook (30%) and an Internet website (24%). Other sources mentioned by less than 20%, but more than 10% of respondents included an Internet search (17%), streaming services (13%), radio (13%), and Instagram (13%). 10% or fewer mentioned public transit (10%), a mobile app (10%), a poster in a dental facility (9%), Twitter (9%), an outdoor billboard (6%) or a digital screen (6%), among other sources.

The frequency by which various sources were mentioned did not vary significantly by gender, age of the child or access to dental insurance.

TABLE 30. AIDED RECALL: SOURCES

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	446	172	271	231	166	165	177	268
	%	%	%	%	%	%	%	%
YouTube	42	45	40	42	39	37	42	42
TV	33	33	32	33	32	32	33	33
Facebook	30	27	31	31	27	25	27	31
Internet website	24	23	25	27	25	20	24	24
Internet search	17	21	15	18	12	16	19	16
Streaming services (e.g., Netflix, Prime Video, Crave Canada, Disney+, etc.)	13	18	10	12	17	11	9	16
Radio	13	14	12	13	12	14	15	11
Instagram	13	19	9	11	14	9	9	15
Public transit (bus, train, subway)	10	13	9	10	12	10	9	11
Mobile app	10	13	8	8	9	12	7	12
Poster in a dental facility	9	7	11	9	13	11	6	12
Twitter	9	13	7	5	10	11	8	10
Outdoor billboard	6	10	4	5	10	4	4	7
Digital screen (in residential building)	6	8	5	6	6	5	5	6
Spotify	5	7	4	5	5	5	4	6
Podcasts	5	7	3	4	5	4	3	6
Other transit (taxi/rideshare stop, airport)	4	6	3	3	5	3	4	5
Pinterest	4	6	3	2	6	3	2	5
Other	2	-	3	3	3	3	1	3
Word of mouth/friend/family	1	-	1	1	1	1	1	1
Other	1	-	2	2	2	2	-	2
DK/NA/REF	<1	-	<1	<1	-	<1	-	<1

Q36. Where have you seen, read or heard these ads about the Canada Dental Benefit?
Base: Have seen, read or heard ads

There were no other variations of note across demographic groups or by region. Similarly, and given the small cell sizes when examining break-outs across demographic groups, there are no significant variations within each of the two sub-groups of those with and without access to dental insurance.

6. Aided Recall: Message Takeaway

The group of respondents who recalled one or more of the ads shown to them were then asked what they thought were the main points the ads were trying to communicate.

About one-third say the ads focus is on dental benefits or dental care generally (33%) or on dental care for children more specifically (31%). Others believe the focus of the ads was mainly on the target audience, including lower-income households (19%) and children under 12 (14%). Some commented more generally on the ads promoting a government program (13%) and information about a program (11%). Other key messages such as the payment level are mentioned with less frequency (by 1% or fewer respondents).

Apart from the fact that women (23%) are more likely to say that the ads focused on help for low-income families, compared to men (13%), there are not other significant differences in message takeaway by gender, age of children in the household or by access to dental insurance.

TABLE 31. AIDED RECALL: MESSAGE TAKEAWAY

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	446	172	271	231	166	165	177	268
	%	%	%	%	%	%	%	%
Dental benefits/dental care/oral care/promote going to the dentist (general)	33	35	31	33	35	31	32	33
Dental care for children/covers dental expenses for children	31	32	30	32	31	29	29	32
Helps low-income families/income must fall below a certain amount to qualify/below \$90K	19	13	23	19	17	20	24	16
For children under 12	14	13	15	11	17	14	13	15
Government program/run by the government/CRA	13	15	12	13	14	13	14	12
Informative/info about the program/what is offered	11	7	14	10	13	13	8	13
Service for children/helps families with children	8	7	10	11	8	11	8	9
Affordability/financial assistance/helps offset costs	7	7	7	7	8	7	7	8
Eligibility/eligibility is restricted/I may be eligible	6	4	7	4	6	7	5	7
Apply/should apply/get into the program	5	5	5	5	2	6	5	5
It's good/good program/worth using	4	5	3	4	5	4	5	3
For those who don't have private insurance	2		4	2	2	2	3	2
New benefit/it's new	2	1	3	2	3	2	3	2
Free dental care/it's free (general)	2	3	1	1	2	2	4	1
Free dental for kids/provides children with paid dental care	2	1	3	2	3	1	2	2
Easy to use/hassle-free/simple application process/convenient/quick	2	1	2	2	1	2	2	2
\$650 per child (twice a year)	1	1	2	1	1	1	2	<1
\$260 per child (twice a year)	<1	1	-	<1	-	-	-	<1
\$390 per child (twice a year)	<1	1	-	<1	-	-	-	<1
Miscellaneous payment mentions (e.g., pays an amount per child, \$100, \$450...)	<1	1	-	<1	-	-	1	-
Other	3	3	2	3	2	2	4	2

Q37. What do you think is the main point these ads are trying to communicate?

Base: Have seen, read or heard ads

Larger households, specifically those with 5 or more members (42%) are more likely to say the main point of the ads is about dental benefits or dental care, compared to households with 2 to 4 members (29%). This was also true for Anglophones (35%), compared to Francophones (20%). By contrast, Francophones (47%) are more likely to have focused on the messaging specific to dental care for children, compared to Anglophones (26%).

There are few regional variations of note, although respondents in Atlantic Canada (53%) are more likely to have mentioned dental benefits in general as the main point of the ads, compared to those in Ontario (33%), British Columbia/North (29%), Quebec (29%) and Manitoba/Saskatchewan (26%).

Further demographic analysis of responses to this question for the sub-groups who have or do not have access to dental insurance is limited due to small cell sizes at this level.

7. Aided Recall: Assessment of Ads

Those claiming to have seen the ads were asked to respond to a series of agree-disagree statements intended to assess the ads both in terms of the creative approach taken and the content.

At least four in five respondents agree that:

- These ads talk about an important topic (87%) – 58% *strongly agree* with this statement; and
- These ads made me more likely to think that childhood dental care is important (80%) – 49% *strongly agree*.

There are also high levels of agreement that:

- These ads provide new information (78%) – 43% *strongly agree*;
- These ads catch my attention (77%) – 39% *strongly agree*;
- These ads are relevant to me (76%) – 42% *strongly agree*;
- These ads clearly convey the eligibility criteria for the benefit (74%) – 42% *strongly agree*;
- These ads clearly convey that the Government of Canada can provide answers to parents with questions on the benefit (74%) – 40% *strongly agree*;
- These ads made me more likely to apply for the benefit (74%) – 42% *strongly agree*; and
- These ads do not favour one political party over another (70%) – 44% *strongly agree*.

Just under one-quarter (23%) agree that the ads are difficult to follow (12% *strongly agree*).

Men are more likely than women to agree that the ads are relevant (83% vs. 72%, respectively), that they clearly convey the Government of Canada can provide answers to parents who have questions about the benefit (82% vs. 70%, respectively), and that they are difficult to follow (29% vs. 19%, respectively).

Those without access to private dental insurance are more likely to agree with many of the statements, compared to those who have dental coverage:

- 84% say the ads are more likely to make them think that childhood dental care is important (vs. 73% of those with dental insurance);
- 84% agree the ads are relevant to them (vs. 65%);
- 82% agree the ads made them more likely to apply for the benefit (vs. 61%);
- 82% agree that they caught their attention (vs. 70%); and
- 80% agree that the ads clearly convey the Government of Canada can offer answers to questions about the benefit (vs. 66%).

TABLE 32. PERCEIVED EFFECTIVENESS OF THE ADS
% Strongly/Somewhat Agree

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	446	172	271	231	166	165	177	268
	%	%	%	%	%	%	%	%
These ads talk about an important topic	87	86	88	86	84	85	84	89
These ads made me more likely to think that childhood dental care is important	80	84	78	78	79	79	73	84
These ads provide new information	78	81	77	77	78	74	74	81
These ads catch my attention	77	81	74	76	77	75	70	82
These ads are relevant to me	76	83	72	73	76	74	65	84
These ads clearly convey the eligibility criteria for the benefit	74	78	73	71	73	74	70	78
These ads clearly convey that the Government of Canada can provide answers to parents with questions on the benefit	74	82	70	71	77	70	66	80
These ads made me more likely to apply for the benefit	74	78	71	71	73	71	61	82
These ads do not favour one political party over another	70	75	67	69	72	67	65	74
These ads are difficult to follow	23	29	19	22	27	21	19	25

Q38. Please indicate your level of agreement with the following statements about these ads.
Base: Have seen, read or heard specific ads in past 12-16 weeks

There are a number of variations across demographic groups:

- University educated respondents are more likely to agree with all the statements, compared to those with a college education or trades/apprenticeship training and those with a high school education or less.
- Those with an annual household income of \$60,000 to just under \$90,000 are more likely to agree that the ads clearly convey the eligibility criteria for the benefit (86% vs. 71% for those with a household income of \$40,000-\$59,000 and 61% for those under \$40,000) and that the ads do not favour one political party over another (80%; 68%; and 57%, respectively).
- Compared to the average, Indigenous respondents are more inclined to agree with a number of the statements, including that the ads make them more likely to apply for the benefit (93%), to think that childhood dental care is important (92%), catch their attention (89%), that they do not

favour one political party over another (89%), they clearly convey the eligibility criteria for the benefit (89%), and they provide new information (88%).

- Visible minorities are also more likely to agree with many of the statements, including that the ads catch their attention (84%), they convey that the Government of Canada can provide answers to parents about the benefit (84%), they are personally relevant (83%), the ads make them more likely to apply for the benefit (81%), and that the ads clearly convey the eligibility criteria (80%).

Agreement levels with each statement do not vary significantly across the regions.

Sub-Group Analysis: Differences between those with and without dental insurance

Among those without access to private dental insurance, men are more likely than women to agree with several of the statements, including:

- The ads are relevant to them (92% vs. 79%);
- The ads make them more likely to think that childhood dental care is important (92% vs. 80%);
- The ads clearly convey that the Government of Canada can provide answers to parents with questions on the benefit (92% vs. 73%);
- The ads catch their attention (90% vs. 77%); and
- The ads do not favour one political party over another (80% vs. 69%).

In general, within this sub-group agreement with virtually all statements is higher among university educated respondents, relative to those with a high school education or less, and among those at the upper range for annual household income (\$60,000-<\$90,000) compared to those with lower levels of income. Notably, just under one third (31%) in both these groups found the ads difficult to follow, a higher proportion as compared to their counterparts with lower levels of educational attainment or household income.

Indigenous respondents without access to dental insurance are also more likely, relative to the average for this sub-group, to agree that:

- The ads make them more likely to apply for the benefit (96%);
- The ads catch their attention (94%);
- These ads make them more likely to think that childhood dental care is important (93%);
- The ads clearly convey the eligibility criteria for the benefit (93%);
- They do not favour one political party over another (91%); and
- These ads provide new information (90%).

Some of the same patterns as have been noted above are also evident when examining demographic variations among the group with access to dental insurance. Those with a university education are more likely to agree with many of the statements.

8. Aided Recall: Impact of the Ads

Two in five respondents who saw, read or heard the ads were prompted to look for information online on the benefit (40%) or to think more about dental care for their child/children (38%). About one-third or slightly fewer visited the Canada.ca/dental website (33%), shared information with a friend or family members (32%) and thought more about dental care for themselves (30%). Almost one-quarter took their child/children to get dental care using the benefit payment (23%) or submitted an application for the Canada Dental Benefit for their child/children (22%). Slightly fewer say they booked an appointment for their child/children to get dental care services (20%) or discussed the benefit with a dentist, oral health care professional or other healthcare provider (18%). A small proportion (11%) did not take any action.

Compared to those with access to private dental insurance, those without coverage are more likely to report having thought more about dental care for their children (44% vs. 27%) as well as for themselves (34% vs. 25%), , taking their children to get dental care using the benefit payment (28% vs. 15%), submitted an application for the benefit (27% vs. 14%), booked an appointment for dental care services for their child (26% vs. 11%), and discussed the benefit with a dentist oral health professional or other healthcare provider (21% vs. 13%).

Respondents with children aged 6 to 8 are more likely to say they booked an appointment compared to those with younger or older children, aged 9-11 (27% vs. 17%).

TABLE 33. ACTIONS TAKEN AS A RESULT OF EXPOSURE TO THE ADS IN MARKET

	TOTAL	MALE	FEMALE	AGE OF CHILD: 0-5	AGE OF CHILD: 6-8	AGE OF CHILD: 9-11	ACCESS TO INS.	NO ACCESS
n=	446	172	271	231	166	165	177	268
	%	%	%	%	%	%	%	%
Looked for information online on the benefit	40	35	42	42	35	42	36	42
Thought more about dental care for my child/children	38	34	39	40	38	31	27	44
Visited the Canada.ca/dental website	33	37	30	29	31	36	30	35
Shared the information with a friend or family member	32	31	33	34	29	31	27	36
Thought more about dental care for myself	30	30	31	30	30	26	25	34
Took my child/children to get dental care using the benefit payment(s)	23	29	19	16	26	24	15	28
Submitted an application for the Canada Dental Benefit for my child/children	22	23	21	19	26	22	14	27
Booked an appointment for my child/children to get dental care services	20	22	19	17	27	17	11	26
Discussed the benefit with a dentist, oral health professional or other healthcare provider	18	19	17	16	17	18	13	21
Other	1	1	1	1	2	1	2	-
I didn't do anything as a result of seeing the ad	11	8	13	10	15	16	15	8

Q39. Did you do any of the following as a result of seeing the ad?
Base: Have seen, read or heard specific ads in past 12-16 weeks

Visible minorities are more likely to report that as a result of seeing the ad they shared the information with a friend or family member (40%), visited the Canada.ca/dental website (40%), thought more about dental care for themselves (38%), and took their child/children to get dental care using the benefit payment (30%).

Regionally there are few variations in terms of actions taken, although a higher proportion of respondents in Quebec (20%) reported not taking any action compared to those in Alberta (8%), Ontario (8%) and Atlantic Canada (6%).

Sub-Group Analysis: Differences between those with and without dental insurance

Among those without access to insurance, there were few demographic variations of note. The one exception was that those with a university education (38%) are more likely than those with high school education or less (18%) and those with a trade certification or college education (15%) to have taken the child/children to get dental care services. Small cell sizes for demographic break-outs among the sub-group of those with dental insurance precludes any deeper examination of variations.

F. Profile of Respondents

The information below offers a snapshot of respondents who participated in the survey by household income, region, gender, access to dental insurance, and age of child/children under 12. Additional key demographics such as age of parent, marital status, household composition, educational attainment, employment status, ethnicity and language spoken at home are also shown below. Quotas were set by region to ensure a representative sample was achieved. As such, the regional distribution of the sample generally conforms to Canadian Census data.

1. Demographic Profile in Brief

Given the income eligibility requirements for the Canada Dental Benefit, only respondents who reported an adjusted family net income of less than \$90,000 were allowed to participate. As such, the sample comprised a cross-section of respondents by household income, with roughly similar proportions indicating a household income of under \$40,000 (26%) as those reporting an income of \$40,000 to \$59,999 (29%). Just under half report having an income of \$60,000 to \$89,999 (45%).

TABLE 34. HOUSEHOLD INCOME

	n=2000
	%
Under \$20,000	7
\$20,000 to \$29,999	9
\$30,000 to \$39,999	10
\$40,000 to \$49,999	13
\$50,000 to \$59,999	16
\$60,000 to \$69,999	18
\$70,000 to \$79,999	16
\$80,000 to \$89,999	11
NET < \$40,000	26
NET \$40,000-\$59,999	29
NET \$60,000+	45

Q3. Which of the following best describes your total household income last year, before taxes, for you and your spouse/common-law partner, not including any income received via universal child care benefit (UCCB) and registered disability savings plan (RDSP)?
Base: Total sample

Those more likely to have reported an income of less than \$40,000 were:

- Women (31% vs 19% men); and
- Those without access to dental insurance (31% vs 16% with dental insurance).

By contrast, those more likely to have reported having an income of \$60,000 to \$89,999 were:

- Men (54% vs 39% women); and
- Those with access to dental insurance (49% vs 43% without dental insurance).

Residents from Ontario (38%) and Quebec (23%) made up more than half of the sample. Those residing in the Western part of Canada made up just under one-third (32%) of all respondents while those residing in the Atlantic provinces was under one-in-ten (7%) of all respondents.

TABLE 35. PROVINCE OF RESIDENCE

	n=2000
	%
Alberta	12
British Columbia	13
Manitoba	4
New Brunswick	2
Newfoundland and Labrador	2
Northwest Territories	<1
Nova Scotia	3
Ontario	38
Prince Edward Island	<1
Quebec	23
Saskatchewan	3
Yukon	<1
REGION:	
Atlantic	7
Quebec	23
Ontario	38
Manitoba/Saskatchewan	7
Alberta	12
British Columbia/North	13

There are a few notable differences by access to dental insurance. A higher proportion of those with access to dental insurance report residing in:

- British Columbia/the North (15%) relative to those without insurance (10%); and
- The Atlantic provinces (9%) relative to those without insurance (6%).

The majority of respondents were female (63%) with just over one-third being male (37%). The gender split was monitored throughout fieldwork however, no hard quotas were set given the income threshold of less than \$90,000, the requirement to have a child under the age of 12 and quotas regarding access to dental insurance.

TABLE 36. GENDER

	n=2000
	%
Male	37
Female	63
Other	<1

The bulk of respondents are between the ages of 25 and 44 (79%) which is to be expected given that only those with children under the age of 12 participated in the study. Just under one in five indicate that they are between the ages of 45 and 54 (17%). A small proportion of respondents report that they are between the ages of 18 and 24 (2%) or 55 years of age or older (3%).

TABLE 37. AGE OF PARENT

	n=2000
	%
18-24	2
25-34	32
35-44	47
45-54	17
55-64	2
65 or older	1
NET:	
18-34	34
35-44	47
45+	19

A few notable differences by age are:

- Those more likely to report being younger parents, aged 18 to 34, are women (41% vs 23% men) and parents with children between the ages of 0 and 5 (50% vs 30% age 6 to 8 vs 17% age 9 to 11);
- Parents more likely to report being between the ages of 35 and 44 are without access to dental insurance (49% vs 43% with dental insurance); and
- Those more likely to report being an older parent, aged 45 years and older, are men (28% vs 14% women) and parents of children between the ages of 9 and 11 (30% vs 10% age 0 to 5 vs 18% age 6 to 8).

Over three-quarters of the sample report that they are either married or living with a partner as common-law (77%). Smaller proportions of respondents indicate that they are single or have never been married (14%) or are divorced, separated, or widowed (8%).

TABLE 38. MARITAL STATUS

	n=2000
	%
Married	60
Common-law, living with a partner	17
Divorced, separated, widowed	8
Single, never been married	14
Other	<1
Prefer not to answer	<1
NET:	
Single, never been married	14
Married/Common law	77
Separated/Divorced/Widowed	8

Those who are more likely to be single, never married are:

- Women (19% vs 6% men); and
- Those without access to dental insurance (16%) compared to those with access (11%).

By contrast, those who are more likely to be married or living common-law are:

- Men (86% vs 72% women); and
- Those with access to dental insurance (80%) compared to those without access (76%).

The sample comprises a reasonable cross-section of respondents by age of child(ren) under 12 with just under half (47%) indicating they have a child aged 5 years or younger. Similar proportions report having a child between the ages of 6 and 8 (41%) and between the ages of 9 and 11 (37%).

TABLE 39. AGE OF CHILDREN IN HOUSEHOLD

Base: Have children under 12

	n=2000
	%
0	5
1	9
2	12
3	11
4	11
5	13
6	13
7	14
8	16
9	14
10	13
11	13
Prefer not to answer	1
NET:	
0-5	47
6-8	41
9-11	37

Among those who report having a child between the ages of 12 and 17, over half (53%) have children aged 12 and 13 (23% aged 12, 30% aged 13). Similar proportions report having children aged 14 (18%) and 15 (21%). Just under one-quarter (24%) of survey respondents indicate they have children between aged 16 and 17 (14% aged 16, 10% aged 17).

TABLE 40. AGE OF CHILDREN IN HOUSEHOLD

Base: Have children under 12 to 17 years old

	n=364
	%
12	23
13	30
14	18
15	21
16	14
17	10
Prefer not to answer	3

Three-quarters (75%) of survey respondents reside in a household with 2 to 4 people. Of those, just under one-in-ten (9%) are single parent households. Those living in larger households of 5 people or more make up one-quarter of the sample (25%).

TABLE 41. NUMBER OF PEOPLE IN HOUSEHOLD

	n=2000
	%
2	9
3	35
4	31
5+	25
Prefer not to answer	<1
NET:	
2-4	75
5+	25
MEAN	4
MEDIAN	4

Younger parents aged 18 to 34 are more likely to indicate they live in a household with 3 people (39%) compared to those who are 35 to 44 and 45 years or older (33% each). Those more likely to report living in a larger household with 5 people or more are parents of children between the ages of 9 and 11 (34%) when compared to those with children between the ages of 0 and 5 (29%) and the ages of 6 and 8 (30%).

With respect to respondents' highest level of educational attainment, just under half (48%) report having some education at the university level (a university certificate or diploma (12%), a bachelor's degree (23%), or a postgraduate degree (13%)). Just under one-third (30%) report having training at either the college level or through a trades/apprenticeship program (a college, CEGEP, or other non-university certificate or diploma (23%) or registered apprenticeship or other trades certificate or diploma (8%)). Under one-quarter (22%) indicate having some high school education or less (6%) or having graduated high school with a diploma or equivalent (16%).

TABLE 42. EDUCATION

	n=2000
	%
Grade 8 or less	<1
Some high school	5
High school diploma or equivalent	16
Registered apprenticeship or other trades certificate or diploma	8
College, CEGEP or other non-university certificate or diploma	23
University certificate or diploma below bachelor's level	12
Bachelor's degree	23
Postgraduate degree above bachelor's level	13
Prefer not to answer	<1
NET:	
HS or less	22
Trades/College	30
University	48

In terms of subgroups, the following demographic differences were noted:

- Women (24%) are more likely to report having a high school education compared to men (17%);
- Women (34%) are also more likely to report training at a college level or a trades certification/apprenticeship program relative to men (25%);
- A higher proportion of those with access to dental insurance (35%) report educational attainment at the college/trades/apprenticeship level relative to those who do not (28%);
- A higher proportion of those with access to dental insurance (50%) report educational attainment at the university level relative to those who do not (43%); and
- Men (58%) are more likely to report a university level education relative to women (42%).

The majority of those surveyed (75%) report that they are employed either full-time (60%), part-time (9%) or are self-employed (6%). Less than one in five (16%) indicate they are not employed or not in the workforce with an even smaller proportion (7%) indicating they are unemployed but looking for work.

TABLE 43. EMPLOYMENT STATUS

	n=2000
	%
Working full-time (30 or more hours per week)	60
Working part-time (less than 30 hours per week)	9
Self-employed	6
Unemployed, but looking for work	7
A student attending school full-time	2
Retired	1
Not in the workforce (full-time homemaker or unemployed but not looking for work)	12
Other employment status	1
Prefer not to answer	1
NET:	
Employed (F/T,P/T,Self-employed)	75
Unemployed (looking for work)	7
Not employed/not in workforce	16
Other	1

Those more likely to be employed are:

- Men (89%) vs women (66%); and
- Those with access to dental insurance (78%) compared to those without access (73%).

Those more likely to be unemployed are:

- Women (9%) vs men (6%); and
- Those without access to dental insurance (8%) compared to those with access (6%).

Respondents more likely to be not employed or not in the workforce are:

- Women (22%) vs men (4%); and
- Those with children aged 0 to 5 (23%) compared to those with children aged 6 to 8 (14%) and aged 9 to 11 (13%).

Over one-third (34%) of the sample report being of western or eastern European ethnicity. Over one-in-ten (14%) report that they are Indigenous while one-in-ten (10%) report being of South Asian descent.

TABLE 44. ETHNICITY

	n=2000
	%
Western European (UK, Spain, Portugal, France, Italy, Germany, Austria, Switzerland, etc.)	27
Indigenous (First Nations, Métis, Inuit (Inuk), etc.)	14
South Asian (India, Afghanistan, Pakistan, Sri Lanka, etc.)	10
Eastern European (Poland, Hungary, Romania, Ukraine, Russia, etc.)	7
South/Central/Latin American (Argentina, Mexico, Brazil, etc.)	6
East Asian (China, Korea, Japan, Taiwan, etc.)	5
Southeast Asian (Thailand, Vietnam, Singapore, the Philippines, Indonesia, Cambodia, etc.)	5
African (Nigeria, Ethiopia, Tanzania, etc.)	4
West Indian (Caribbean)	2
Middle Eastern (Israel, Syria, Jordan, Egypt, Iran, Iraq, etc.)	2
Other:	12
Canadian (general)	7
White/Caucasian	4
Mixed (general)	<1
Quebecois	1
North American	1
None	<1
Other	<1
Don't know	6
Prefer not to answer	4

In terms of demographic differences, those without access to dental insurance are more likely to state their ethnicity as Indigenous (18%) relative to those with insurance (4%).

Almost three-quarters (73%) of respondents report that English was the first language they learned at home while over a quarter (26%) report their first language as French. Just under one-in-ten (9%) report learning some other language as their first language.

TABLE 45. LANGUAGE FIRST LEARNED AT HOME AND STILL UNDERSTAND

	n=2000
	%
English	73
French	26
Other:	9
Arabic/Farsi/Persian	1
Spanish	1
Filipino/Tagalog	1
Hindi	1
Portuguese	1
Other	5
Prefer not to answer	<1

Those more likely to have first learned English are:

- Men (78% vs 70% women);

Respondents more likely to report French as their first language are:

- Women (27% vs 23% men);
- Parents of children aged 9 to 11 (32%) compared to parents of children aged 6 to 8 (26%) and parents of children aged 5 and younger (23%); and
- Those without access to dental insurance (28%) vs those with (21%).

Similar to language first learned at home, just over three-quarters (76%) of respondents indicate English as the language most often spoken at home and about a quarter (24%) report that they most often speak French at home.

TABLE 46. LANGUAGE MOST OFTEN SPOKEN AT HOME

	n=2000
	%
English	76
French	24
Other:	7
Arabic/Farsi/Persian	1
Spanish	1
Filipino/Tagalog	1
Hindi	1
Portuguese	<1
Other	4
Prefer not to answer	<1

III. Detailed Methodology

A. Sample Design

The target audience for this survey consisted of parents of children under 12 years old with a household income of less than \$90,000 annually. Additionally, the sample was split by access to dental insurance to ensure that a reasonable representation was achieved by those eligible for the Canada Dental Benefit – approximately 70% of the sample included those without dental insurance, while the remaining 30% consisted of those with dental insurance. Two additional key audiences who also met the above-noted eligibility requirements were also identified at the outset of the study – those residing in remote communities defined as those located over 350 kilometres from the nearest dental professional and/or without year-round road access and those who identify as being a member of an ethnic minority community. Given that a study with this particular audience had never been done before, some initial background research was done to determine the population within Canada who met the above noted criteria.

It was noted that in Canada there are approximately 3.2 million families in which all or at least some of the children are aged 14 and under, according to Statistics Canada data². While this estimate extended beyond the age of range of children for the target audience, it allowed for a rough estimation of the incidence of families with children under 12 years old. It was also noted that the median after-tax income in Canada in 2020 was \$66,800 however, it varied by region and by family type (couple families vs. lone-parent families)³. Applying additional criteria related to dental coverage (with and without insurance) further lowered the estimated incidence of the target group within the general population. Given the low incidence of the target population within Canada we proposed undertaking a hybrid quantitative approach involving the use of:

- An online panel to reach the base audience of those with children under 12 years old and a household income under \$90,000;
- A specialized ethnic online panel to reach those who identify as being a member of an ethnic minority community, have children under 12 years old and household income under \$90,000; and
- A telephone recruit-to-online approach to reach those meeting the eligibility requirements and those residing in remote communities.

The telephone recruit-to-online approach was proposed to mitigate the challenge of reaching a very low incidence group. At the outset of the study, it was projected that a telephone recruit-to-online approach would be used to supplement completes for the base audience and more precisely target those residing in remote communities. This approach was proposed and initially employed as those living remotely are less likely to be part of an online panel and as the survey included visual stimuli (advertising campaign evaluation), a strictly telephone methodology was not feasible.

After thousands of calls and fielding the telephone recruit-to-online approach for multiple weeks with very little success, it was determined that the conversion rate was extremely low and unlikely to field the required completes within the specified timeframe (see call dispositions outlined below). In agreement with the Project Authority, adjustments to the definition of remote were made to include those living 90 km from a dental health professional or an hour or more's drive from a dental professional. However, even with a less restrictive definition of remote the telephone recruit-to-online methodology was not proving to

² Statistics Canada. [Table 11-10-0013-01 Census families by total income, family type and number of children.](#)

³ Statistics Canada. [Table 11-10-0012-01 Distribution of total income by census family type and age of older partner, parent or individual.](#)

be fruitful. In discussions with the Project Authority, it was agreed to expand the definition of remote to any respondent with a rural forward sortation area (FSA) code. As a result of these discussions and given the tight fielding timelines, efforts to reach those living remotely were shifted online. Many challenges were observed in attempts to reach this audience with a telephone recruit-to-online approach. These challenges have provided good learnings for others performing public opinion research targeting remote communities. Some of the key challenges specific to this research were:

- Those living remotely tend to be older and are less likely to have children under the age of 12.
- Many in remote areas live within 350 kms or less of a dental health professional and/or have semi-regular access to dental services.
- The conversion rate for telephone recruit-to-online methodology is very low even when respondents are incentivized.
- Fielding timelines. In order to reach those living remotely, additional time must be allocated to fielding.

To ensure the final sample was representative of the Canadian population by region, the following weights, shown in Table 1, were applied to the main sample. Note that quotas were not set regionally for remote and ethnic oversamples and therefore no weighting was applied to the data for either priority audience. Quotas related to age of respondent, gender, household income, and age of child were not set, only monitored throughout fielding to ensure the data was not skewed. A total of 101 completes were obtained via the Ethnic panel and 100 completes from those living in remote/rural areas.

Table 47. Weighting Scheme of Base Sample

Region	Province	% of population (Source: Statistics Canada, 2021 Census)	Unweighted Sample Size (n)	Weight	Weighted Sample Size (n)	% of Total Sample
Atlantic		7%				
	Newfoundland	2%	45	0.8	36	1.8%
	PEI	<1%	11	0.727272727	8	0.4%
	Nova Scotia	3%	70	0.8	56	2.8%
	New Brunswick	2%	51	0.784313725	40	2%
Quebec	Quebec	23%	479	0.960334029	460	23%
Ontario	Ontario	38%	651	1.167434716	760	38%
Prairies		19%				
	Manitoba	4%	111	0.720720721	80	4%
	Saskatchewan	3%	58	1.034482759	60	3%
	Alberta	12%	257	0.93385214	240	12%
Pacific	British Columbia/North	13%	269	0.966542751	260	13%
Total		100%	2,002		2,000	100%

Additional Information on Online Panel

Our online panel partner for this study, Logit, has extensive experience managing panels for online research across Canada. The panels are recruited through various online portals to ensure demographically balanced respondents. Logit manages all aspects of the panel, from recruitment, registration, survey administration and removal of those who would like to retire from the panel. Strict guidelines are also enforced ensuring that each panelist only participates in research surveys no more than twice a month. However, to be a respondent to this type of Government of Canada survey, panel members may not have participated in any Government of Canada survey as a member of Logit's panel, or a survey on similar subject matter, within the past 30 days.

B. Questionnaire Design

The Strategic Counsel worked with Health Canada to develop a questionnaire that ensured all research objectives were met and that it adhered to Government of Canada standards for public opinion research. All research materials (i.e., questionnaire and telephone recruit-to-online screener) can be found in the Appendix.

C. Pre-test

Following the [Government of Canada's Standards for Public Opinion Research for Online Surveys](#), The Strategic Counsel conducted a pre-test on March 2, 2023, prior to launching the survey. The survey was pre-tested among n=32 respondents in a soft launch (21 in English and 11 in French) prior to running live.

Based on the 32 completes from the pre-test, the average length of completion was approximately 11 minutes.

Overall, the findings from the pre-test were very positive. The vast majority of respondents surveyed agreed, either somewhat or strongly, that:

- The questions asked were easy to complete (100%);
- The questions were straightforward and easy to understand (97%); and
- The length of the survey was reasonable (94%).

Moreover, the majority of respondents also found the topic interesting (94%) and stated that they had learned something from the survey (78%). Any additional feedback in terms of comments in the open-ends were positive such as "Excellent survey" or "Awesome survey. I learned something new."

Given the positive findings, TSC recommended to Health Canada that the online survey be fully launched with no additional changes.

D. Fieldwork and Length of Survey

Following the pre-test, the fieldwork for this survey was conducted from March 3rd to March 30th, 2023. On average, the survey took 13 minutes to complete.

E. Final Dispositions

A total of 7,684 entered the survey online. Among those, 2,203 individuals qualified and completed the survey (2,002 completes from the main sample, 101 completes from the visible minority oversample, and 100 from the remote/rural oversample). The overall completion rate was 91% and the overall participation rate was 78%, according to the calculations shown below.

$$\begin{array}{lcl}
 \text{Response Rate} = & \frac{\text{Interviews Started}}{\text{Respondents E-mailed}} & \text{Completion Rate} = \frac{\text{Completes + Screen outs + Quota full}}{\text{Total \# of Click Ins}} \\
 \\
 78\% = & \frac{7,684}{9,843} & 91\% = \frac{(2,203 + 3,432 + 1,387) = 7,022}{7,684}
 \end{array}$$

Table 48. Online Dispositions

Disposition	N
Total Entered Survey	7,684
Completed	2,203
Not Qualified/Screen Outs	3,432
Quota Full	1,387
Suspend/Drop-Off	662

In efforts to reach remote respondents (n=100), a telephone recruit to online methodology was initially employed. A total of 11,781 calls were made resulting in the following call dispositions.

Table 49. Telephone Recruit to Online Call Dispositions

Generated	Total
Used	11,781
No service	1933
Potentially Eligible	1638
U. No answer	3878
U. Busy	51
U. Answering machine/voicemail	2330
U. Unresolved	6,259
IS. Language Barrier	13
IS. Household refusals	67
IS. Respondent refusal	1754
IS. In-Scope Non-Responding	1,834
R. Non eligible/Disqualified	119
R. Qualified to complete survey online	2
R. Responding Units	121

The recruit to online approach resulted in an overall response rate of 1.47%, which has been calculated according to the Empirical Method formula of $R / (U + IS + R)$, as follows:

The number of in scope responding (R) respondents (qualified to complete online and disqualified respondents) = 121

DIVIDED BY

The sum of the unresolved (U) numbers (6,259), the in scope non-responding (IS) respondents (1,834), and the in scope responding (R) respondents (121) = **1.47%**

F. Study Limitations

The use of an online opt-in panel for the base sample, visible minority and remote oversample means that only those who have volunteered to participate in online surveys were asked to complete the survey. In addition, online surveys by nature only include respondents with the basic literacy skills to navigate the Internet. As such, a margin of error cannot be applied to the final sample and no inferences can be made to the broader target population.

Additionally, nonresponse bias can exist when respondents refuse, are unable or unwilling to complete the survey. As shown in the call dispositions above, some respondents refused to be screened when contacted by telephone. With nonresponse bias, those who willingly participate in a survey and nonrespondents may differ in their attitudes and behaviours. Therefore, the sample may not be representative of the target population as a whole. Furthermore, those without internet access or even reduced internet access would have been excluded from this survey.

IV. Appendix

Appendix

A. Online Panel Questionnaire (English and French)

FINAL Questionnaire – Dental Baseline Survey Mar. 2, 2023

Introduction

The Government of Canada is conducting a survey on **dental care in Canada**. The Strategic Counsel has been hired to administer the survey. Si vous préférez répondre au sondage en français, veuillez cliquer sur français **[Direct the respondent to the French language version]**. The survey takes **about 15 minutes** to complete and your participation is voluntary and confidential.

Your answers will not be attributed to you and the information you provide will be administered according to the requirements of the *Privacy Act*, the *Access to Information Act*, and any other pertinent legislation. Your decision to participate or not is yours alone and there will be no consequences if you decide not to participate. Click [here](#) for more information about how any personal information collected in this survey is handled. **[POP-UP IN A NEW BROWSER WINDOW]**.

The personal information you provide to Health Canada is governed in accordance with the *Privacy Act* and is being collected under the authority of Section 4 of the Department of Health Act in accordance with the Treasury Board Directive on Privacy Practices. We only collect the information we need to conduct the research project.

Purpose of collection: We require your personal information such as demographic information to better understand the topic of the research. However, your responses are always combined with the responses of others for analysis and reporting; you will never be directly identified.

To verify the authenticity of this survey, click here. **[POP UP IN NEW BROWSER WINDOW]**

This research is sponsored by Health Canada. Note that your participation will remain completely confidential and it will not affect your dealings with the Government of Canada, including Health Canada, in any way.

To verify the legitimacy of this survey please [click here](#) and enter the Project Code 20230215-TH014.

If you would like to request an alternative format of the survey, please contact:

Trista Heney
Phone: 416-975-4465 ext. 272
Email: theney@thestrategiccounsel.com

Why are we collecting your personal information? [PN: COLLAPSIBLE PARAGRAPH – ONLY SHOW TEXT IF RESPONDENT CLICKS ON THE QUESTION]

The aim of this survey is to understand your views on dental care for you and your family.

We will not ask you to provide us with any information that could directly identify who you are, such as your name, or full date of birth. However, it's possible the responses you provide could be used alone, or in combination with other available information, to identify you. The protection of your personal information is very important to us and we will make every effort to safeguard it and reduce the risk that you are identified.

Will we use or share your personal information for any other reason? [PN: COLLAPSIBLE PARAGRAPH – ONLY SHOW TEXT IF RESPONDENT CLICKS ON THE QUESTION]

The survey firm, The Strategic Counsel, will be responsible for collecting survey data from all participants. Once data collection is complete, The Strategic Counsel will provide the Health Canada with a dataset that will not include any directly identifying responses to reduce the risk that you could be identified. All the responses received will be grouped for analysis and presented in grouped form. The dataset will also be available to federal and provincial governments, organizations, and researchers across Canada, if requested. Any reports or publications produced based on this research will use grouped data and will not identify you or link you to these survey results.

What are your rights? [PN: COLLAPSIBLE PARAGRAPH – ONLY SHOW TEXT IF RESPONDENT CLICKS ON THE QUESTION]

You have a right to complain to the Privacy Commissioner of Canada if you feel your personal information has been handled improperly. For more information about these rights, or about how we handle your personal information, please contact Trista Heney, Associate, The Strategic Counsel, at 416-975-4465 ext. 272.

Screening and Quota Monitoring Questions

1. Do you, or does anyone in your household, work for any of the following organizations? Please select all that apply.

A marketing research firm	<input type="checkbox"/>	TERMINATE
A magazine or newspaper	<input type="checkbox"/>	TERMINATE
An advertising agency	<input type="checkbox"/>	TERMINATE
A political party	<input type="checkbox"/>	TERMINATE
A radio or television station	<input type="checkbox"/>	TERMINATE
A media company, including online media	<input type="checkbox"/>	TERMINATE
A public relations company	<input type="checkbox"/>	TERMINATE
The federal or provincial/territorial government	<input type="checkbox"/>	TERMINATE
None of these organizations	<input type="checkbox"/>	CONTINUE

2. In what year were you born? [PN: RECORD YEAR – YYYY. TERMINATE THOSE BORN 2005 OR LATER]

Prefer not to answer [CONTINUE TO 2A]

- 2A. Would you be willing to indicate in which of the following age categories you belong?

18-24	<input type="checkbox"/>	CONTINUE
25-34	<input type="checkbox"/>	CONTINUE
35-44	<input type="checkbox"/>	CONTINUE
45-54	<input type="checkbox"/>	CONTINUE
55-64	<input type="checkbox"/>	CONTINUE
65 or older	<input type="checkbox"/>	CONTINUE
Prefer not to answer	<input type="checkbox"/>	TERMINATE

3. Which of the following best describes your total household income last year, before taxes, for you and your spouse/common-law partner, not including any income received via universal child care benefit (UCCB) and registered disability savings plan (RDSP)? [PN: ONE RESPONSE ONLY]

Under \$20,000	<input type="checkbox"/>	CONTINUE
\$20,000 to \$29,999	<input type="checkbox"/>	CONTINUE

\$30,000 to \$39,999	<input type="checkbox"/>	CONTINUE
\$40,000 to \$49,999	<input type="checkbox"/>	CONTINUE
\$50,000 to \$59,999	<input type="checkbox"/>	CONTINUE
\$60,000 to \$69,999	<input type="checkbox"/>	CONTINUE
\$70,000 to \$79,999	<input type="checkbox"/>	CONTINUE
\$80,000 to \$89,999	<input type="checkbox"/>	CONTINUE
\$90,000 to \$99,999	<input type="checkbox"/>	TERMINATE
\$100,000 or more	<input type="checkbox"/>	TERMINATE
Prefer not to answer	<input type="checkbox"/>	TERMINATE

4. Do you have children in your household in any of the following age categories? Please select all that apply.

Under age 12	<input type="checkbox"/>	CONTINUE
12-17 years of age	<input type="checkbox"/>	CONTINUE IF 'UNDER AGE 12' ALSO CHECKED
18 years of age or older	<input type="checkbox"/>	CONTINUE IF 'UNDER AGE 12' ALSO CHECKED
I do not have any children	<input type="checkbox"/>	TERMINATE [PN: EXCLUSIVE]
Prefer not to answer	<input type="checkbox"/>	TERMINATE

5. Do you have access to private dental insurance for yourself and your family, either through an employer, pension plan, or individual benefits plan? This does not include any coverage you receive from any provincial or federal dental plans.

Yes	<input type="checkbox"/>	CONTINUE [MONITOR QUOTAS]
No	<input type="checkbox"/>	CONTINUE [MONITOR QUOTAS]
Prefer not to answer	<input type="checkbox"/>	TERMINATE

6. May I have the first three characters of your postal code. [PN: MONITOR QUOTAS BY PROVINCE/REGION]

Prefer not to answer

6A. [ASK ONLY OF THOSE WHO SAY 'PREFER NOT TO ANSWER' AT Q.6] In which province or territory do you currently reside? [PN: MONITOR QUOTAS BY PROVINCE/REGION]

Alberta	<input type="checkbox"/>
British Columbia	<input type="checkbox"/>
Manitoba	<input type="checkbox"/>
New Brunswick	<input type="checkbox"/>
Newfoundland and Labrador	<input type="checkbox"/>
Northwest Territories	<input type="checkbox"/>
Nova Scotia	<input type="checkbox"/>
Nunavut	<input type="checkbox"/>
Ontario	<input type="checkbox"/>
Prince Edward Island	<input type="checkbox"/>
Quebec	<input type="checkbox"/>
Saskatchewan	<input type="checkbox"/>
Yukon	<input type="checkbox"/>
Outside of Canada [PN: TERMINATE]	<input type="checkbox"/>
Prefer not to answer [PN: TERMINATE]	<input type="checkbox"/>

7. What gender do you identify as? [PN: MONITOR QUOTAS]

Male	<input type="checkbox"/>
Female	<input type="checkbox"/>
Other	<input type="checkbox"/>
Prefer not to answer	<input type="checkbox"/>

General Attitudes and Behaviours

8. How concerned are you about each of the following issues?

ROTATE ITEMS A-F	Very concerned	Somewhat concerned	Not that concerned	Not concerned at all
a. Affordability of dental care in Canada	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Accessing the services of a dentist or oral health care professional (e.g., dental assistant, dental hygienist, dental surgeon, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Accessing a family doctor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Accessing mental health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Affordability of childcare in Canada	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Accessing childcare services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Throughout this survey we refer to visits to a dental office or oral health professional. [PN: INSERT POP-UP WITH DEFINITION AND ENSURE POP-UP IS AVAILABLE WHEREVER THIS TERM IS USED. Oral health professionals include dentists (including specialists), denturists, dental assistants, dental hygienists, dental therapists, and dental technicians.]

9. Do you currently have a dentist or oral health professional who provides dental services to you and/or your family?

Yes, only for myself	<input type="checkbox"/>
Yes, only for my child/children	<input type="checkbox"/>
Yes, for the whole family	<input type="checkbox"/>
No	<input type="checkbox"/>

The next few questions ask about visits to a dental office or oral health professional for yourself, as opposed to visits you may make with other family members.

10. When was the last time you visited a dentist office or an oral health professional?

In the past 6 months	<input type="checkbox"/>
In the past year	<input type="checkbox"/>
1 year to less than 2 years ago	<input type="checkbox"/>
2 years to less than 3 years ago	<input type="checkbox"/>
3 years to less than 4 years ago	<input type="checkbox"/>
4 years to less than 5 years ago	<input type="checkbox"/>
Five or more years ago	<input type="checkbox"/>
Never	<input type="checkbox"/> [SKIP TO Q.13]
I can't recall	<input type="checkbox"/>

11. How frequently do you visit a dental office or oral health professional?

More often than once every 3 months	<input type="checkbox"/>
About every 3 months	<input type="checkbox"/>
About every 6 months	<input type="checkbox"/>
About every 9 months	<input type="checkbox"/>
About every 12 months	<input type="checkbox"/>
Less often than once a year	<input type="checkbox"/>
Only when required (e.g., cavity, etc.)	<input type="checkbox"/> [SKIP TO Q.13]
Only when there is an emergency (e.g., accident, severe pain, etc.)	<input type="checkbox"/> [SKIP TO Q.13]
Other (please specify):	<input type="checkbox"/>
Never [EXCLUSIVE]	<input type="checkbox"/> [SKIP TO Q.13]

12. In which of the following cases do you go to a dentist or oral health professional? Please select all that apply.

For regular routine cleanings with a hygienist	<input type="checkbox"/>
For preventive dental care exams	<input type="checkbox"/>
For urgent dental needs (e.g., cavity, pain, an accident, etc.)	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>
None of the above [PN: EXCLUSIVE]	<input type="checkbox"/>

13. How important do you feel it is for you to visit a dental office or oral health professional on a regular basis (that is, at least once a year or more often)?

Very important	<input type="checkbox"/>
Somewhat important	<input type="checkbox"/>
Not that important	<input type="checkbox"/>
Not important at all	<input type="checkbox"/>
Not sure	<input type="checkbox"/>

14. Which of the following prevent you from visiting a dental office or oral health professional on a regular basis? Please select all that apply. [PN: ROTATE ITEMS ON LIST]

Cost of the service	<input type="checkbox"/>
Lack of insurance	<input type="checkbox"/>
Waitlists are too long	<input type="checkbox"/>
Anxiety or fear	<input type="checkbox"/>
Can't miss school or work	<input type="checkbox"/>
Don't have the time	<input type="checkbox"/>
Lack of access to a dentist or oral health professional	<input type="checkbox"/>
Location of dentist or oral health professional is not convenient to get to	<input type="checkbox"/>
Cost of getting to the dentist or oral health professional	<input type="checkbox"/>
Dental services are inadequate	<input type="checkbox"/>
Trouble getting or paying for childcare	<input type="checkbox"/>

Other (please specify):	<input type="checkbox"/>
I visit regularly [PN: EXCLUSIVE]	<input type="checkbox"/>

The next few questions ask about visits to a dental office or oral health professional for your child/children under 12 years of age.

15. When was the last time you took your child/one of your children under 12 years of age to a dental office or oral health professional?

In the past 6 months	<input type="checkbox"/>
In the past year	<input type="checkbox"/>
1 year to less than 2 years ago	<input type="checkbox"/>
2 years to less than 3 years ago	<input type="checkbox"/>
3 years to less than 4 years ago	<input type="checkbox"/>
4 years to less than 5 years ago	<input type="checkbox"/>
Five or more years ago	<input type="checkbox"/>
Never	<input type="checkbox"/> [SKIP TO Q.19]
I can't recall	<input type="checkbox"/>

16. In your household, who makes dental appointments for your child/children?

I do, all of the time	<input type="checkbox"/>
I do most of the time	<input type="checkbox"/>
I do, some of the time	<input type="checkbox"/>
Someone else schedules the appointments	<input type="checkbox"/>

17. Which of the following best reflects how you usually pay for dental services for your child/children? Please select all that apply.

I go to a free dental clinic	<input type="checkbox"/>
I pay in cash (or debit)	<input type="checkbox"/>
I pay using a credit card	<input type="checkbox"/>
The dentist office offers a payment plan	<input type="checkbox"/>
Costs are covered (e.g., through private dental insurance, social assistance, disability assistance program, etc.)	<input type="checkbox"/>
Other, please specify (please do not provide any personal information about yourself or another individual in your response):	<input type="checkbox"/>

18. How frequently do you take your child/children to visit a dental office or oral health professional?

More often than once every 3 months	<input type="checkbox"/>
About every 3 months	<input type="checkbox"/>
About every 6 months	<input type="checkbox"/>
About every 9 months	<input type="checkbox"/>
About every 12 months	<input type="checkbox"/>
Less often than once a year	<input type="checkbox"/>
Only when required (e.g., cavity)	<input type="checkbox"/> [SKIP TO Q.20]
Only when there is an emergency (e.g., accident, severe pain)	<input type="checkbox"/> [SKIP TO Q.20]

Other (please specify):	<input type="checkbox"/>
Never	<input type="checkbox"/> [SKIP TO Q.20]

19. In which of the following cases **[PN: IF 'NEVER' AT Q.15: would / ALL OTHERS: do]** you take your child/children to a dentist or oral health professional? Please select all that apply.

For regular routine cleanings with a hygienist	<input type="checkbox"/>
For preventive dental care exams	<input type="checkbox"/>
For urgent dental needs (e.g., cavity, pain, an accident)	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>
None of the above [PN: EXCLUSIVE]	<input type="checkbox"/>

20. How important do you feel it is for your child/children to visit a dental office or oral health professional on a regular basis (that is, at least once a year or more often)?

Very important	<input type="checkbox"/>
Somewhat important	<input type="checkbox"/>
Not that important	<input type="checkbox"/>
Not important at all	<input type="checkbox"/>
Not sure	<input type="checkbox"/>

21. Which of the following, if any, prevent you from taking your child/children to a dental office or oral health professional on a regular basis? Please select all that apply. **[PN: ROTATE ITEMS ON LIST]**

Cost of the service	<input type="checkbox"/>
Cost of the service because I have more than one child requiring dental care	<input type="checkbox"/>
Lack of insurance	<input type="checkbox"/>
Anxiety or fear	<input type="checkbox"/>
Can't miss school or work	<input type="checkbox"/>
Don't have the time	<input type="checkbox"/>
Lack of access to a dentist or oral health professional	<input type="checkbox"/>
Location of dentist or oral health professional is not convenient to get to	<input type="checkbox"/>
Cost of getting to the dentist or oral health professional	<input type="checkbox"/>
Other, please specify (please do not provide any personal information about yourself or another individual in your response):	<input type="checkbox"/>
I visit regularly [PN: EXCLUSIVE]	<input type="checkbox"/>

22. To what extent do you agree or disagree with each of the following statements?

ROTATE ITEMS A-D	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	Don't know
a. If I had a bit of extra money, I would schedule more regular dental care appointments for my children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. If I had a bit of extra money, I would schedule more regular dental care appointments for myself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I only schedule dental care appointments for my children when absolutely necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Ideally, I would like my children and me to receive regular dental care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Knowledge of Dental Benefit

23. Have you heard about the Government of Canada's **Canada Dental Benefit** for children under 12?

No, I have not heard anything about the program	<input type="checkbox"/> [SKIP TO Q.27]
Yes, I have heard of it, but don't know much about the program	<input type="checkbox"/>
Yes, I have heard of it and am well informed about the program	<input type="checkbox"/>

24. [PN: IF 'YES' AT Q.23, ASK] Where did you hear about the **Canada Dental Benefit**? Please select all that apply. [PN: ROTATE ITEMS]

On the news/in the media	<input type="checkbox"/>
From a healthcare provider	<input type="checkbox"/>
From an oral health professional/dental office	<input type="checkbox"/>
From friends/family	<input type="checkbox"/>
In a blog	<input type="checkbox"/>
On social media	<input type="checkbox"/>
Saw or heard an ad	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>

25. [PN: IF 'YES' AT Q.23, ASK] In the last 3 months, have you looked for information about the **Canada Dental Benefit**?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

26. [PN: IF 'YES' AT Q.23, ASK] What do you know about the **Canada Dental Benefit**? [PN: OPEN-END]

[SHOW WITH Q27] The interim **Canada Dental Benefit** is intended to help lower dental costs for eligible families earning less than \$90,000 per year. Parents and guardians can apply if the child receiving dental care is under 12 years old and does not have access to a private dental insurance plan.

Depending on your adjusted family net income, a tax-free payment of \$260, \$390, or \$650 is available for each eligible child. This interim dental benefit is only available for 2 periods. You can get a maximum of 2 payments for each eligible child. Benefit payments are administered by the Canada Revenue Agency (CRA). The first benefit period is for children under 12 years old as of December 1, 2022 who receive dental care between October 1, 2022 and June 30, 2023.

27. Do you support or oppose the interim **Canada Dental Benefit**?

Strongly support	<input type="checkbox"/>
Somewhat support	<input type="checkbox"/>
Neither support nor oppose	<input type="checkbox"/>
Somewhat oppose	<input type="checkbox"/>
Strongly oppose	<input type="checkbox"/>
Don't know	<input type="checkbox"/>

28. Have you applied to or are you planning to apply for the **Canada Dental Benefit**?

Yes, I have applied	<input type="checkbox"/>
Yes, I am planning to apply	<input type="checkbox"/>
No, I have not applied and do not plan to	<input type="checkbox"/>
Not sure	<input type="checkbox"/>

29. **[IF 'NO' OR 'NOT SURE' AT Q.28, ASK]** Which of the following, if any, would prevent you from applying for the benefit? Please select all that apply. **[PN: ROTATE ITEMS]**

I don't meet the eligibility criteria/am unsure if I meet the eligibility criteria	<input type="checkbox"/>
The eligibility criteria are confusing/complicated	<input type="checkbox"/>
The application process is confusing/complicated	<input type="checkbox"/>
The application process is time consuming	<input type="checkbox"/>
I don't have the necessary documentation to apply (e.g., Social Insurance Number, Canada Child Benefit payment, new Canadian)	<input type="checkbox"/>
I don't know where to find reliable information about the program	<input type="checkbox"/>
My child doesn't have urgent dental needs (e.g., cavity, pain, accident)	<input type="checkbox"/>
It still costs too much to get dental care	<input type="checkbox"/>
I don't have time to take my children	<input type="checkbox"/>
My child has special needs, anxiety or fears about dental care	<input type="checkbox"/>
I don't live near a dental office or oral health professional	<input type="checkbox"/>
I am unable to get to dental care (e.g., I don't have access to transportation)	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>
None of the above [PN: EXCLUSIVE]	<input type="checkbox"/>

30. **[IF ‘YES’ AT Q.28, ASK]** Which of the following, if any, **[PN: IF ‘YES, I HAVE APPLIED’: encouraged / IF ‘YES, I AM PLANNING TO APPLY’: are encouraging]** you to apply for the benefit? Please select all that apply. **[PN: ROTATE ITEMS]**

Easy application process	<input type="checkbox"/>
Amount of the benefit payment	<input type="checkbox"/>
Easy access to reliable information about the benefit	<input type="checkbox"/>
Health of my family and children	<input type="checkbox"/>
I have more than one eligible child requiring dental care	<input type="checkbox"/>
I have a good understanding/knowledge of the benefit	<input type="checkbox"/>
The program was recommended by my child’s healthcare provider	<input type="checkbox"/>
My child/children had urgent dental needs (e.g., cavity, pain, accident, etc.)	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>
None of the above [PN: EXCLUSIVE]	<input type="checkbox"/>

31. **[IF ‘YES’ AT Q.28, ASK]** Which of the following, if any, would encourage you to apply for the benefit **[PN: IF ‘YES, I HAVE APPLIED’: again]?** Please select all that apply. **[PN: ROTATE ITEMS]**

If the application process was improved (e.g., it was easier, quicker, etc.)	<input type="checkbox"/>
If benefit payments are increased	<input type="checkbox"/>
If there was easier access to reliable information about the benefit	<input type="checkbox"/>
If the eligibility criteria were changed or expanded	<input type="checkbox"/>
If I had a better understanding/knowledge of the benefit	<input type="checkbox"/>
If the program was recommended by my child’s healthcare provider	<input type="checkbox"/>
If I lived close to a dental office or oral health professional	<input type="checkbox"/>
If my child/children had urgent dental needs (e.g., cavity, pain, accident)	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>
None of the above [PN: EXCLUSIVE]	<input type="checkbox"/>

Ad Recall and Impact

32. In the last three months, have you seen, read or heard any Government of Canada advertising about the **Canada Dental Benefit?**

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

[IF ‘NO’ AT Q.32, SKIP TO Q.35]

33. Where have you seen, read or heard this ad about the **Canada Dental Benefit?** Please select all that apply. **[PN: ROTATE ITEMS. OTHER SPECIFY ANCHORED AT END OF LIST.]**

Internet website	<input type="checkbox"/>
Internet search	<input type="checkbox"/>
Outdoor billboard	<input type="checkbox"/>
Public transit (bus, train, subway)	<input type="checkbox"/>
Other transit (taxi/rideshare stop, airport)	<input type="checkbox"/>
Digital screen (in residential building)	<input type="checkbox"/>
Radio	<input type="checkbox"/>
TV	<input type="checkbox"/>
Streaming services (e.g., Netflix, Prime Video, Crave Canada, Disney+, etc.)	<input type="checkbox"/>
Facebook	<input type="checkbox"/>
Instagram	<input type="checkbox"/>
Pinterest	<input type="checkbox"/>
Twitter	<input type="checkbox"/>
YouTube	<input type="checkbox"/>
Podcasts	<input type="checkbox"/>
Spotify	<input type="checkbox"/>
Poster in a dental facility	<input type="checkbox"/>
Mobile app	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>

34. What do you remember about the ad? [PN: OPEN-END]

Here are three ads that have recently been broadcast on various media. Please click 'continue' to watch and/or listen to each. [INSERT CREATIVE. ROTATE ORDER IN WHICH EACH IS SHOWN ACROSS SAMPLE. NEED TO ENSURE THAT RESPONDENTS OPEN ALL 3 BEFORE PROCEEDING.]

35. Over the past 12-16 weeks, have you seen, read or heard these ads?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

[IF 'NO' AT Q.35, SKIP TO Q.40]

36. Where have you seen, read or heard these ads about the **Canada Dental Benefit**? Please select all that apply. [PN: ROTATE ITEMS. OTHER SPECIFY ANCHORED AT END OF LIST.]

Internet website	<input type="checkbox"/>
Internet search	<input type="checkbox"/>
Outdoor billboard	<input type="checkbox"/>
Public transit (bus, train, subway)	<input type="checkbox"/>
Other transit (taxi/rideshare stop, airport)	<input type="checkbox"/>
Digital screen (in residential building)	<input type="checkbox"/>
Radio	<input type="checkbox"/>
TV	<input type="checkbox"/>
Streaming services (e.g., Netflix, Prime Video, Crave Canada, Disney+, etc.)	<input type="checkbox"/>
Facebook	<input type="checkbox"/>
Instagram	<input type="checkbox"/>
Pinterest	<input type="checkbox"/>
Twitter	<input type="checkbox"/>

YouTube	<input type="checkbox"/>
Podcasts	<input type="checkbox"/>
Spotify	<input type="checkbox"/>
Poster in a dental facility	<input type="checkbox"/>
Mobile app	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>

37. What do you think is the main point these ads are trying to communicate? **[PN: OPEN-END]**

38. Please indicate your level of agreement with the following statements about these ads.

ROTATE ITEMS A-J	1 Strongly disagree	2	3	4	5 Strongly agree
a. These ads catch my attention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. These ads are relevant to me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. These ads are difficult to follow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. These ads do not favour one political party over another	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. These ads talk about an important topic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. These ads provide new information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. These ads clearly convey that the Government of Canada can provide answers to parents with questions on the benefit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. These ads made me more likely to think that childhood dental care is important	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. These ads clearly convey the eligibility criteria for the benefit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. These ads made me more likely to apply for the benefit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

39. Did you do any of the following as a result of seeing the ad? Please select all that apply. **[PN: ROTATE ITEMS. OTHER SPECIFY AND 'DIDN'T DO ANYTHING' ANCHORED AT END OF LIST.]**

Visited the Canada.ca/dental website	<input type="checkbox"/>
Thought more about dental care for myself	<input type="checkbox"/>
Thought more about dental care for my child/children	<input type="checkbox"/>
Discussed the benefit with a dentist, oral health professional or other healthcare provider	<input type="checkbox"/>

Shared the information with a friend or family member	<input type="checkbox"/>
Looked for information online on the benefit	<input type="checkbox"/>
Submitted an application for the Canada Dental Benefit for my child/children	<input type="checkbox"/>
Booked an appointment for my child/children to get dental care services	<input type="checkbox"/>
Took my child/children to get dental care using the benefit payment(s)	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>
I didn't do anything as a result of seeing the as [PN: EXCLUSIVE]	<input type="checkbox"/>

Socio-Demographics

These last few questions will allow us to compare the survey results among different groups of respondents. Your answers will remain anonymous and confidential.

40. Which of the following best describes you? **[PN: ONE RESPONSE ONLY]**

Married	<input type="checkbox"/>
Common-law, living with a partner	<input type="checkbox"/>
Divorced, separated, widowed	<input type="checkbox"/>
Single, never been married	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>
Prefer not to answer	<input type="checkbox"/>

41. Please provide the ages of your children who are under 12 years of age?

Child 1	
Child 2	
Child 3	
Child 4	
Child 5	
Child 6	
Prefer not to answer	<input type="checkbox"/>

42. **[IF '12-17' AT Q.4, ASK]** Please provide the ages of your children who are 12 to 17 years of age?

Child 1	
Child 2	
Child 3	
Child 4	
Child 5	
Child 6	
Prefer not to answer	<input type="checkbox"/>

43. How many people, including yourself, live in your household?

[PN: RECORD NUMBER – MUST BE 2 OR MORE]

Prefer not to answer

44. What is the highest level of formal education that you have completed?

Grade 8 or less	<input type="checkbox"/>
Some high school	<input type="checkbox"/>
High school diploma or equivalent	<input type="checkbox"/>
Registered apprenticeship or other trades certificate or diploma	<input type="checkbox"/>
College, CEGEP or other non-university certificate or diploma	<input type="checkbox"/>
University certificate or diploma below bachelor's level	<input type="checkbox"/>
Bachelor's degree	<input type="checkbox"/>
Postgraduate degree above bachelor's level	<input type="checkbox"/>
Prefer not to answer	<input type="checkbox"/>

45. Which of the following categories best describes your current employment status?

Working full-time (30 or more hours per week)	<input type="checkbox"/>
Working part-time (less than 30 hours per week)	<input type="checkbox"/>
Self-employed	<input type="checkbox"/>
Unemployed, but looking for work	<input type="checkbox"/>
A student attending school full-time	<input type="checkbox"/>
Retired	<input type="checkbox"/>
Not in the workforce (full-time homemaker or unemployed but not looking for work)	<input type="checkbox"/>
Other employment status	<input type="checkbox"/>
Prefer not to answer	<input type="checkbox"/>

46. Which of the following ethnicity(ies) do you identify as? Please select all that apply.

Western European (UK, Spain, Portugal, France, Italy, Germany, Austria, Switzerland, etc.)	<input type="checkbox"/>
Eastern European (Poland, Hungary, Romania, Ukraine, Russia, etc.)	<input type="checkbox"/>
African (Nigeria, Ethiopia, Tanzania, etc.)	<input type="checkbox"/>
Middle Eastern (Israel, Syria, Jordan, Egypt, Iran, Iraq, etc.)	<input type="checkbox"/>
South Asian (India, Afghanistan, Pakistan, Sri Lanka, etc.)	<input type="checkbox"/>
Southeast Asian (Thailand, Vietnam, Singapore, the Philippines, Indonesia, Cambodia, etc.)	<input type="checkbox"/>
East Asian (China, Korea, Japan, Taiwan, etc.)	<input type="checkbox"/>
South/Central/Latin American (Argentina, Mexico, Brazil, etc.)	<input type="checkbox"/>
West Indian (Caribbean)	<input type="checkbox"/>
Indigenous (First Nations, Métis, Inuit (Inuk), etc.)	<input type="checkbox"/>
Other, please specify _____	<input type="checkbox"/>

Don't know [EXCLUSIVE]	<input type="checkbox"/>
Prefer not to answer [EXCLUSIVE]	<input type="checkbox"/>

47. What is the language you first learned at home as a child and still understand? Please select all that apply.

English	<input type="checkbox"/>
French	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>
Prefer not to answer	<input type="checkbox"/>

48. What language do you speak most often at home? Please select all that apply.

English	<input type="checkbox"/>
French	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>
Prefer not to answer	<input type="checkbox"/>

49. How close is the nearest dental clinic to your home?

Less than 5 kilometres	<input type="checkbox"/>
5-25 kilometres	<input type="checkbox"/>
25-50 kilometres	<input type="checkbox"/>
50-100 kilometres	<input type="checkbox"/>
100-350 kilometres	<input type="checkbox"/>
Over 350 kilometres	<input type="checkbox"/>
Prefer not to answer	<input type="checkbox"/>

50. [ASK ONLY OF THOSE WHO SAY 'PREFER NOT TO ANSWER' AT Q.6] Do you live in an urban or a rural area?

Urban (in a city or large town)	<input type="checkbox"/>
Rural (outside a city or a large town)	<input type="checkbox"/>
Prefer not to answer	<input type="checkbox"/>

51. [PN: NOT ASKED] RECORD LANGUAGE IN WHICH SURVEY WAS COMPLETED.

English	<input type="checkbox"/>
French	<input type="checkbox"/>

Questionnaire – Enquête de référence sur les soins dentaires
2 mars 2023

Introduction

Le gouvernement du Canada mène un sondage sur les **soins dentaires au Canada**. Le cabinet de recherche **The Strategic Counsel** a été engagé pour sa réalisation. If you prefer completing the survey in English, please click on English [**DONNER ACCÈS À LA VERSION ANGLAISE DU SONDAGE**]. Le sondage prend **environ 15 minutes**. La participation est volontaire et confidentielle.

Vos réponses resteront anonymes et les renseignements que vous donnerez seront traités conformément aux exigences de la *Loi sur la protection des renseignements personnels*, de la *Loi sur l'accès à l'information* et de toute autre loi applicable. La décision de participer ou non au sondage vous appartient et il n'y aura aucune conséquence à ne pas y participer.

Cliquez [ici](#) pour en savoir plus sur le traitement de vos renseignements personnels recueillis durant ce sondage. [**AFFICHER DANS UNE NOUVELLE FENÊTRE DU NAVIGATEUR**]

Les renseignements personnels que vous donnez à Santé Canada sont régis par la *Loi sur la protection des renseignements personnels* et sont recueillis en vertu de l'article 4 de la *Loi sur le ministère de la Santé*, conformément à la directive du Conseil du Trésor sur les pratiques relatives à la protection de la vie privée. La collecte porte uniquement sur les renseignements nécessaires à la réalisation de l'étude. Objet de la collecte : Nous avons besoin de vos renseignements personnels, par exemple de données démographiques, pour mieux comprendre le sujet de recherche. Cependant, vos réponses seront toujours regroupées avec celles des autres répondants au moment de l'analyse et des rapports; vous ne serez jamais directement identifié(e).

Si vous souhaitez vérifier l'authenticité de ce sondage, cliquez [ici](#). [**AFFICHER DANS UNE NOUVELLE FENÊTRE DU NAVIGATEUR**]

Santé Canada est le commanditaire de la présente étude. Rappelons que votre participation est strictement confidentielle et qu'elle n'aura aucune incidence sur vos rapports avec le gouvernement du Canada, y compris avec Santé Canada. Pour vérifier la légitimité de ce sondage, veuillez [cliquer ici](#) et taper le code de projet 20230215-TH014.

Si vous souhaitez avoir accès au sondage dans un média substitut, prière d'en faire la demande à :

Trista Heney
Tél. : 416-975-4465, poste 272
Courriel : theney@thestrategiccounsel.com

Pourquoi recueillons-nous vos renseignements personnels? [NP : PARAGRAPHE RÉDUCTIBLE – MONTRER LE TEXTE UNIQUEMENT SI LE RÉPONDANT CLIQUE SUR LA QUESTION]

Ce sondage est réalisé dans le but de comprendre vos points de vue sur les soins dentaires pour vous et votre famille.

Nous ne vous demanderons aucun renseignement permettant de vous identifier directement, comme votre nom ou votre date de naissance complète. Toutefois, il est possible que les réponses que vous donnez soient utilisées, seules ou en combinaison avec d'autres renseignements disponibles, pour vous identifier. La protection de vos renseignements personnels est très importante pour nous et nous ferons tout notre possible pour les protéger et réduire le risque que vous soyez identifié(e).

Utiliserons-nous ou communiquerons-nous vos renseignements personnels pour toute autre raison? [NP : PARAGRAPHE RÉDUCTIBLE – MONTRER LE TEXTE UNIQUEMENT SI LE RÉPONDANT CLIQUE SUR LA QUESTION]

La société de sondage The Strategic Counsel se chargera de recueillir les données d'enquête auprès des participants. Une fois la collecte terminée, The Strategic Counsel remettra à Santé Canada un jeu de données ne comportant aucune réponse individuelle, afin de réduire le risque que l'on puisse vous identifier. Les réponses reçues seront regroupées aux fins de l'analyse et de la présentation des résultats. Le jeu de données sera également accessible, sur demande, aux gouvernements fédéral et provinciaux, à des organisations et au milieu de la recherche canadien. Les rapports et autres publications découlant de cette étude contiendront des données groupées. Vous n'y serez pas identifié(e) ni associé(e) aux résultats de l'enquête.

Quels sont vos droits? [NP : PARAGRAPHE RÉDUCTIBLE – MONTRER LE TEXTE UNIQUEMENT SI LE RÉPONDANT CLIQUE SUR LA QUESTION]

Vous avez le droit de porter plainte auprès du Commissariat à la protection de la vie privée du Canada si vous estimez que vos renseignements personnels ont été traités d'une manière inappropriée. Pour plus d'information sur ces droits ou sur nos pratiques en matière de protection de la vie privée, veuillez communiquer avec Trista Heney, associée, The Strategic Counsel, au 416-975-4465, poste 272.

Questions de sélection et de suivi des quotas

1. Est-ce que vous ou un membre de votre ménage travaillez pour l'une des organisations suivantes? Veuillez choisir toutes les réponses qui s'appliquent.

Une société de recherche marketing	<input type="checkbox"/>	METTRE FIN AU SONDRAGE
Un magazine ou un journal	<input type="checkbox"/>	METTRE FIN AU SONDRAGE
Une agence de publicité	<input type="checkbox"/>	METTRE FIN AU SONDRAGE
Un parti politique	<input type="checkbox"/>	METTRE FIN AU SONDRAGE
Une station de radio ou de télévision	<input type="checkbox"/>	METTRE FIN AU SONDRAGE
Une entreprise médiatique, y compris les médias numériques	<input type="checkbox"/>	METTRE FIN AU SONDRAGE
Une agence de relations publiques	<input type="checkbox"/>	METTRE FIN AU SONDRAGE
Le gouvernement fédéral, un gouvernement provincial ou territorial	<input type="checkbox"/>	METTRE FIN AU SONDRAGE
Aucune de ces organisations	<input type="checkbox"/>	CONTINUER

2. Quelle est votre année de naissance? [NP : NOTER L'ANNÉE – AAAA. METTRE FIN AU SONDRAGE POUR LES PERSONNES NÉES EN 2005 OU APRÈS]

Je préfère ne pas répondre [POSER LA Q.2A]

2A. Accepteriez-vous d'indiquer votre tranche d'âge dans la liste suivante?

18 à 24 ans	<input type="checkbox"/>	CONTINUER
25 à 34 ans	<input type="checkbox"/>	CONTINUER
35 à 44 ans	<input type="checkbox"/>	CONTINUER
45 à 54 ans	<input type="checkbox"/>	CONTINUER
55 à 64 ans	<input type="checkbox"/>	CONTINUER
65 ans ou plus	<input type="checkbox"/>	CONTINUER
Je préfère ne pas répondre	<input type="checkbox"/>	METTRE FIN AU SONDRAGE

3. Laquelle des catégories suivantes décrit le mieux le revenu total de votre ménage l'an dernier, avant impôts, pour vous et votre conjoint(e) ou conjoint(e) de fait, en excluant tout revenu associé à la Prestation universelle pour la garde d'enfants (PUGE) et au régime enregistré d'épargne-invalidité (REEI)? **[NP : UNE SEULE RÉPONSE]**

Moins de 20 000 \$	<input type="checkbox"/>	CONTINUER
20 000 \$ à 29 999 \$	<input type="checkbox"/>	CONTINUER
30 000 \$ à 39 999 \$	<input type="checkbox"/>	CONTINUER
40 000 \$ à 49 999 \$	<input type="checkbox"/>	CONTINUER
50 000 \$ à 59 999 \$	<input type="checkbox"/>	CONTINUER
60 000 \$ à 69 999 \$	<input type="checkbox"/>	CONTINUER
70 000 \$ à 79 999 \$	<input type="checkbox"/>	CONTINUER
80 000 \$ à 89 999 \$	<input type="checkbox"/>	CONTINUER
90 000 \$ à 99 999 \$	<input type="checkbox"/>	METTRE FIN AU SONDAGE
100 000 \$ ou plus	<input type="checkbox"/>	METTRE FIN AU SONDAGE
Je préfère ne pas répondre	<input type="checkbox"/>	METTRE FIN AU SONDAGE

4. Votre ménage compte-t-il des enfants appartenant aux catégories d'âge suivantes? Veuillez choisir toutes les réponses qui s'appliquent.

Moins de 12 ans	<input type="checkbox"/>	CONTINUER
12 à 17 ans	<input type="checkbox"/>	CONTINUER SI « MOINS DE 12 ANS » A ÉGALEMENT ÉTÉ COCHÉ
18 ans ou plus	<input type="checkbox"/>	CONTINUER SI « MOINS DE 12 ANS » A ÉGALEMENT ÉTÉ COCHÉ
Je n'ai pas d'enfant	<input type="checkbox"/>	METTRE FIN AU SONDAGE [NP : EXCLUSIF]
Je préfère ne pas répondre	<input type="checkbox"/>	METTRE FIN AU SONDAGE

5. Avez-vous accès à une assurance dentaire privée pour vous et votre famille par l'intermédiaire d'un employeur, d'un régime de retraite ou d'un régime d'assurance individuel? Cela ne comprend pas la couverture offerte par des régimes d'assurance dentaire du gouvernement provincial ou fédéral.

Oui	<input type="checkbox"/>	CONTINUER [SUIVRE LES QUOTAS]
Non	<input type="checkbox"/>	CONTINUER [SUIVRE LES QUOTAS]
Je préfère ne pas répondre	<input type="checkbox"/>	METTRE FIN AU SONDAGE

6. Puis-je avoir les trois premiers caractères de votre code postal? **[NP : SUIVRE LES QUOTAS PAR PROVINCE/RÉGION]**

Je préfère ne pas répondre

- 6A. **[DEMANDER UNIQUEMENT À CEUX QUI ONT PRÉFÉRÉ NE PAS RÉPONDRE À LA Q.6]** Dans quelle province ou quel territoire habitez-vous? **[NP : SUIVRE LES QUOTAS PAR PROVINCE/RÉGION]**

Alberta	<input type="checkbox"/>
Colombie-Britannique	<input type="checkbox"/>
Manitoba	<input type="checkbox"/>
Nouveau-Brunswick	<input type="checkbox"/>
Terre-Neuve-et-Labrador	<input type="checkbox"/>
Territoires du Nord-Ouest	<input type="checkbox"/>

Nouvelle-Écosse	<input type="checkbox"/>
Nunavut	<input type="checkbox"/>
Ontario	<input type="checkbox"/>
Île-du-Prince-Édouard	<input type="checkbox"/>
Québec	<input type="checkbox"/>
Saskatchewan	<input type="checkbox"/>
Yukon	<input type="checkbox"/>
À l'extérieur du Canada [NP : METTRE FIN AU SONDAGE]	<input type="checkbox"/>
Je préfère ne pas répondre [NP : METTRE FIN AU SONDAGE]	<input type="checkbox"/>

7. À quel genre vous identifiez-vous? [NP : SUIVRE LES QUOTAS]

Homme	<input type="checkbox"/>
Femme	<input type="checkbox"/>
Autre	<input type="checkbox"/>
Je préfère ne pas répondre	<input type="checkbox"/>

Attitudes générales et comportements

8. À quel point êtes-vous préoccupé(e) par chacun des enjeux suivants?

ROTATION DES CHOIX A-F	Très préoccupé(e)	Assez préoccupé(e)	Pas très préoccupé(e)	Pas du tout préoccupé(e)
a. L'abordabilité des soins dentaires au Canada	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. L'accès aux services d'un dentiste ou d'un professionnel de la santé buccodentaire (p. ex., assistant dentaire, hygiéniste dentaire, chirurgien dentiste, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. L'accès à un médecin de famille	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. L'accès à des services de santé mentale	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. L'abordabilité des services de garde d'enfants au Canada	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. L'accès aux services de garde d'enfants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Tout au long de ce sondage, il est question de visites à un cabinet dentaire ou chez un professionnel de la santé buccodentaire. [NP : INSÉRER UNE FENÊTRE CONTEXTUELLE DONNANT LA DÉFINITION DE CE TERME ET S'ASSURER QUE CETTE FENÊTRE EST PRÉSENTE CHAQUE FOIS QUE LE TERME EST UTILISÉ. Les professionnels de la santé buccodentaire comprennent les dentistes (y compris les spécialistes), les denturologistes, les assistants dentaires, les hygiénistes dentaires, les thérapeutes dentaires et les techniciens dentaires.]

9. Avez-vous présentement un dentiste ou un professionnel de la santé buccodentaire qui fournit des services dentaires à vous-même ou à votre famille?

Oui, à moi seulement	<input type="checkbox"/>
Oui, à mon enfant ou mes enfants seulement	<input type="checkbox"/>
Oui, à toute la famille	<input type="checkbox"/>
Non	<input type="checkbox"/>

Les prochaines questions portent sur vos rendez-vous chez un professionnel de la santé buccodentaire plutôt que les visites à un cabinet dentaire que vous effectuez peut-être avec d'autres membres de la famille.

10. Quand êtes-vous allé(e) pour la dernière fois à un cabinet dentaire ou chez un professionnel de la santé buccodentaire?

Au cours des six derniers mois	<input type="checkbox"/>
Au cours de la dernière année	<input type="checkbox"/>
Il y a un à deux ans	<input type="checkbox"/>
Il y a deux à trois ans	<input type="checkbox"/>
Il y a trois à quatre ans	<input type="checkbox"/>
Il y a quatre à cinq ans	<input type="checkbox"/>
Il y a cinq ans ou plus	<input type="checkbox"/>
Jamais	<input type="checkbox"/> [PASSER À LA Q.13]
Je ne me rappelle pas	<input type="checkbox"/>

11. À quelle fréquence allez-vous à un cabinet dentaire ou chez un professionnel de la santé buccodentaire?

Plus souvent qu'une fois tous les trois mois	<input type="checkbox"/>
Tous les trois mois environ	<input type="checkbox"/>
Tous les six mois environ	<input type="checkbox"/>
Tous les neuf mois environ	<input type="checkbox"/>
Tous les douze mois environ	<input type="checkbox"/>
Moins souvent qu'une fois par an	<input type="checkbox"/>
Seulement lorsque c'est nécessaire (p. ex. pour une carie, etc.)	<input type="checkbox"/> [PASSER À LA Q.13]
Seulement en cas d'urgence (p. ex., un accident, une forte douleur, etc.)	<input type="checkbox"/> [PASSER À LA Q.13]
Autre situation (veuillez préciser) :	<input type="checkbox"/>
Jamais [EXCLUSIF]	<input type="checkbox"/> [PASSER À LA Q.13]

12. Dans lesquelles des situations suivantes consultez-vous un dentiste ou un professionnel de la santé buccodentaire? Veuillez choisir toutes les réponses qui s'appliquent.

Pour les nettoyages dentaires réguliers effectués par l'hygiéniste	<input type="checkbox"/>
Pour les examens dentaires préventifs	<input type="checkbox"/>
Pour les besoins dentaires urgents (p. ex., en cas de carie, de douleur, d'accident, etc.)	<input type="checkbox"/>
Autre situation (veuillez préciser) :	<input type="checkbox"/>
Aucune de ces réponses [NP : EXCLUSIF]	<input type="checkbox"/>

13. À quel point vous semble-t-il important d'aller régulièrement (c'est-à-dire au moins une fois par an) à un cabinet dentaire ou chez un professionnel de la santé buccodentaire?

Très important	<input type="checkbox"/>
Assez important	<input type="checkbox"/>
Pas très important	<input type="checkbox"/>
Pas du tout important	<input type="checkbox"/>
Pas sûr(e)	<input type="checkbox"/>

14. Lesquels des facteurs suivants vous empêchent d'aller régulièrement à un cabinet dentaire ou chez un professionnel de la santé buccodentaire? Veuillez choisir toutes les réponses qui s'appliquent. **[NP : ROTATION DES CHOIX DE RÉPONSES]**

Le coût du service	<input type="checkbox"/>
L'absence d'assurance	<input type="checkbox"/>
Les listes d'attente sont trop longues	<input type="checkbox"/>
L'anxiété ou la peur	<input type="checkbox"/>
L'impossibilité de manquer l'école ou le travail	<input type="checkbox"/>
Le manque de temps	<input type="checkbox"/>
Le manque d'accès à un dentiste ou professionnel de la santé buccodentaire	<input type="checkbox"/>
L'emplacement peu pratique du dentiste ou professionnel de la santé buccodentaire	<input type="checkbox"/>
Le coût associé au déplacement chez le dentiste ou professionnel de la santé buccodentaire	<input type="checkbox"/>
Les services dentaires sont inadéquats	<input type="checkbox"/>
La difficulté à trouver ou à payer des services de garde d'enfants	<input type="checkbox"/>
Autre facteur (veuillez préciser) :	<input type="checkbox"/>
Je vais régulièrement chez le dentiste [NP : EXCLUSIF]	<input type="checkbox"/>

Les prochaines questions concernent les visites effectuées à un cabinet dentaire ou chez un professionnel de la santé buccodentaire pour votre enfant ou vos enfants de moins de 12 ans.

15. Quand avez-vous amené pour la dernière fois votre enfant ou l'un de vos enfants de moins de 12 ans à un cabinet dentaire ou chez un professionnel de la santé buccodentaire?

Au cours des six derniers mois	<input type="checkbox"/>
Au cours de la dernière année	<input type="checkbox"/>
Il y a un à deux ans	<input type="checkbox"/>
Il y a deux à trois ans	<input type="checkbox"/>
Il y a trois à quatre ans	<input type="checkbox"/>
Il y a quatre à cinq ans	<input type="checkbox"/>
Il y a cinq ans ou plus	<input type="checkbox"/>
Jamais	<input type="checkbox"/> [PASSER À LA Q.19]
Je ne me rappelle pas	<input type="checkbox"/>

16. Dans votre ménage, qui s'occupe de prendre les rendez-vous dentaires pour votre enfant ou vos enfants?

C'est toujours moi	<input type="checkbox"/>
C'est moi la plupart du temps	<input type="checkbox"/>
C'est parfois moi	<input type="checkbox"/>
Quelqu'un d'autre s'occupe des rendez-vous	<input type="checkbox"/>

17. Lesquels des énoncés suivants décrivent le mieux la manière dont vous payez habituellement les services dentaires fournis à votre enfant ou vos enfants? Veuillez choisir toutes les réponses qui s'appliquent.

Je vais à une clinique de soins dentaires gratuits	<input type="checkbox"/>
Je paie comptant (ou par carte de débit)	<input type="checkbox"/>
Je paie par carte de crédit	<input type="checkbox"/>
Le cabinet dentaire offre des modalités de paiement	<input type="checkbox"/>
Les frais sont couverts (p. ex., par l'assurance dentaire privée, l'aide sociale, par un programme d'aide pour l'invalidité, etc.)	<input type="checkbox"/>
Autre méthode; veuillez préciser (sans fournir de renseignement personnel vous concernant ou concernant quelqu'un d'autre) :	<input type="checkbox"/>

18. À quelle fréquence amenez-vous votre enfant ou vos enfants à un cabinet dentaire ou chez un professionnel de la santé buccodentaire?

Plus souvent qu'une fois tous les trois mois	<input type="checkbox"/>
Tous les trois mois environ	<input type="checkbox"/>
Tous les six mois environ	<input type="checkbox"/>
Tous les neuf mois environ	<input type="checkbox"/>
Tous les douze mois environ	<input type="checkbox"/>
Moins souvent qu'une fois par an	<input type="checkbox"/>
Seulement lorsque c'est nécessaire (p. ex. pour une carie, etc.)	<input type="checkbox"/> [PASSER À LA Q.20]
Seulement en cas d'urgence (p. ex., un accident, une forte douleur, etc.)	<input type="checkbox"/> [PASSER À LA Q.20]
Autre situation (veuillez préciser) :	<input type="checkbox"/>
Jamais	<input type="checkbox"/> [PASSER À LA Q.20]

19. Dans lesquelles des situations suivantes [NP : SI « JAMAIS » À LA Q.15 : amèneriez-vous / TOUS LES AUTRES CAS : amenez-vous] votre enfant ou vos enfants chez un dentiste ou un professionnel de la santé buccodentaire? Veuillez choisir toutes les réponses qui s'appliquent.

Pour les nettoyages dentaires réguliers effectués par l'hygiéniste	<input type="checkbox"/>
Pour les examens dentaires préventifs	<input type="checkbox"/>
Pour les besoins dentaires urgents (p. ex., en cas de carie, de douleur, d'accident, etc.)	<input type="checkbox"/>
Autre situation (veuillez préciser) :	<input type="checkbox"/>
Aucune de ces réponses [NP : EXCLUSIF]	<input type="checkbox"/>

20. À quel point vous semble-t-il important que votre enfant ou vos enfants aillent régulièrement (c'est-à-dire au moins une fois par an) à un cabinet dentaire ou chez un professionnel de la santé buccodentaire?

Très important	<input type="checkbox"/>
Assez important	<input type="checkbox"/>
Pas très important	<input type="checkbox"/>
Pas du tout important	<input type="checkbox"/>
Pas sûr(e)	<input type="checkbox"/>

21. Lesquels des facteurs suivants vous empêchent d'amener régulièrement votre enfant ou vos enfants à un cabinet dentaire ou chez un professionnel de la santé buccodentaire? Veuillez choisir toutes les réponses qui s'appliquent. **[NP : ROTATION DES CHOIX DE RÉPONSES]**

Le coût du service	<input type="checkbox"/>
Le coût du service étant donné que j'ai plus d'un enfant qui a besoin de soins dentaires	<input type="checkbox"/>
L'absence d'assurance	<input type="checkbox"/>
L'anxiété ou la peur	<input type="checkbox"/>
L'impossibilité de manquer l'école ou le travail	<input type="checkbox"/>
Le manque de temps	<input type="checkbox"/>
Le manque d'accès à un dentiste ou professionnel de la santé buccodentaire	<input type="checkbox"/>
L'emplacement peu pratique du dentiste ou professionnel de la santé buccodentaire	<input type="checkbox"/>
Le coût associé au déplacement chez le dentiste ou professionnel de la santé buccodentaire	<input type="checkbox"/>
Autre facteur; veuillez préciser (sans fournir de renseignement personnel vous concernant ou concernant quelqu'un d'autre) :	<input type="checkbox"/>
Je vais régulièrement chez le dentiste [NP : EXCLUSIF]	<input type="checkbox"/>

22. Dans quelle mesure êtes-vous d'accord ou en désaccord avec les énoncés suivants?

ROTATION DES ÉNONCÉS A-D	Tout à fait d'accord	Plutôt d'accord	Plutôt en désaccord	Tout à fait en désaccord	Je ne sais pas
a. Si j'avais un peu plus d'argent, je prendrais des rendez-vous dentaires plus réguliers pour mes enfants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Si j'avais un peu plus d'argent, je prendrais des rendez-vous dentaires plus réguliers pour moi	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Je prends seulement des rendez-vous dentaires pour mes enfants lorsque c'est absolument nécessaire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

d. Dans l'idéal, j'aimerais que mes enfants et moi recevions des soins dentaires réguliers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Connaissance de la prestation dentaire canadienne

23. Avez-vous entendu parler de la **prestation dentaire canadienne** du gouvernement du Canada pour les enfants de moins de 12 ans?

Non, je n'ai rien entendu au sujet de ce programme	<input type="checkbox"/> [PASSER À LA Q.27]
Oui, j'en ai entendu parler, mais je ne sais pas grand-chose au sujet de ce programme	<input type="checkbox"/>
Oui, j'en ai entendu parler et je suis bien renseigné(e) sur ce programme	<input type="checkbox"/>

24. [NP : SI « OUI » À LA Q.23] Où avez-vous entendu parler de la **prestation dentaire canadienne**? Veuillez choisir toutes les réponses qui s'appliquent. [NP : ROTATION DES CHOIX DE RÉPONSES]

Aux nouvelles ou dans les médias	<input type="checkbox"/>
Chez un fournisseur de soins de santé	<input type="checkbox"/>
Chez un professionnel de la santé buccodentaire ou dans un cabinet dentaire	<input type="checkbox"/>
Par des amis ou des membres de la famille	<input type="checkbox"/>
Dans un blogue	<input type="checkbox"/>
Dans les médias sociaux	<input type="checkbox"/>
J'ai vu ou entendu une publicité	<input type="checkbox"/>
Autre endroit (veuillez préciser) :	<input type="checkbox"/>

25. [NP : SI « OUI » À LA Q.23] Au cours des trois derniers mois, avez-vous recherché des informations au sujet de la **prestation dentaire canadienne**?

Oui	<input type="checkbox"/>
Non	<input type="checkbox"/>

26. [NP : SI « OUI » À LA Q.23] Que savez-vous au sujet de la **prestation dentaire canadienne**? [NP : QUESTION OUVERTE]

[AFFICHER À LA Q27] La **prestation dentaire canadienne** provisoire a pour but d'aider à réduire les coûts des soins dentaires pour les familles admissibles qui gagnent moins de 90 000 \$ par année. Les parents et les tuteurs peuvent faire une demande si l'enfant qui reçoit des soins dentaires a moins de 12 ans et n'a pas accès à un régime privé d'assurance dentaire.

Selon votre revenu familial net rajusté, un paiement non imposable de 260 \$, 390 \$ ou 650 \$ est disponible pour chaque enfant admissible. Cette prestation dentaire est temporaire et est seulement disponible pour deux périodes. Vous pouvez recevoir un maximum de deux paiements pour chaque enfant admissible. Les paiements de prestation sont administrés par l'Agence du revenu du Canada (ARC).

La première période de prestation vise les enfants qui ont moins de 12 ans en date du 1^{er} décembre 2022 et qui reçoivent des soins dentaires entre le 1^{er} octobre 2022 et le 30 juin 2023.

27. Êtes-vous pour ou contre la **prestation dentaire canadienne** provisoire?

Tout à fait pour	<input type="checkbox"/>
Plutôt pour	<input type="checkbox"/>

Ni pour ni contre	<input type="checkbox"/>
Plutôt contre	<input type="checkbox"/>
Tout à fait contre	<input type="checkbox"/>
Je ne sais pas	<input type="checkbox"/>

28. Avez-vous fait une demande ou prévoyez-vous faire une demande au titre de la **prestation dentaire canadienne**?

Oui, j'ai fait une demande	<input type="checkbox"/>
Oui, je prévois faire une demande	<input type="checkbox"/>
Non, je n'ai pas fait de demande et ne prévois pas en faire une	<input type="checkbox"/>
Je ne suis pas sûr(e)	<input type="checkbox"/>

29. **[SI « NON » OU « PAS SÛR(E) » À LA Q.28]** Le cas échéant, lesquelles de ces raisons vous empêcheraient de demander la prestation? Veuillez choisir toutes les réponses qui s'appliquent. **[NP : ROTATION DES CHOIX DE RÉPONSES]**

Je ne réponds pas aux critères d'admissibilité ou je ne suis pas sûr(e) d'y répondre	<input type="checkbox"/>
Les critères d'admissibilité sont compliqués ou portent à confusion	<input type="checkbox"/>
Le processus de demande est compliqué ou porte à confusion	<input type="checkbox"/>
Le processus de demande prend du temps	<input type="checkbox"/>
Je n'ai pas les documents nécessaires pour faire une demande (p. ex., numéro d'assurance sociale, paiement de l'allocation canadienne pour enfants, nouveau Canadien)	<input type="checkbox"/>
Je ne sais pas où trouver des renseignements fiables sur le programme	<input type="checkbox"/>
Mon enfant n'a pas de besoins urgents en matière de soins dentaires (p. ex., carie, douleur, accident)	<input type="checkbox"/>
Cela coûte quand même trop cher d'obtenir des soins dentaires	<input type="checkbox"/>
Je n'ai pas le temps d'amener mes enfants chez le dentiste	<input type="checkbox"/>
Mon enfant a des besoins particuliers, de l'anxiété ou des craintes à l'égard des soins dentaires	<input type="checkbox"/>
Je n'habite pas à proximité d'un cabinet dentaire ou d'un professionnel de la santé buccodentaire	<input type="checkbox"/>
Je ne suis pas en mesure d'accéder aux soins dentaires (p. ex., je n'ai pas accès à des moyens de transport)	<input type="checkbox"/>
Autre raison (veuillez préciser) :	<input type="checkbox"/>
Aucune de ces réponses [NP : EXCLUSIF]	<input type="checkbox"/>

30. **[SI « OUI » À LA Q.28]** Le cas échéant, lesquels des facteurs suivants vous **[NP : SI « OUI, J'AI FAIT UNE DEMANDE » : ont encouragé(e)/ SI « OUI, JE PRÉVOIS FAIRE UNE DEMANDE » : encouragent]** à demander la prestation? Veuillez choisir toutes les réponses qui s'appliquent. **[NP : ROTATION DES CHOIX DE RÉPONSES]**

La facilité du processus de demande	<input type="checkbox"/>
Le montant des paiements de prestation	<input type="checkbox"/>
La facilité d'accès à des renseignements fiables sur la prestation	<input type="checkbox"/>
La santé de ma famille et de mes enfants	<input type="checkbox"/>
J'ai plus d'un enfant admissible qui a besoin de soins dentaires	<input type="checkbox"/>
J'ai une bonne compréhension ou de bonnes connaissances au sujet de la prestation	<input type="checkbox"/>
Le programme m'a été recommandé par le fournisseur de soins de santé de mon enfant	<input type="checkbox"/>
Mon enfant ou mes enfants avaient des besoins urgents en matière de soins dentaires (p. ex., carie, douleur, accident, etc.)	<input type="checkbox"/>
Autre raison (veuillez préciser) :	<input type="checkbox"/>
Aucune de ces réponses [NP : EXCLUSIF]	<input type="checkbox"/>

31. **[SI « OUI » À LA Q.28]** Le cas échéant, lesquelles de ces conditions vous encourageraient à demander la prestation **[NP : SI « OUI, J'AI FAIT UNE DEMANDE » : de nouveau]**? Veuillez choisir toutes les réponses qui s'appliquent. **[NP : ROTATION DES CHOIX DE RÉPONSES]**

Si le processus de demande était amélioré (p. ex., s'il était plus facile, plus rapide, etc.)	<input type="checkbox"/>
Si les paiements de prestation étaient augmentés	<input type="checkbox"/>
S'il était plus facile d'accéder à des renseignements fiables sur la prestation	<input type="checkbox"/>
Si les critères d'admissibilité étaient modifiés ou élargis	<input type="checkbox"/>
Si j'avais une meilleure compréhension ou de meilleures connaissances au sujet de la prestation	<input type="checkbox"/>
Si le programme m'était recommandé par le fournisseur de soins de santé de mon enfant	<input type="checkbox"/>
Si j'habitais à proximité d'un cabinet dentaire ou d'un professionnel de la santé buccodentaire	<input type="checkbox"/>
Si mon enfant ou mes enfants avaient des besoins urgents en matière de soins dentaires (p. ex., carie, douleur, accident)	<input type="checkbox"/>
Autre condition (veuillez préciser) :	<input type="checkbox"/>
Aucune de ces réponses [NP : EXCLUSIF]	<input type="checkbox"/>

Rappel dirigé et impact des annonces

32. Au cours des trois derniers mois, avez-vous vu, lu ou entendu des publicités du gouvernement du Canada portant sur la **prestation dentaire canadienne**?

Oui	<input type="checkbox"/>
Non	<input type="checkbox"/>

[SI « NON » À LA Q.32, PASSER À LA Q.35]

33. Où avez-vous vu, lu ou entendu cette publicité à propos de la **prestation dentaire canadienne**? Veuillez choisir toutes les réponses qui s'appliquent. **[NP : ROTATION DES CHOIX DE RÉPONSES. ANCRER « AUTRE ENDROIT – VEUILLEZ PRÉCISER » À LA FIN DE LA LISTE.]**

Site Web	<input type="checkbox"/>
Recherche sur Internet	<input type="checkbox"/>
Panneau d'affichage extérieur	<input type="checkbox"/>
Transport en commun (autobus, train, métro)	<input type="checkbox"/>
Autres lieux de transport public (station de taxi ou de covoiturage, aéroport)	<input type="checkbox"/>
Écran numérique (dans un immeuble résidentiel)	<input type="checkbox"/>
Radio	<input type="checkbox"/>
Télévision	<input type="checkbox"/>
Plateformes de diffusion en continu (p. ex. Netflix, Prime Video, Crave Canada, Disney+, etc.)	<input type="checkbox"/>
Facebook	<input type="checkbox"/>
Instagram	<input type="checkbox"/>
Pinterest	<input type="checkbox"/>
Twitter	<input type="checkbox"/>
YouTube	<input type="checkbox"/>
Balados	<input type="checkbox"/>
Spotify	<input type="checkbox"/>
Affiche dans un cabinet dentaire	<input type="checkbox"/>
Application mobile	<input type="checkbox"/>
Autre endroit (veuillez préciser) :	<input type="checkbox"/>

34. Que vous rappelez-vous au sujet de cette publicité? **[NP : QUESTION OUVERTE]**

Voici trois publicités qui ont récemment été diffusées dans plusieurs médias. Veuillez cliquer 'continuer' pour regarder ou écouter chacune d'entre elles. **[INSÉRER LES CRÉATIONS PUBLICITAIRES. MODIFIER LEUR ORDRE DE PRÉSENTATION POUR L'ENSEMBLE DE L'ÉCHANTILLON. VÉRIFIER QUE LES RÉPONDANTS ONT CLIQUÉ SUR LES TROIS PUBLICITÉS AVANT DE CONTINUER.]**

35. Avez-vous vu, lu ou entendu ces publicités au cours des 12 à 16 dernières semaines?

Oui	<input type="checkbox"/>
Non	<input type="checkbox"/>

[SI « NON » À LA Q.35, PASSER À LA Q.40]

36. Où avez-vous vu, lu ou entendu ces publicités traitant de la **prestation dentaire canadienne**? Veuillez choisir toutes les réponses qui s'appliquent. **[NP : ROTATION DES CHOIX DE RÉPONSES. ANCRER « AUTRE ENDROIT – VEUILLEZ PRÉCISER » À LA FIN DE LA LISTE.]**

Site Web	<input type="checkbox"/>
Recherche sur Internet	<input type="checkbox"/>
Panneau d'affichage extérieur	<input type="checkbox"/>
Transport en commun (autobus, train, métro)	<input type="checkbox"/>
Autres lieux de transport public (station de taxi ou de covoiturage, aéroport)	<input type="checkbox"/>
Écran numérique (dans un immeuble résidentiel)	<input type="checkbox"/>
Radio	<input type="checkbox"/>
Télévision	<input type="checkbox"/>
Plateformes de diffusion en continu (p. ex. Netflix, Prime Video, Crave Canada, Disney+, etc.)	<input type="checkbox"/>
Facebook	<input type="checkbox"/>
Instagram	<input type="checkbox"/>
Pinterest	<input type="checkbox"/>
Twitter	<input type="checkbox"/>
YouTube	<input type="checkbox"/>
Balados	<input type="checkbox"/>
Spotify	<input type="checkbox"/>
Affiche dans un cabinet dentaire	<input type="checkbox"/>
Application mobile	<input type="checkbox"/>
Autre endroit (veuillez préciser) :	<input type="checkbox"/>

37. Selon vous, quel est le point principal que ces publicités essaient de communiquer? **[NP : QUESTION OUVERTE]**

38. Veuillez indiquer dans quelle mesure vous êtes d'accord avec les énoncés suivants au sujet de ces publicités.

ROTATION DES ÉNONCÉS A-J	1 Fortement en désaccord	2	3	4	5 Fortement en accord
a. Ces publicités attirent mon attention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Ces publicités me concernent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Ces publicités sont difficiles à suivre	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Cette publicité ne favorise pas un parti politique plus qu'un autre	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Ces publicités traitent d'un sujet important	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Ces publicités fournissent de l'information nouvelle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

g. Ces publicités indiquent clairement que le gouvernement du Canada peut répondre aux questions des parents au sujet de la prestation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Ces publicités m'ont rendu(e) plus susceptible de croire que les soins dentaires des enfants sont importants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Ces publicités exposent clairement les critères d'admissibilité à la prestation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Ces publicités m'ont rendu(e) plus susceptible de demander la prestation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

39. Avez-vous pris l'une des mesures suivantes après avoir vu l'annonce? Veuillez choisir toutes les réponses qui s'appliquent. **[NP : ROTATION DES CHOIX DE RÉPONSES. ANCRER « AUTRE MESURE – VEUILLEZ PRÉCISER » ET « JE N'AI RIEN FAIT » À LA FIN DE LA LISTE.]**

J'ai visité le site Web Canada.ca/dentaire	<input type="checkbox"/>
J'ai réfléchi davantage aux soins dentaires pour moi	<input type="checkbox"/>
J'ai réfléchi davantage aux soins dentaires pour mon enfant ou mes enfants	<input type="checkbox"/>
J'ai discuté de la prestation avec un dentiste, un professionnel de la santé buccodentaire ou un autre fournisseur de soins de santé	<input type="checkbox"/>
J'ai communiqué l'information à un ami ou un membre de la famille	<input type="checkbox"/>
J'ai cherché des renseignements en ligne sur la prestation	<input type="checkbox"/>
J'ai présenté une demande au titre de la prestation dentaire canadienne pour mon enfant ou mes enfants	<input type="checkbox"/>
J'ai pris rendez-vous pour mon enfant ou mes enfants afin qu'ils reçoivent des soins dentaires	<input type="checkbox"/>
J'ai amené mon enfant ou mes enfants chez le dentiste grâce aux paiements de prestation	<input type="checkbox"/>
Autre mesure (veuillez préciser) :	<input type="checkbox"/>
Je n'ai rien fait après avoir vu l'annonce [NP : EXCLUSIF]	<input type="checkbox"/>

Données sociodémographiques

Ces dernières questions nous permettront de comparer les résultats du sondage entre différents groupes de répondants. Vos réponses resteront anonymes et confidentielles.

40. Laquelle de ces réponses vous décrit le mieux? **[NP : UNE SEULE RÉPONSE]**

Vous êtes marié(e)	<input type="checkbox"/>
Vous vivez avec un(e) conjoint(e) de fait ou un(e) partenaire	<input type="checkbox"/>
Vous êtes divorcé(e), séparé(e), veuf ou veuve	<input type="checkbox"/>
Vous êtes célibataire et n'avez jamais été marié(e)	<input type="checkbox"/>
Autre situation (veuillez préciser)	<input type="checkbox"/>
Je préfère ne pas répondre	<input type="checkbox"/>

41. Veuillez indiquer l'âge de vos enfants de moins de 12 ans.

Enfant 1	
Enfant 2	
Enfant 3	
Enfant 4	
Enfant 5	
Enfant 6	
Je préfère ne pas répondre	<input type="checkbox"/>

42. **[SI « 12 à 17 » À LA Q.4]** Veuillez indiquer l'âge de vos enfants de 12 à 17 ans.

Enfant 1	
Enfant 2	
Enfant 3	
Enfant 4	
Enfant 5	
Enfant 6	
Je préfère ne pas répondre	<input type="checkbox"/>

43. Combien de personnes vivent dans votre ménage, y compris vous-même?

[NP : NOTER LE NOMBRE – IL DOIT Y EN AVOIR DEUX OU PLUS]

Je préfère ne pas répondre

44. Quel est le niveau de scolarité le plus élevé que vous ayez atteint?

École primaire	<input type="checkbox"/>
Études secondaires partielles	<input type="checkbox"/>
Diplôme d'études secondaires ou l'équivalent	<input type="checkbox"/>
Certificat ou diplôme d'apprenti inscrit ou d'une école de métiers	<input type="checkbox"/>
Certificat ou diplôme d'un collège, d'un cégep ou d'un autre établissement non universitaire	<input type="checkbox"/>
Certificat ou diplôme universitaire inférieur au baccalauréat	<input type="checkbox"/>
Baccalauréat	<input type="checkbox"/>
Diplôme universitaire supérieur au baccalauréat	<input type="checkbox"/>
Je préfère ne pas répondre	<input type="checkbox"/>

45. Laquelle des catégories suivantes décrit le mieux votre situation d'emploi actuelle?

Emploi à temps plein (30 heures ou plus par semaine)	<input type="checkbox"/>
Emploi à temps partiel (moins de 30 heures par semaine)	<input type="checkbox"/>
Travail autonome	<input type="checkbox"/>
Sans emploi, mais à la recherche d'un travail	<input type="checkbox"/>
Aux études à temps plein	<input type="checkbox"/>
À la retraite	<input type="checkbox"/>
Pas sur le marché du travail (au foyer à temps plein, sans emploi et ne cherchant pas de travail)	<input type="checkbox"/>
Autre situation	<input type="checkbox"/>
Je préfère ne pas répondre	<input type="checkbox"/>

46. Auquel de ces groupes ethniques vous identifiez-vous? Veuillez choisir toutes les réponses qui s'appliquent.

Européen de l'Ouest (Royaume-Uni, Espagne, Portugal, France, Italie, Allemagne, Autriche, Suisse, etc.)	<input type="checkbox"/>
Européen de l'Est (Pologne, Hongrie, Roumanie, Ukraine, Russie, etc.)	<input type="checkbox"/>
Africain (Nigéria, Éthiopie, Tanzanie, etc.)	<input type="checkbox"/>
Moyen-oriental (Israël, Syrie, Jordanie, Égypte, Iran, Irak, etc.)	<input type="checkbox"/>
Sud-asiatique (Inde, Afghanistan, Pakistan, Sri Lanka, etc.)	<input type="checkbox"/>
Asiatique du Sud-Est (Thaïlande, Vietnam, Singapour, Philippines, Indonésie, Cambodge, etc.)	<input type="checkbox"/>
Asiatique de l'Est (Chine, Corée, Japon, Taïwan, etc.)	<input type="checkbox"/>
Sud-américain, centraméricain ou latino-américain (Argentine, Mexique, Brésil, etc.)	<input type="checkbox"/>
Antillais (Caraïbes)	<input type="checkbox"/>
Autochtone (Premières Nations, Métis, Inuits (Inuk), etc.)	<input type="checkbox"/>
Autre groupe; veuillez préciser _____	<input type="checkbox"/>
Je ne sais pas [EXCLUSIF]	<input type="checkbox"/>
Je préfère ne pas répondre [EXCLUSIF]	<input type="checkbox"/>

47. Quelle est la première langue que vous avez apprise à la maison lorsque vous étiez enfant et que vous comprenez toujours? Veuillez choisir toutes les réponses qui s'appliquent.

Anglais	<input type="checkbox"/>
Français	<input type="checkbox"/>
Autre langue (veuillez préciser)	<input type="checkbox"/>
Je préfère ne pas répondre	<input type="checkbox"/>

48. Quelle langue parlez-vous le plus souvent à la maison? Veuillez choisir toutes les réponses qui s'appliquent.

Anglais	<input type="checkbox"/>
Français	<input type="checkbox"/>
Autre langue (veuillez préciser)	<input type="checkbox"/>
Je préfère ne pas répondre	<input type="checkbox"/>

49. À quelle distance se trouve la clinique dentaire la plus proche de votre domicile?

Moins de 5 kilomètres	<input type="checkbox"/>
5 à 25 kilomètres	<input type="checkbox"/>
25 à 50 kilomètres	<input type="checkbox"/>
50 à 100 kilomètres	<input type="checkbox"/>
100 à 350 kilomètres	<input type="checkbox"/>
Plus de 350 kilomètres	<input type="checkbox"/>
Je préfère ne pas répondre	<input type="checkbox"/>

50. **[DEMANDER UNIQUEMENT À CEUX QUI ONT PRÉFÉRÉ NE PAS RÉPONDRE À LA Q.6]** Habitez-vous dans une région urbaine ou rurale?

Urbaine (dans une ville ou une grande municipalité)	<input type="checkbox"/>
Rurale (à l'extérieur d'une ville ou d'une grande municipalité)	<input type="checkbox"/>
Je préfère ne pas répondre	<input type="checkbox"/>

51. **[NP : NE PAS DEMANDER] NOTER LA LANGUE CHOISIE POUR LE SONDAGE.**

Anglais	<input type="checkbox"/>
Français	<input type="checkbox"/>

B. Recruit by Telephone to Online Screener (English and French)

Health Canada – Canada Dental Benefit Recruit to Web Screener

INTRODUCTION

Hello/Bonjour, my name is INSERT NAME from The Strategic Counsel, a professional public opinion research company. Would you prefer that I continue in English or French? Préférez-vous continuer en français ou en anglais? **[IF FRENCH, CONTINUE IN FRENCH OR ARRANGE A CALL BACK WITH FRENCH INTERVIEWER: Nous vous rappellerons pour mener cette entrevue de recherche en français. Merci. Au revoir].**

We are conducting an online survey on behalf of Health Canada regarding your views on dental care. Before we can invite you to participate online, we need to ask you a few questions to ensure that you qualify. It should take no longer than about 5 minutes to complete. Your participation is voluntary and completely confidential. Your answers will remain anonymous. May I continue? **[NOTE TO INTERVIEWER: IF RESPONDENT EXPRESSES A NEED FOR AN ALTERNATIVE/ACCESSIBLE VERSION, PLEASE ACCOMMODATE. A PAPER VERSION CAN BE PROVIDED IF TIME PERMITS AND/OR A PDF VERSION CAN BE EMAILED]**

**IF YES, CONTINUE.
IF NO, THANK AND END.**

SCREENING QUESTIONS

1. Do you, or does anyone in your household, work for any of the following organizations? Please select all that apply.

A marketing research firm	<input type="checkbox"/>	THANK AND END
A magazine or newspaper	<input type="checkbox"/>	THANK AND END
An advertising agency	<input type="checkbox"/>	THANK AND END
A political party	<input type="checkbox"/>	THANK AND END
A radio or television station	<input type="checkbox"/>	THANK AND END
A media company, including online media	<input type="checkbox"/>	THANK AND END
A public relations company	<input type="checkbox"/>	THANK AND END
The federal or provincial/territorial government	<input type="checkbox"/>	THANK AND END
None of these organizations	<input type="checkbox"/>	CONTINUE

2. In what year were you born? **[INTERVIEWER: RECORD YEAR – YYYY. TERMINATE THOSE BORN 2005 OR LATER]**

VOLUNTEERED: Prefer not to answer **[CONTINUE TO 2A]**

2A. Would you be willing to indicate in which of the following age categories you belong?

18-24	<input type="checkbox"/>	CONTINUE
25-34	<input type="checkbox"/>	CONTINUE
35-44	<input type="checkbox"/>	CONTINUE
45-54	<input type="checkbox"/>	CONTINUE
55-64	<input type="checkbox"/>	CONTINUE
65 or older	<input type="checkbox"/>	CONTINUE
VOLUNTEERED: Prefer not to answer	<input type="checkbox"/>	THANK AND END

3. Which of the following best describes your total household income last year, before taxes, for you and your spouse/common-law partner, not including any income received via universal child care benefit (UCCB) and registered disability savings plan (RDSP)? **[ACCEPT ONE RESPONSE ONLY]**

Under \$20,000	<input type="checkbox"/>	CONTINUE
\$20,000 to \$29,999	<input type="checkbox"/>	CONTINUE
\$30,000 to \$39,999	<input type="checkbox"/>	CONTINUE
\$40,000 to \$49,999	<input type="checkbox"/>	CONTINUE
\$50,000 to \$59,999	<input type="checkbox"/>	CONTINUE
\$60,000 to \$69,999	<input type="checkbox"/>	CONTINUE
\$70,000 to \$79,999	<input type="checkbox"/>	CONTINUE
\$80,000 to \$89,999	<input type="checkbox"/>	CONTINUE
\$90,000 to \$99,999	<input type="checkbox"/>	THANK AND END
\$100,000 or more	<input type="checkbox"/>	THANK AND END
VOLUNTEERED: Prefer not to answer	<input type="checkbox"/>	THANK AND END

4. Do you have children in your household in any of the following age categories? Please select all that apply.

Under age 12	<input type="checkbox"/>	CONTINUE
12-17 years of age	<input type="checkbox"/>	CONTINUE IF 'UNDER AGE 12' ALSO CHECKED
18 years of age or older	<input type="checkbox"/>	CONTINUE IF 'UNDER AGE 12' ALSO CHECKED
I do not have any children	<input type="checkbox"/>	THANK AND END
VOLUNTEERED: Prefer not to answer	<input type="checkbox"/>	THANK AND END

5. Do you have access to private dental insurance for yourself and your family, either through an employer, pension plan, or individual benefits plan? This does not include any coverage you receive from any provincial or federal dental plans. **[MONITOR BY ACCESS TO INSURANCE]**

Yes	<input type="checkbox"/>	CONTINUE
No	<input type="checkbox"/>	CONTINUE
VOLUNTEERED: Prefer not to answer	<input type="checkbox"/>	THANK AND END

6. May I have the first three characters of your postal code. **[MONITOR BY PROVINCE/REGION]**

VOLUNTEERED: Prefer not to answer **[CONTINUE TO 6A]**

- 6A. **[ASK ONLY OF THOSE WHO SAY 'PREFER NOT TO ANSWER' AT Q.6]** In which province or territory do you currently reside? **[MONITOR BY PROVINCE/REGION]**

Alberta	<input type="checkbox"/>	CONTINUE
British Columbia	<input type="checkbox"/>	CONTINUE
Manitoba	<input type="checkbox"/>	CONTINUE
New Brunswick	<input type="checkbox"/>	CONTINUE
Newfoundland and Labrador	<input type="checkbox"/>	CONTINUE
Northwest Territories	<input type="checkbox"/>	CONTINUE
Nova Scotia	<input type="checkbox"/>	CONTINUE
Nunavut	<input type="checkbox"/>	CONTINUE
Ontario	<input type="checkbox"/>	CONTINUE

Prince Edward Island	<input type="checkbox"/>	CONTINUE
Quebec	<input type="checkbox"/>	CONTINUE
Saskatchewan	<input type="checkbox"/>	CONTINUE
Yukon	<input type="checkbox"/>	CONTINUE
VOLUNTEERED: Outside of Canada	<input type="checkbox"/>	THANK AND END
VOLUNTEERED: Prefer not to answer	<input type="checkbox"/>	THANK AND END

7. How close is the nearest dental clinic to your home? **[MONITOR FOR REMOTE QUOTAS]**

Less than 5 kilometres	<input type="checkbox"/>	IF REMOTE BOOST, THANK AND END
5-25 kilometres	<input type="checkbox"/>	IF REMOTE BOOST, THANK AND END
25-50 kilometres	<input type="checkbox"/>	IF REMOTE BOOST, THANK AND END
50-100 kilometres	<input type="checkbox"/>	IF REMOTE BOOST, THANK AND END
100-350 kilometres	<input type="checkbox"/>	IF REMOTE BOOST, THANK AND END
Over 350 kilometres	<input type="checkbox"/>	CONTINUE
VOLUNTEERED: Prefer not to answer	<input type="checkbox"/>	THANK AND END

8. **[ASK ONLY OF THOSE WHO SAY 'PREFER NOT TO ANSWER' AT Q.6]** Do you live in an urban or a rural area?
[MONITOR FOR REMOTE QUOTAS]

Urban (in a city or large town)	<input type="checkbox"/>	IF REMOTE BOOST, THANK AND END
Rural (outside a city or a large town)	<input type="checkbox"/>	CONTINUE
VOLUNTEERED: Prefer not to answer	<input type="checkbox"/>	THANK AND END

INVITATION

I would like to invite you to participate in an online survey regarding your views on dental care for you and your family. The survey will take no more than 15 minutes to complete online and you will receive \$10 as a thank you for your participation following completion of the survey via an e-transfer. Please note that the deadline to complete the survey is March 20th, 2023.

Would you be willing to complete the survey online?

Yes **CONTINUE**
No **THANK AND END**

May I please have your name, and e-mail address so that I can send you the link for the survey?

Name:

Telephone Number: INTERVIEWER TO RECORD TELEPHONE NUMBER RESPONDENT WAS REACHED AT

E-mail Address:

You will receive an e-mail from **[INSERT SENDERS EMAIL]** with a link to the survey. Should you have any issues accessing the survey, you can contact our technical support team at support@thestrategiccounsel.com.

Thank you very much for your time.

RECRUITED BY: _____

DATE RECRUITED: _____

**Santé Canada– Prestation dentaire canadienne
Questionnaire de recrutement en ligne**

INTRODUCTION

Hello/ Bonjour, je m’appelle **[NOM DU RECRUTEUR]**. Je vous téléphone du Strategic Counsel, une entreprise de recherche sur l’opinion publique. Préférez-vous continuer en français ou en anglais? Would you prefer that I continue in English or French? **[SI EN FRANÇAIS, CONTINUEZ EN FRANÇAIS OU ARRANGEZ UN APPEL AVEC UN ENQUÊTEUR FRANCOPHONE : Nous vous rappellerons pour mener cette entrevue de recherche en français. Merci. Au revoir].**

Nous organisons un sondage, pour le compte de Santé Canada, concernant vos points de vue des soins dentaires. Avant de vous inviter à participer, je dois vous poser quelques questions pour nous assurer que vous qualifiez. Ceci ne devrait pas prendre plus de 5 minutes à compléter. Votre participation est entièrement volontaire et confidentielle. Vos réponses resteront anonymes. Puis-je continuer ? **[NOTE À L’INTERVIEWEUR : SI LE RÉPONDANT EXPRIME LE BESOIN D’UNE VERSION ALTERNATIVE OU ACCESSIBLE, VEUILLEZ L’ACCOMMODER. UNE VERSION EN PAPIER PEUT ÊTRE FOURNIE SI LE TEMPS PERMET OU UNE VERSION PDF PEUT ÊTRE ENVOYÉE PAR COURRIEL.]**

**SI OUI, CONTINUER.
SI NON, REMERCIER ET CONCLURE.**

QUESTIONS DE SÉLECTION

1. Est-ce que vous ou un membre de votre ménage travaillez pour l’une des organisations suivantes? Veuillez choisir toutes les réponses qui s’appliquent.

Une société de recherche marketing	<input type="checkbox"/>	REMERCIER ET CONCLURE
Un magazine ou un journal	<input type="checkbox"/>	REMERCIER ET CONCLURE
Une agence de publicité	<input type="checkbox"/>	REMERCIER ET CONCLURE
Un parti politique	<input type="checkbox"/>	REMERCIER ET CONCLURE
Une station de radio ou de télévision	<input type="checkbox"/>	REMERCIER ET CONCLURE
Une entreprise médiatique, y compris les médias numériques	<input type="checkbox"/>	REMERCIER ET CONCLURE
Une agence de relations publiques	<input type="checkbox"/>	REMERCIER ET CONCLURE
Le gouvernement fédéral, un gouvernement provincial ou territorial	<input type="checkbox"/>	REMERCIER ET CONCLURE
Aucune de ces organisations	<input type="checkbox"/>	CONTINUER

2. Quelle est votre année de naissance? **[NOTE À L’INTERVIEWEUR OU L’INTERVIEWEUSE : NOTER L’ANNÉE – AAAA. POUR LES PERSONNES NÉES EN 2005 OU APRÈS, REMERCIER ET CONCLURE]**

RÉPONSE SPONTANÉE : Préfère ne pas répondre [CONTINUER À 2A]

2A. Accepteriez-vous d’indiquer votre tranche d’âge dans la liste suivante?

18 à 24 ans	<input type="checkbox"/>	CONTINUER
25 à 34 ans	<input type="checkbox"/>	CONTINUER
35 à 44 ans	<input type="checkbox"/>	CONTINUER

45 à 54 ans	<input type="checkbox"/>	CONTINUER
55 à 64 ans	<input type="checkbox"/>	CONTINUER
65 ans ou plus	<input type="checkbox"/>	CONTINUER
RÉPONSE SPONTANÉE : Préfère ne pas répondre	<input type="checkbox"/>	REMERCIER ET CONCLURE

3. Laquelle des catégories suivantes décrit le mieux le revenu total de votre ménage l'an dernier, avant impôts, pour vous et votre conjoint(e) ou conjoint(e) de fait, en excluant tout revenu associé à la Prestation universelle pour la garde d'enfants (PUGE) et au régime enregistré d'épargne-invalidité (REEI)? **[UNE SEULE RÉPONSE]**

Moins de 20 000 \$	<input type="checkbox"/>	CONTINUER
20 000 \$ à 29 999 \$	<input type="checkbox"/>	CONTINUER
30 000 \$ à 39 999 \$	<input type="checkbox"/>	CONTINUER
40 000 \$ à 49 999 \$	<input type="checkbox"/>	CONTINUER
50 000 \$ à 59 999 \$	<input type="checkbox"/>	CONTINUER
60 000 \$ à 69 999 \$	<input type="checkbox"/>	CONTINUER
70 000 \$ à 79 999 \$	<input type="checkbox"/>	CONTINUER
80 000 \$ à 89 999 \$	<input type="checkbox"/>	CONTINUER
90 000 \$ à 99 999 \$	<input type="checkbox"/>	REMERCIER ET CONCLURE
100 000 \$ ou plus	<input type="checkbox"/>	REMERCIER ET CONCLURE
RÉPONSE SPONTANÉE : Préfère ne pas répondre	<input type="checkbox"/>	REMERCIER ET CONCLURE

4. Votre ménage compte-t-il des enfants appartenant aux catégories d'âge suivantes? Veuillez choisir toutes les réponses qui s'appliquent.

Moins de 12 ans	<input type="checkbox"/>	CONTINUER
12 à 17 ans	<input type="checkbox"/>	CONTINUER SI « MOINS DE 12 ANS » A ÉGALEMENT ÉTÉ COCHÉ
18 ans ou plus	<input type="checkbox"/>	CONTINUER SI « MOINS DE 12 ANS » A ÉGALEMENT ÉTÉ COCHÉ
Je n'ai pas d'enfant	<input type="checkbox"/>	REMERCIER ET CONCLURE
RÉPONSE SPONTANÉE : Préfère ne pas répondre	<input type="checkbox"/>	REMERCIER ET CONCLURE

5. Avez-vous accès à une assurance dentaire privée pour vous et votre famille par l'intermédiaire d'un employeur, d'un régime de retraite ou d'un régime d'assurance individuel? Cela ne comprend pas la couverture offerte par des régimes d'assurance dentaire du gouvernement provincial ou fédéral. **[SUIVRE PAR L'ACCÈS À L'ASSURANCE MALADIE]**

Oui	<input type="checkbox"/>	CONTINUER
Non	<input type="checkbox"/>	CONTINUER
RÉPONSE SPONTANÉE : Préfère ne pas répondre	<input type="checkbox"/>	REMERCIER ET CONCLURE

6. Puis-je avoir les trois premiers caractères de votre code postal? **[SUIVRE LES QUOTAS PAR PROVINCE/RÉGION]**

RÉPONSE SPONTANÉE : Préfère ne pas répondre **[CONTINUER À 6A]**

6A. [DEMANDER UNIQUEMENT À CEUX QUI ONT PRÉFÉRÉ NE PAS RÉPONDRE À LA Q.6] Dans quelle province ou quel territoire habitez-vous? [SUIVRE LES QUOTAS PAR PROVINCE/RÉGION]

Alberta	<input type="checkbox"/>	CONTINUER
Colombie-Britannique	<input type="checkbox"/>	CONTINUER
Manitoba	<input type="checkbox"/>	CONTINUER
Nouveau-Brunswick	<input type="checkbox"/>	CONTINUER
Terre-Neuve-et-Labrador	<input type="checkbox"/>	CONTINUER
Territoires du Nord-Ouest	<input type="checkbox"/>	CONTINUER
Nouvelle-Écosse	<input type="checkbox"/>	CONTINUER
Nunavut	<input type="checkbox"/>	CONTINUER
Ontario	<input type="checkbox"/>	CONTINUER
Île-du-Prince-Édouard	<input type="checkbox"/>	CONTINUER
Québec	<input type="checkbox"/>	CONTINUER
Saskatchewan	<input type="checkbox"/>	CONTINUER
Yukon	<input type="checkbox"/>	CONTINUER
RÉPONSE SPONTANÉE : À l'extérieur du Canada	<input type="checkbox"/>	REMERCIER ET CONCLURE
RÉPONSE SPONTANÉE : Préfère ne pas répondre	<input type="checkbox"/>	REMERCIER ET CONCLURE

7. À quelle distance se trouve la clinique dentaire la plus proche de votre domicile? [SUIVRE LES QUOTAS DES LIEUX RURAUX]

Moins de 5 kilomètres	<input type="checkbox"/>	SI LES LIEUX RURAUX SONT EN EXCÈS, REMERCIER ET CONCLURE
5 à 25 kilomètres	<input type="checkbox"/>	SI LES LIEUX RURAUX SONT EN EXCÈS, REMERCIER ET CONCLURE
25 à 50 kilomètres	<input type="checkbox"/>	SI LES LIEUX RURAUX SONT EN EXCÈS, REMERCIER ET CONCLURE
50 à 100 kilomètres	<input type="checkbox"/>	SI LES LIEUX RURAUX SONT EN EXCÈS, REMERCIER ET CONCLURE
100 à 350 kilomètres	<input type="checkbox"/>	SI LES LIEUX RURAUX SONT EN EXCÈS, REMERCIER ET CONCLURE
Plus de 350 kilomètres	<input type="checkbox"/>	CONTINUER
RÉPONSE SPONTANÉE : Préfère ne pas répondre	<input type="checkbox"/>	REMERCIER ET CONCLURE

8. [DEMANDER UNIQUEMENT À CEUX QUI ONT PRÉFÉRÉ NE PAS RÉPONDRE À LA Q.6] Habitez-vous dans une région urbaine ou rurale? [SUIVRE LES QUOTAS DES LIEUX RURAUX]

Urbaine (dans une ville ou une grande municipalité)	<input type="checkbox"/>	SI LES LIEUX RURAUX SONT EN EXCÈS, REMERCIER ET CONCLURE
Rurale (à l'extérieur d'une ville ou d'une grande municipalité)	<input type="checkbox"/>	CONTINUER
RÉPONSE SPONTANÉE : Préfère ne pas répondre	<input type="checkbox"/>	REMERCIER ET CONCLURE

INVITATION

J'aimerais vous inviter à participer à un sondage en ligne concernant votre point de vue sur les soins dentaires pour vous et votre famille. Le sondage ne prendra pas plus de 15 minutes à compléter en ligne et vous recevrez 10 \$ par un virement électronique pour vous remercier pour votre participation après avoir complété le sondage. Veuillez noter que la date limite pour répondre au sondage est le 20 mars 2023.

Souhaitez-vous compléter le sondage en ligne ?

Oui **CONTINUER**
Non **REMERCIER ET CONCLURE**

Puis-je avoir votre nom complet, et votre adresse électronique, si vous en avez une, pour vous envoyer le lien du sondage ?

Nom :

Numéro de téléphone : L'ENQUÊTEUR DOIT ENREGISTRER LE NUMÉRO DE TÉLÉPHONE AVEC LEQUEL LE RÉPONDANT A ÉTÉ CONTACTÉ

Adresse courriel :

Vous recevrez un courrier électronique de la part de **[INSÉRER COURRIEL DE L'ENVOYEUR]** avec le lien du sondage. Si vous rencontrez des difficultés à accéder au sondage, veuillez communiquer avec notre équipe de soutien technique à : support@thestrategiccounsel.com.

Merci de votre temps.

RECRUTEMENT FAIT PAR : _____

DATE DU RECRUTEMENT : _____