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Continuous Qualitative Data Collection of Canadians' Views – September 2020

Final Report

Prepared for the Privy Council Office

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Canada 

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This public opinion research report presents the results of a series of focus groups conducted by The Strategic Counsel on behalf of the Privy Council Office. The twelfth cycle of the study included a total of fourteen focus groups with Canadian adults (18 years of age and older) between September 2nd and 29th, 2020.

Cette publication est aussi disponible en français sous le titre : Rapport final - Collecte continue de données qualitatives sur les opinions des canadiens – septembre 2020.

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Privy Council Office
Blackburn Building
85 Sparks Street, Room 228
Ottawa, Ontario K1A 0A3

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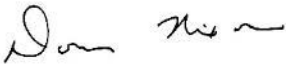
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Political Neutrality Certification

I hereby certify as a Senior Officer of The Strategic Counsel that the deliverables fully comply with the Government of Canada political neutrality requirements outlined in the Policy on Communications and Federal Identity and the Directive on the Management of Communications – Appendix C – Mandatory Procedures for Public Opinion Research.

Specifically, the deliverables do not include information on electoral voting intentions, political party preferences, standings with the electorate, or ratings of the performance of a political party or its leaders.

Signed:  _____

Date: November 26, 2020

Donna Nixon, Partner
The Strategic Counsel

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Executive Summary

Introduction

The Communications and Consultation Secretariat of the Privy Council Office (PCO) commissioned The Strategic Counsel (TSC) to conduct continuous cycles of focus group research across the country with members of the public on key national issues, events, and policy initiatives related to the Government of Canada.

The broad purpose of this ongoing qualitative research program is three-fold: to explore the dimensions and drivers of public opinion on the most important issues facing the country; to assess perceptions and expectations of the federal government's actions and priorities, and; to inform the development of Government of Canada communications so that they continue to be aligned with the perspectives and information needs of Canadians, while remaining both clear and easy-to-understand.

The research is intended to be used by the Communications and Consultation Secretariat within PCO in order to fulfill its mandate of supporting the Prime Minister's Office in coordinating government communications. Specifically, the research will ensure that PCO has an ongoing understanding of Canadians' opinions on macro-level issues of interest to the government, as well as emerging trends.

This report includes findings from 12 online focus groups which were conducted between September 2nd and 29th, 2020 in multiple locations across the country including Atlantic Canada, Quebec, Ontario, the Prairies, Alberta and British Columbia. Details concerning the locations, recruitment, and composition of the groups are shown in the section below.

The research for this cycle of focus groups focussed primarily on COVID-19, as the pandemic continued in Canada. The research explored a wide range of related issues in depth, including what Canadians were hearing about COVID-19 in the news, views on whether pandemic was under control

in Canada, how their behaviours have evolved, as well as the intersection of COVID-19 and the economy, specifically in terms of federal government financial supports and the transition from CERB to EI. There were also discussions held among particular key subgroups of the population, such as parents, to explore how they were feeling about sending their children back to school.

In addition to the pandemic, non-COVID-19 related discussions broached other topics including the opioid crisis, Pharmacare, Indigenous issues, and the Speech from the Throne. Additionally, throughout the month, various creative concepts intended to promote getting the seasonal flu shot were shown to participants and parents specifically were shown a series of concepts that promoted childhood vaccines.

As a note of caution when interpreting the results from this study, findings of qualitative research are directional in nature only and cannot be attributed quantitatively to the overall population under study with any degree of confidence.

Methodology

Overview of Groups

Target audience

- Canadian residents, 18 and older.
- Groups were split primarily by location.
- Some groups focussed on specific subgroups of the population including pregnant women /women expecting to become pregnant within the next year, parents of young children and school aged children, seniors (aged 55 and older), Indigenous peoples, and CERB recipients.

Detailed Approach

- 12 focus groups across various regions in Canada.
- Three groups were conducted with the general population in major centres in Atlantic Canada, smaller centres in Quebec and the Lower Mainland.
- The other eight groups were conducted with key subgroups including:
 - Pregnant women, women expecting to become pregnant in within the next year and parents of newborn to 6 years in major centres in Ontario and major Francophone centres;
 - Parents of school aged children in major centres in Saskatchewan and mid-size centres in Ontario;
 - Indigenous peoples residing in Winnipeg or the National Capital Region (NCR); and
 - CERB recipients from the Greater Montreal Area (GMA) and Greater Toronto Area (GTA), and seniors from mid-size centres Quebec and major centres in Alberta.
- Groups in Quebec were conducted in French, while all others were conducted in English.
- All groups for this cycle were conducted online.

- A total of 8 participants were recruited for each group, assuming 6 to 8 participants would attend.
- Across all locations, 80 participants attended, in total. Details on attendance numbers by group can be found below.
- Each participant received an \$90 honorarium in respect of their time.

Group Locations and Composition

LOCATION	GROUP	LANGUAGE	DATE	TIME (EST)	GROUP COMPOSITION	NUMBER OF PARTICIPANTS
Saskatchewan (Regina/Saskatoon)	1	English	Sept. 2	7:00-9:00 pm	Parents (of children in Junior Kindergarten to Grade 6)	8
Ontario (mid-size centres)	2	English	Sept. 3	6:00-8:00 pm	Parents (of children in Grades 7-12)	8
Quebec (mid-size centres)	3	French	Sept. 8	6:00-8:00 pm	Seniors (aged 55+)	6
Atlantic Canada	4	English	Sept. 9	5:00-7:00 pm	Gen Pop	7
Alberta (Calgary/Edmonton)	5	English	Sept. 10	8:00-10:00 pm	Seniors (aged 55+)	6
Ontario (major centres)	6	English	Sept. 14	6:00-8:00 pm	Parents (of children newborn to 6 years old, pregnant women, or those expecting to become pregnant within year)	5
Winnipeg/St. Boniface, Quebec, New Brunswick, Ontario	7	French	Sept. 15	6:00-8:00 pm	Francophones	7
National Capital Region, Winnipeg CMA	8	English	Sept. 22	7:00-9:00 pm	Indigenous people (First Nations, Métis, Inuit)	7
Quebec (smaller centres)	9	French	Sept. 24	6:00-8:00 pm	Gen Pop	6
B.C. (Vancouver/Lower Mainland)	10	English	Sept. 24	8:00-10:00 pm	Gen Pop	6
GMA CERB Recipients	11	French	Sept. 28	6:00-8:00 pm	CERB Recipients	6
GTA CERB Recipients	12	English	Sept. 29	6:00-8:00 pm	CERB Recipients	8
Total number of participants						80

Key Findings

Part I: COVID-19 Related Findings

Government of Canada in the News (All Locations)

In relation to what participants had seen, read or heard about the Government of Canada in the news, most mentioned issues related to the CERB and COVID-19.

Regarding the CERB, some participants were aware of the impending transition from CERB to EI, and a few commented on their impressions that the new programs were intended to be more accessible and to provide benefits for those previously not covered. Most, however, had heard only vague details about the end of CERB. Additionally, a few commented on the financial implications of the CERB and their viewpoints on its impact, both positive and negative, on the federal budget.

Regarding news related to COVID-19, many had heard about the different actions the Government of Canada had taken including extending the Canada-U.S. border closure, funding to keep schools safe, funding to secure a supply of COVID-19 vaccines, advertising related to the transmission of COVID-19 and the promotion of the COVID Alert App.

Participants were much slower to respond when asked a more specific question concerning what they had heard about Government of Canada actions regarding the current COVID-19 pandemic. Ultimately, few were able to recall any specifics.

COVID-19 Testing in the Community (GMA CERB Recipients, GTA CERB Recipients)

Participants in groups held among residents of the Greater Montreal Area (GMA) and the Greater Toronto Area (GTA) were asked specifically about what they had heard about COVID-19 testing capacity and procedures in their communities. Many had heard about lengthy delays, in terms of line-ups for getting a test and wait times for receiving the results, an increased demand for testing and the recruitment of hospital staff to man COVID-19 test facilities. Participants suggested many solutions to help issues related to testing capacity, including the popular idea of opening more drive-thru and mobile testing centres.

COVID-19 in the News (Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents)

In two groups undertaken among parents, participants were specifically asked what they had been hearing in the news about COVID-19. Most mentioned reports related to how COVID-19 may impact the start of the school year and the new protocol in place to prevent a second wave.

COVID Alert App (Mid-size Centres Ontario Parents)

Virtually all parents from mid-size centres in Ontario were aware of the Government of Canada's COVID Alert App and most reported they had downloaded it. The few who had not downloaded the

app cited two main reasons: they felt the app was unnecessary due to low case numbers in their area and/or they were worried that the app might track and store personal data.

Current COVID-19 Situation (Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors)

In a few groups, held in the early weeks of September, participant's responses reflected a large degree of uncertainty, coupled with some degree of fear and stress, when asked about the current COVID-19 situation in Canada. These responses were mostly related to the fluidity of and changing nature of case counts across the country.

Some were of the view that Canadians had become overly-complacent with respect to wearing masks and maintaining social distancing, while others felt that inconsistent messaging across regions and jurisdictions in regards to specific protocols was contributing to public confusion. Some also expressed concerns about what they saw as less active communication by the Government of Canada, which left them with a sense that overall coordination and oversight was somewhat lacking.

Although participants acknowledged that Canada had done better in addressing COVID-19 relative to other countries, most were of the opinion that the spread of COVID-19 was not yet under control. Many participants were particularly concerned about the trajectory of the virus in Canada's large and densely populated urban centres.

Behaviour Change (Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents, Mid-size Centres Quebec Seniors, Major Centres Ontario Parents, Major Francophone Centres Parents, Winnipeg and NCR Indigenous Peoples, Smaller Centres Quebec, Lower Mainland, GMA CERB Recipients, GTA CERB Recipients)

In September, many participants reported some changes in behaviours and their daily routines in response to rising case counts in their province or community and, thus, were taking more precautions. This was particularly the case for people who considered themselves to be more 'at risk' or who were concerned about other family members with underlying health conditions.

Participants residing in areas with lower case counts, however, reported the opposite behaviours. They indicated that they were expanding their social circles and felt more comfortable going out to stores and restaurants. Additionally, some parents whose children were about to start the school year noted they had begun to venture out more with their children in order to establish a more normal routine.

Experience of Parents

When asked to describe the experience of parenting during the pandemic, parents' responses reflected a mix of experiences. Some found it exhausting and stressful, especially those who were working from home. Those who had returned to their place of work discussed the challenges of finding daycare. All parents found it challenging to entertain their children while also balancing the demands and pressures of work.

Although parents vocalized the stresses and pressures of parenting through COVID-19, some said they had developed a closer bond and deeper connection with their children. However, some parents did note that prolonged isolation had contributed to their children becoming more reserved, anxious and extremely attached to them, which was a cause for concern in terms of the transition to school and long-term psychological impacts.

Participants who were expecting at the time of the focus group said the main differences being pregnant during a pandemic included how little their partner could be involved in the experience, the necessity to take additional COVID-19 precautions; and not participating in the usual celebratory events. For those planning to have a baby in the near future, most reported the pandemic had done little to change their plans.

Experience of Seniors

Seniors were mixed in their response to being labeled as a 'vulnerable' group given they were over the age of 55. For the most part they did not wish to be singled out and generally felt that assistance and attention should be focused on anyone with a pre-existing health condition.

When asked how they would describe their experience living through the pandemic to someone in their twenties, some indicated they would tell young people to be more careful and emphasize that youth were just as much at risk as anyone else.

Impact on Household Budgets and Expenses

Almost all participants agreed that their spending habits had changed since the onset of the pandemic. Some indicated their spending had decreased and attributed this mostly to paying closer attention to their personal finances and purposeful decisions they had taken to reduce non-essential expenditures. Others observed that their monthly expenses had increased due primarily to higher costs for food and other basic household items where a shortage of supply had resulted in surge pricing. Higher expenses also reflected the fact that many were upgrading their home Internet to allow for multiple people who were now working or learning online from home. For the same reason, several participants remarked that their electricity costs had also risen.

Views on a Second Wave

Most participants agreed that there were clear signs of a second wave. Depending on the region in which they were located, they were either witnessing the early stages of a second wave or it was already full-blown. Participants attributed the second wave to a variety of behavioral factors, such as lax mask wearing, fatigue over the duration of the pandemic and a desire to socialize with friends and family. Many also believed that cases had not yet peaked and expressed concerns that the situation would likely worsen through the winter months and wondered about the additional impact of the onset of flu season.

Participants had mixed views regarding how prepared Canada was to handle a second wave of COVID-19. Some felt that having come through the initial phase of the pandemic, governments and agencies and the public were more prepared. Others felt quite differently, expressing concerns that Canadians

would have more difficulty adjusting to a second wave as they may be less fearful of the effects or take it less seriously. Regardless, several participants remarked that a second wave would cause additional stress and mental health issues, especially if further isolation is required.

Although participants' views varied on the extent and effectiveness of widespread lockdowns, the overall expectation was that more restrictions would likely be reinstated. Most agreed that international travel should continue to be restricted and borders should remain closed and some expected that restaurants and bars would again be closed. Some participants expressed a desire for provincial governments to take stronger measures: implementing fines for people and businesses not following guidelines around mask-wearing and social distancing, more consistent application of rules within and across provinces and a mandatory two-week quarantine. Others felt there were opportunities to apply these types of measures by taking a more targeted approach to respond to specific events or 'hot spots' viewed as causing transmission.

Impact of COVID-19

Looking ahead, most participants were worried about how COVID-19 would impact themselves, their families, and businesses in their communities. Many were concerned about job security, unemployment rates, the impacts on small businesses and the economy more generally.

Unprompted, some spoke about the toll the pandemic would take from the standpoint of people's mental health, specifically commenting on the magnifying effects of COVID-19 going into a second wave. Concerns were raised about ongoing fears for family members who are essential workers or employed in jobs which increase their risk of exposure to the virus. Others talked about the emotional toll of being unable to pursue their usual routine and the absence of social and spiritual engagement on their lives.

Financial Supports (Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents, GMA CERB Recipients, GTA CERB Recipients)

Views on Transition from CERB to EI/Recovery Benefits

In several groups an in-depth discussion was undertaken to gauge views on specific aspects of the various financial supports being provided by the Government of Canada. Participants were shown some information from the announcement, made in late August 2020, about the approach to transition from the CERB to a simplified Employment Insurance (EI) or one of three recovery benefits – The Canada Recovery Benefit (CRB), The Canada Recovery Caregiver Benefit (CRCB) or the Canada Recovery Sickness Benefit (CRSB).

Overall, many participants reacted positively when asked about this approach, suggesting that it would be beneficial for a wider group of people who may not have been previously eligible for the CERB. In particular, most responded favourably to having more options and coverage for self-employed persons, caregivers and for those required to take sick leave. Most felt the benefit amounts were reasonable and appreciated that they were clearly defined. Some noted that it remained roughly the

same as it had been under CERB, which they viewed as acceptable. However, the benefit amount was a greater concern for participants currently in receipt of the CERB who felt some may struggle to keep up with their monthly bills. In particular, the benefit amount was seen as insufficient for disabled persons and/or those without coverage for prescription drugs.

Although some expressed concern about federal government spending, it was also the view of participants that as the economy opens up this would result in reduced fiscal pressure on the Government of Canada and fewer people in need of these supports.

Participants in groups held in Saskatchewan and Ontario were asked which considerations were the most important when considering the transition from the CERB to EI. Most were focused on ensuring there was no delay in the transition from the old to the new system. The general consensus was that people who had been relying on the CERB needed some reliability and continuity in terms of financial supports. A few participants did feel strongly about the other considerations – ensuring that those who qualify for CERB also qualify for EI or the new benefits, and that the federal government should be trying to reduce the amounts paid out and the overall deficit.

Timelines for EI and Recovery Benefits

When participants, across all groups, were asked about their views on how long benefits should stay in place, responses varied widely, reflecting a high degree of uncertainty about the future and the fluidity of the current situation. A few participants put forward an unlimited timeframe – for as long as necessary – while others linked the duration of benefits to the timing of a vaccine becoming available or the lifting of social distancing and stay-at-home restrictions.

When participants were told that the simplified EI system and the new recovery benefits would be in place for one year and, aside from the Canada Recovery Sickness Benefit, would provide a minimum entitlement of 26 weeks of regular benefits, they were generally comfortable with this timeframe. However, many participants also expressed considerable uncertainty about the one-year timeframe and proposed it should be re-evaluated based on evolving events and circumstances or by having modified approaches by industry or sector. On balance, participants concluded that the fluidity of the situation made it difficult to determine an appropriate timeframe during which these benefits should stay in place. They felt they could not predict with any accuracy how quickly the economy might rebound and what the situation would look like in the spring of 2021.

Concerns about Transition (GMA CERB Recipients, GTA CERB Recipients)

Most receiving CERB benefits did not have any concerns about the transition, although many indicated that they were simply unclear on the process and specifics. Some commented that it appeared to be a fairly seamless transition, although a few expressed some worries about an inability to obtain clarity around their questions, delays in receiving forms and the issue of tax implications for those receiving benefits.

Economy (Major Centres Atlantic Canada, Major Centres Alberta Seniors, Major Centres Ontario Parents, Major Francophone Centres Parents)

Participants' awareness of Government of Canada activities in support of economic recovery was modest, although some were quick to point out key steps the government had taken with respect to implementing the CERB, in addition to financial aid for students and other groups, and wage subsidies directed to businesses with the aim of encouraging more economic activity.

Discussion focused on four different phrases describing what the goals of Canada's economic recovery could be:

- The phrase *'We need to build back better'* emerged as the preferred choice across the four groups. It was interpreted as a broad, all-encompassing and unifying statement that also encapsulated the ideas of strengthening and restoring the economy, with a particular focus on making it better. The idea of moving into a position of strength and a reinvigorated, improved economy, post-pandemic, resounded with many participants. The main criticism was that this phrase was already in use in the election campaign within the U.S. and within the United Kingdom.
- There was a modest level of support the phrase *'We need a more resilient country'*. Many participants responded positively to the idea of an economy that demonstrates more resiliency, interpreting this as meaning one which is more self-sufficient and responsive to economic shocks, including another pandemic. Resiliency reflected forward momentum, while building back better implied looking back.
- A few participants responded positively to *'We need a green recovery'*, believing that the time was right to invest in environmentally friendly technologies which aligned with their values of environmental protection and sustainability.
- Participants were most critical of the phrase *'We need a green new deal'*. It suggested completely restarting the economy and concerns were raised that it would single out the Alberta economy in particular. Moreover, participants connected the term with American initiatives, both currently and during the Great Depression.

Schools (Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents)

Awareness of Back to School Plans

Parents were well aware of the back-to-school plans in each of their jurisdictions and the relevant provincial initiatives. Those in Saskatchewan were familiar with the Saskatchewan Safe School Plan and aware that it had been revised both to address the evolving situation and to provide the public with more detail. Parents in Ontario knew that the Ontario plan was available online and that parents could sign up by e-mail to receive further updates, although they did mention their concerns about the variation in plans from one board to another and expressed some frustration that they had received information in what they felt was a piecemeal fashion.

Parents in both groups were aware of delayed starts to the school year, staggered school openings and the introduction of a range of distancing measures (such as spacing on buses, cancellation of

group activities and smaller internal bubbles) and sanitary procedures (such as mask protocols and the introduction of sanitizing stations).

Parents' Plans, Issues and Concerns

Participants were then provided with some additional information on the back to school plans in each jurisdiction and were asked if they intended to send their children to school in person. Most said that they were willing to send their children back into the school, although their reasons for doing so varied. Some parents were limited by not having an option for their child to participate online, while others focused more so on their children's mental health and social needs as well as their optimal learning environment. Working parents spoke about the importance of getting their children back into school, as it would allow them to work either more productively at home or to be able to return to their own workplace.

This is not to say that parents were completely comfortable with in-person schooling. Many of them were concerned, mentioning that sending their children back to school required a level of trust that all parents/families were taking precautions, concerns about children not adhering to health and safety protocols and a perceived inability of schools to adequately implement distancing practices. Some parents described the decision to send their children back to school during COVID-19 as one of the most difficult they have had to make. They felt that, either way, they would carry some feelings of guilt. While they did not want to purposely place their children in harm's way and worried about the increased risk of their child catching COVID-19 and of its possible long-term effects, they were equally concerned about the impact of further isolation on their child's behaviour. Many parents were also worried about their children spreading infection in their communities, especially the possible impacts on other family members, such as grandparents.

Safer Schools

When asked what they thought was needed to make things safer at school parents primarily focused on issues of class size, hiring more teachers and spreading students out. There was a consensus that reducing class sizes, would be the most helpful and cited a range of ideas such as 'stagger days', moving students to make use of spare/less used spaces and taking advantage of outdoor education opportunities. They were quite realistic about the dual challenge of adding extra teachers and having to find the extra space if class sizes were reduced.

Most parents had heard something about Government of Canada's announcement to help make schools safer, although few were aware of the specifics. They generally understood that it involved funding for each province and agreed that this was a positive contribution, but they also felt that once the overall amount of \$2 billion was broken out and distributed across the provinces it would not be sufficient. When asked what else the Government of Canada could do in this area, there were only a few comments including providing rapid testing, incentives for home schooling and possibly formally mandate class sizes.

Part II: Other Issues

Seasonal Flu Concept Testing (Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors, Major Centres Ontario Parents, Major Francophone Centres Parents)

In five groups, participants were shown two concepts, each containing a series of three banner images which were under development by the Government of Canada for a possible advertising campaign regarding the seasonal vaccine.

Reaction to the two concepts varied and there was no clear consensus on a direct question as to which one of the two concepts was seen to be most effective in terms of its motivating Canadians to get a flu shot. Overall, participants felt the target audience was clear as was the main message – to get the flu shot – although participants’ comments suggested that the extent to which either concept was effective in motivating participants to do so varied within and across the groups.

Reaction to Concept 1 – ‘This year’ – was more mixed to negative. In general, however, Concept 1 was viewed as more assertive and coercive, leaving participants feeling somewhat guilty if they had not already been vaccinated for the flu. Participants took issue with the question asked on the first frame – ‘*We got the flu shot this year, did you?*’ – claiming that it was overly directive and forceful. Some described it as bullying and commented that it was divisive – setting up an ‘us versus them’ dynamic (i.e., those who got vaccinated and those who didn’t). At the same time, participants did respond positively to the notions of protecting one’s family and limiting the risk of complications from the flu (the message in the second and third frames), both of which reinforced the importance of the flu vaccine in the current COVID-19 context. On the issue of masks, participants’ were of two minds – some felt it was relevant and would reinforce the importance of getting a flu shot while others felt it created confusion especially in situations showing presumed family members wearing masks, although they were likely to be residing in the same household and should not be required to wear a mask when they are together.

By contrast, many participants found Concept 2 more forward-looking and inviting in its tone and approach, acting as a reminder that now is the time to start thinking ahead and to book a date/time to get vaccinated. Overall this concept received more positive commentary. Participants liked the reference to making a plan. It served as a polite reminder to make the flu shot a priority and participants felt that making a plan demonstrated more of a commitment to getting the vaccination – the use of the word ‘plan’ was thought to encourage the public to take specific steps or actions. The perceived clarity of the message was also reinforced by mention of the flu on all three frames.

In general, participants responded favourably to the simplicity of these concepts, the minimalist look and feel, especially in terms of text, contrasting colour palettes and uplifting imagery.

A possible accompanying statement – *This fall, we’re protecting ourselves, our communities, and our healthcare system from the flu. Let’s keep everyone safe* – was favourably received. It was viewed as motivating, direct and supportive, evoking a sense of inclusiveness and community.

Childhood Vaccination Concept Testing (Major Centres Ontario Parents, Major Francophone Centres Parents)

Two short videos to be used for a possible advertising campaign promoting childhood vaccinations were shown to two groups of parents. Participants responded positively to both, finding them to be clear, to the point, relatable, relevant and reassuring. There was general consensus that the primary objective of the ads was to act as a reminder to parents to protect themselves and their families by having their children vaccinated and to keep their children's vaccinations up-to-date. A secondary message around the general safety of vaccines was thought to be implied through specific vignettes showing safety measures parents take with their children, including a child wearing a helmet while riding a scooter, in a car seat, and holding a parent's hand while crossing at a designated crosswalk. All these scenarios were viewed as relatable, especially those showing children at various stages – newborn, infant, and toddler – which reinforced the 'routine' nature of scheduled vaccinations.

Participants found both videos to be quite similar in message and the tone. On balance, however, there was a slight preference for Video 1 over Video 2. The former was seen as more inclusive as it showed both a mother and a father, underscoring the involvement of both parents. The main critique of the latter centered on the ambiguity of the parent shown in the first scene, as the face/gender was obscured.

Many participants indicated that, given the message and the tone, the ads would draw their attention, and several commented that they would be likely to share the video with other new parents as well as family and friends who are expecting a child. A number of parents remarked that, after seeing the ad, they would double-check the status of their child's/children's vaccinations, talk to a health professional, or further research the prescribed regime of vaccinations.

When it was pointed out that neither the mother nor the nurse shown in the vaccination scene in both ads were wearing masks, participants reacted both positively and negatively, although this issue did not significantly detract from the perceived effectiveness of either concept. Some felt the actors should be shown wearing masks, especially if the ad was to be aired while the pandemic was ongoing. They worried that it may send a confusing signal at a time when public health officials have been emphasizing mask wearing. Others held the opposite view, commenting that it was a relief to see an ad in which people were not wearing masks. They also felt that, given the focus on the flu, masks were not imperative to this particular message.

Opioids (Major Centres Saskatchewan Parents)

In Saskatchewan, many participants had recently heard about opioids either through news stories or personal connections. Some had heard reports of more opioid-related deaths in B.C. than from COVID-19, while many felt as though the opioid crisis was national in scope and getting worse. Participants generally referred to the situation as an epidemic and spoke about an increase in fentanyl use and related overdoses, which they believed had been exacerbated by the pandemic.

Participants suggested possible root causes of the opioid crisis, a number of which were linked to COVID-19. Many participants perceived COVID-19 have exacerbated underlying mental health and domestic violence issues resulting in a heavier reliance on opioids and created challenges to obtaining support/rehabilitation services. There were also concerns that other illegally obtained drugs were increasingly being laced with fentanyl without the user's knowledge or awareness.

Participants were united in their opinions about what the Government of Canada could do to help mitigate the crisis. They advocated for multiple actions, including more mental health resources, more safe injection sites and more education about addiction and mental health. When asked specifically about their views on decriminalizing possession of illicit drugs, many responded favorably since they felt this approach would focus more on rehabilitation and offer people greater access to mental health resources and other assistance. Several participants emphasized that incarceration, in their view, only served to continue the cycle of dependency.

Pharmacare (Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors)

Familiarity and Perceived Importance

Many participants were familiar with the term 'Pharmacare' and associated it with subsidized healthcare, specifically making access to prescription drugs more affordable. However, only a few were aware of any Government of Canada plans related to Pharmacare and could not recall any specific details or suggested that the plan targeted certain groups such as families, low-income households and seniors.

After being provided with some additional information on the Government of Canada's plan for Pharmacare, most participants agreed that a national Pharmacare program was an important priority relative to other healthcare priorities. Although, seniors in Quebec were less inclined to hold this view. In general, the key benefits of this program were seen as lowering drug prices and broadening coverage. However, some had questions about how the plan would be structured and administered.

Despite the ongoing global pandemic, the consensus from participants was that COVID-19 was not a significant factor in whether or not Canada needed a national Pharmacare program and that it should be a major priority at any time. When further questioned about the impact of COVID-19 on vulnerable populations, including low income seniors, some participants did see the value of Pharmacare in providing assistance to these groups. At the same time, other participants were of the opinion that many seniors already have sufficient healthcare coverage or that the 'unknowns' regarding COVID-19 suggest that access to Pharmacare would have little impact.

Participants were also asked to consider Pharmacare within the context of reduced hospitalizations, and that by ensuring people have better access to affordable medications, it could lower the likelihood of treatment in hospital thereby freeing up institutional capacity to deal with other issues like pandemics. Overall, most participants agreed with this view and tended to favour an approach to healthcare which focused on prevention over treatment.

What Pharmacare Could Look Like

Universal versus 'Safety Net' Approach

Almost unanimously, participants favoured a universal approach in terms of what a national Pharmacare program could look like over a 'safety net' plan, which would only apply to Canadians when prescription drug costs exceed a percentage of their income. They viewed a universal plan as Canadian-wide, all-encompassing, socially responsible, a fair and equal approach, and one that would not exclude anyone. There was a strongly held view that an income-based approach, like the 'safety net' plan, would be both challenging to administer and potentially unfair given the variability in the cost-of-living across Canada and individual circumstances.

Public versus "Close the Gaps" Approach

Participants were asked about the benefits of a public approach (where all Canadians are on the same plan), versus one which 'closes the gaps' (in which people could still use existing public /private plans, but would be set up to ensure everyone receives coverage, including those not currently covered). While some preferred a public approach for reasons of fairness, consistency, and equal treatment for all Canadians, concerns were expressed by many that it would mean all Canadians would be paying into it regardless of the extent to which they used or were able to access the program.

When asked which approach was fairer, participants' views were split. Some favoured a public approach, commenting that everyone should have the same access to prescription drugs, however, a few tended to favour the alternative. These participants suggested that the 'close the gaps' approach might be easier to administer, less costly and would take into account those already receiving benefits through their employer.

Drug Coverage

Asked to consider a number of options in terms of which drugs should be covered through Pharmacare, participants struggled to make a definitive choice without further information about the nature and costs of commonly prescribed drugs and the financial implication of each option presented. Views varied widely from those who believed all drugs should be covered, to those who felt the program should be restricted to covering only lifesaving medicines. One area of consensus, however, was that the list of drugs covered should be the same from province to province.

As part of this discussion, participants were also asked about specialized high-cost drugs used to treat rare diseases and most agreed that these types of drugs should be covered in order to improve patient quality of life and possibly offer a cure.

On the issue of who should pay for a national Pharmacare program, many participants favoured an approach whereby Canadians would cover part of the cost through either a Pharmacare premium or small payments (e.g., a dispensing fee for a prescription). Some participants also supported having employers pay for part of Pharmacare, particularly if the approach taken was universal, allowing employers to reduce or eliminate this aspect of their own benefits coverage for employees.

Most participants were comfortable with using the term “Pharmacare” for this program, describing it as clear and self-explanatory. Others, however, felt the term reflected an American approach to healthcare. Overall, most participants felt that Pharmacare was a good idea, and felt that the implementation of a universal Pharmacare system would generate positive health outcomes, thereby lowering overall costs for Canada’s healthcare system.

Indigenous Issues (Winnipeg and NCR Indigenous Peoples)

Government of Canada and Indigenous Issues

Indigenous participants believed that the key area of focus for the Government of Canada should be on addressing core human needs for Indigenous peoples, particularly ensuring clean, potable water on reserves, but also food and housing. Important issues such as cultural revitalisation, rediscovery of language, economic development and economic sovereignty were also raised.

Some participants expressed a desire to see the federal government taking a more active leadership role on Indigenous issues in general and, in particular, adopting an Indigenous world view. Many emphasized a stronger Government of Canada focus on the recommendations stemming from the Truth and Reconciliation Commission and more action in regards to the outcome of the National Inquiry into Missing and Murdered Indigenous Women and Girls.

Nova Scotia Fisheries

When prompted, participants were generally aware of the issues between Indigenous and non-Indigenous fishers in Nova Scotia. There was agreement across the group that Indigenous fishers were not being treated fairly. Most felt that this was an important issue for the Government of Canada to address in order to avoid any further escalation.

UNDRIP (The United Nations Declaration on the Rights of Indigenous Peoples)

All participants were familiar with UNDRIP and, at a minimum, had heard of the Declaration. However, understanding of the specifics was less detailed.

After being presented some additional information, participants were asked what changes they would expect to see if Canada fully implemented UNDRIP. Most anticipated that acceptance of the Declaration would mean seeing an Indigenous point of view expressed more clearly and more often in government discussions, policy proposals and decisions. In particular, participants felt this should also mean a greater focus on sustainability and, in this regard, the resource sector was referred to explicitly. There was also an expectation that Indigenous viewpoints would be heard within the educational system. Participants discussed curriculum change and their expectation that if UNDRIP were to be fully implemented more people would come to understand the place and contribution of Indigenous people in Canada.

Racism

Asked to define systemic racism, most believed that it involved covert, subconscious or unspoken behaviours that occur and are evident in virtually all aspects of daily life, throughout the various agencies and services with which Indigenous people interact. By many in the group, racism was seen as normal practice in Canada and a factor of how most Canadians have been raised and educated.

Participants overwhelmingly agreed that systemic racism exists in Canada. It was their view that it starts with the education system which they felt provided an inaccurate portrait of the history and rights of Indigenous people in one's formative years which subsequently carried through adulthood. The Indian Act was a focal point of discussion and some made the point that the way in which it is discussed, has left an inaccurate impression among non-Indigenous people that Indigenous people receive many 'free' services not available to other Canadians, leading to an adversarial dynamic.

Beyond the education system, participants felt systemic racism is perpetrated within other Canadian institutions and systems, including in healthcare, law enforcement and other civil/democratic systems. Suggestions from participants on changes to existing institutions to reduce systemic racism centered on ensuring a stronger commitment to enriching the perspective of front-line workers in law enforcement and to increasing diversity in these workplaces. In particular, it was suggested that increasing the number of Indigenous people in law enforcement and the legal-judicial system would provide a more balanced perspective and a better understanding.

Drinking Water

A few participants were aware of the Government of Canada's efforts to lift long-term drinking water advisories on reserves. After being shown an infographic from Indigenous Services Canada on the progress on lifting long-term drinking water advisories on public systems on reserves (see Appendix C), participant's reactions were mostly positive and described the progress as encouraging and as good news. However, there was a mention of ongoing barriers to progress, including a shortage of trained technicians on reserve, delays resulting from litigation between some First Nations communities and the federal government and disputes between commercial entities.

When asked how they would rate the progress of the Government of Canada on this issue and what more it could be doing, participants mentioned the linkage to land claims and the need to return lands (and thereby access to clean water) to Indigenous communities. They emphasized the need for both sides – the federal government as well as leadership on reserves – to prioritize this issue, to move more quickly and to ensure proper oversight of funds directed to infrastructure improvements.

Speech from the Throne (Smaller Centres Quebec, Lower Mainland, GMA CERB Recipients, GTA CERB Recipients)

Recall of the Speech from the Throne

Awareness of the Speech from the Throne (SFT), delivered on September 23, 2020, was modest across all groups. While there was little familiarity with the details, participants commented hearing about a

few COVID-19 related topics including the transition from CERB to EI and enhanced sick leave and caregiver benefits, and mentions of federal government partnerships with pharmaceutical companies to develop COVID-19 vaccines.

Government of Canada Pillars

All four pillars from the SFT shared with participants were seen as appropriate and, in fact, complementary and overlapping areas of focus for the Government of Canada. The last pillar - *'Support people and business through the crisis, as long as it lasts, whatever it takes'* - was rated as most important to participants personally, as it was seen as being the most timely, relevant and tangible of the four pillars. Comparatively, some felt the first two themes - *'Build back better, to create a stronger and more resilient Canada'* and *'Fight the pandemic and save lives'* sounded too much like marketing slogans or part of an advertising campaign. A few participants felt that the third pillar - *'Stand up for who we are as Canadians, making progress on gender equality, reconciliation, and fighting discrimination'* - was important, but thought this should be an ongoing goal and less of a specific focus at the current time.

Government of Canada Priorities (Smaller Centres Quebec, Lower Mainland B.C.)

After being shown the 12 specific priorities from the Government of Canada's SFT, participants were asked to identify up to three that they deemed to be the most important to them personally. Among all statements shown, a cluster of five emerged as important, including:

- Creating a national, universal pharmacare program;
- Ensuring faster COVID-19 testing;
- Working with the provinces to set new national standards for long-term care;
- Creating one million jobs; and
- Investing in training for workers.

On the health front, participants advocated for greater access to healthcare services, rapid COVID-19 testing and the need to address long-term care issues across Canada.

Participants also focused on Canada's economic health, including job retention, creation and training, particularly for those just getting into the workforce, and noted that some industries have been more adversely affected by the pandemic.

Most were hesitant to single any priority out as something Government of Canada should not do, commenting that they were all valid areas on which to focus either now or in the future. There were, however, some concerns about giving municipalities the ability to further restrict or ban handguns and strengthen measures to control the flow of illegal handguns in Canada.

Overall, participants concluded that the federal government appeared to be moving in the right direction and viewed the SFT quite favourably. There were few suggestions in response to a question as to whether the government had missed any significant opportunities or if there were other priorities on which it should focus, with the exception of the following:

- Giving more attention to Indigenous issues;
- Addressing homelessness and housing;
- Adding dental care to the roster of healthcare benefits that are universally covered;
- Focusing on the future, and specifically long-term projects that may not be particularly popular or politically expedient, but are necessary; and
- Communicating what the federal government is doing day to day and month to month.

Government of Canada Budget Deficit (GMA CERB Recipients, GTA CERB Recipients)

Asked if they had heard anything about the Government of Canada's projected budget deficit, most had not. Those few who had knew or speculated that it would be large expressed some concerns that it would have to be paid back at some point, but also felt that the expenditures were necessary at this time.

MORE INFORMATION

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Detailed Findings – Part I: COVID-19

Timeline of September Announcements

In order to help place the focus group discussions within the context of key events which occurred during the continuing COVID-19 pandemic period, below is a quick reminder of the timeline in Canada at the end of August and throughout the month of September.

- At the end of August:
 - There had been 128,948 cases of COVID-19 in Canada with 9,126 deaths as of August 31st.
 - Several regions across Canada were struggling with increases in COVID-19 infection rates. Ontario and Quebec had the highest number of cases, but there were also in concerns in B.C. and Alberta.
 - The Government of Canada had announced up to \$2 billion in support for provinces and territories through the Safe Return to Class Fund.
 - Canada’s border controls with the U.S. were still in place and in effect until October 21st.
- 1-6 September
 - Focus group held with parents of school-age children (in Junior Kindergarten to Grade 6) in Regina (Sept. 2nd).
 - Focus group held with parents of school-age children (in Grade 7-12) in Ontario mid-size centres (Sept. 3rd).

- 3 September. A new Deputy Minister of Health was appointed.
- 7-13 September
 - 7 September. Minister of Health announced an independent inquiry into the federal pandemic early warning system within Health Canada. This followed the July 30th announcement by the Auditor General of Canada of an inquiry into the Global Public Health Information Network (GPHIN).
 - Focus group held with seniors in Quebec mid-size centres (Sept. 8th).
 - Focus group held with the general population in Atlantic Canada (Sept. 9th).
 - Focus group held with seniors in Calgary and Edmonton (Sept. 10th).
- 14-20 September
 - Focus group held with expecting/pregnant women and new mothers in Ontario major centres (Sept. 14th) and in Winnipeg/St. Boniface, New Brunswick, Quebec and Ontario (15th).
 - 16 September. The Prime Minister announced details of the investments to be made under the Safe Restart Agreement, based on submissions made by the provinces and territories.
 - 17 September. The Sipekne'katik First Nation launched its own Mi'kmaq-regulated rights-based lobster fishery in St. Mary's Bay, N.S.
 - 18 September. Both the Leader of the Opposition and the Leader of the Bloc Quebecois tested positive for COVID-19.
 - 18 September. New Brunswick joined Ontario, Newfoundland and Labrador and Saskatchewan as jurisdictions where the COVID Alert app is available.
- 21-27 September
 - 21 September. The new President of Public Health Agency of Canada was announced.
 - 21 September. Assistant Deputy Minister of Health and Social Services for Quebec declared that Quebec was experiencing its second wave of COVID-19 infection.
 - Focus group held with Indigenous peoples (First Nations, Métis and Inuit) in the National Capital Region and Winnipeg CMA (Sept. 22nd).
 - 23 September. Prime Minister declared that Canada was experiencing its second wave of COVID-19 infection.
 - 23 September. Governor General of Canada delivered the Speech from the Throne to open the second session of the 43rd Parliament and outline the government's agenda.
 - Two focus groups were held with the general population in smaller centres in Quebec and the Lower Mainland (Sept. 24th).
 - Focus group held with the general population in the Lower Mainland (Sept. 24th).
 - 25 September. The Government of Ontario issued an order prohibiting restaurants, bars and other establishments from selling alcohol after 11pm and ordered the closing of strip clubs.
 - 25 September. The Government of Canada announced a transition, for eligible Canadians, from the CERB to a more simplified EI program and a suite of three new recovery benefits starting September 27th.
 - 25 September. The Government of Canada announced an agreement with Astra Zeneca for the procurement of up to 20 million doses of their COVID-19 vaccine. This is in

addition to those agreements already reached with Sanofi and GlaxoSmithKline, Johnson & Johnson, Novavax, Pfizer, and Moderna. With these completed, the federal government has now secured access for Canadians to six leading vaccine candidates. In a related announcement, it was also stated that Canada will contribute \$200 million to the COVID-19 Vaccine Global Access Facility (COVAX).

- 28-30 September
 - Focus group held with CERB recipients in the GMA (Sept. 28th).
 - 28 September. Ontario Premier declared that Ontario was experiencing its second wave of COVID-19 infection.
 - Focus group held with CERB recipients in the GTA (Sept. 29th).
 - 29 September. September tied April for the most COVID-19 cases in a single month in Canada.
 - 30 September. There had been 158,765 cases of COVID-19 in Canada with 9,297 deaths as of September 30th.

Government of Canada in the News (All Locations)

Throughout the month of September, issues related to COVID-19 and particularly the CERB, were mentioned by many participants when asked what they had seen, read or heard about the Government of Canada.

Regarding the CERB, some participants were aware of the impending transition from CERB to EI and spoke in general terms about new benefits programs that would be coming into effect. A few commented on their impressions that the new programs were intended to be more accessible and to provide benefits for those previously not covered (e.g., people with reduced work hours, those required to take sick leave). Most, however, had heard only vague details about the end of CERB, which they thought was happening sometime on or around the first week of October, but were unclear on any further details. A few commented on the financial implications of the CERB noting the various viewpoints, both positive and negative, and its impact on the federal budget. For a few participants the CERB was of particular interest from a personal perspective, especially those who were unemployed and/or feeling financial pressures as a result of the pandemic.

Participants were also focused on news about COVID-19. Many had heard about actions the Government of Canada had taken such as:

- Extending the Canada-U.S. border closure;
- Funding to schools to implement enhanced safety measures, including personal protective equipment (PPE);
- Agreements between the federal government and various pharmaceutical companies to secure a supply of COVID-19 vaccines;

- Advertising related to the transmission of COVID-19; and
- Promotion of the COVID Alert App.

Unrelated to COVID-19, other salient issues which participants referenced, without much elaboration, included the Mi'kmaq lobster fishing dispute and the Speech from the Throne.

Participants were then asked to respond to a more specific question concerning what they had heard about Government of Canada actions regarding the current COVID-19 pandemic. Few were able to recall any specifics. Those who did had heard about efforts to secure a vaccine as well as to increase testing, sickness and caregiver benefits being offered to those affected by COVID-19, extensions to border closures and new health insurance programs across the provinces intended to cover a range of medications.

COVID-19 Testing in the Community (GMA CERB Recipients, GTA CERB Recipients)

Participants in groups held among residents of the Greater Montreal Area (GMA) and the Greater Toronto Area (GTA) were further prompted on what they had heard about COVID-19 testing capacity and procedures in their communities. While few had themselves been tested, many had heard about lengthy delays, line-ups and wait times both in terms of getting tested and receiving the results. Some also commented on an increased demand for testing and the recruitment of hospital staff to man COVID-19 test facilities. A few participants also mentioned that testing centres were being expanded to pharmacies and that the Government of Canada was investing in rapid tests.

When asked what could be done about testing capacity, participants put forward the following ideas:

- Open more drive-thru and mobile testing centres;
- Hire more nurses to staff testing centres;
- Increase outreach and testing for high-risk groups, including seniors, as well as others who are housebound, possibly through existing store-front diagnostic facilities;
- Work with companies to develop easier and more rapid testing technologies to replace the current swabbing technique; and
- Develop 'made-in-Canada' solutions.

COVID-19 in the News (Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents)

In two groups undertaken among parents, participants were specifically asked what they had been hearing in the news about COVID-19. Most were focused on reports related to the intersection of COVID-19 and the start of the school year, noting various new protocols and their worries about a second wave. Parents also wondered how the uptake in mask-wearing and fluctuations in active COVID-19 case numbers would affect influenza cases this year, with some assuming that flu season may be milder relative to other years.

COVID Alert App (Mid-size Centres Ontario Parents)

Virtually all parents from mid-size centres in Ontario were aware of the Government of Canada's COVID Alert App and most reported they had downloaded it. Their understanding was that, using Bluetooth, the app would alert the user if they had been in close proximity for a period of 15 or more minutes to a person who had tested positive for COVID-19.

Those who had not downloaded the app cited two main reasons: they felt the app was unnecessary due to low case numbers in their area and/or they were worried that the app might track and store personal data particularly with respect to their whereabouts.

Current COVID-19 Situation (Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors)

In a few groups which were held in the early weeks of September participants were asked about the current state of COVID-19 in Canada and how they were feeling about it. Responses reflected a large degree of uncertainty, coupled with some degree of fear and stress, mostly related to the fluidity of the situation as participants observed case counts increasing in some regions while declining or stabilizing in others. Some were of the view that Canadians had become overly-complacent with respect to wearing masks and maintaining social distancing. A few participants commented that, while they felt fortunate not to have been affected personally by COVID-19, they remained anxious and stressed about safely venturing out in public. Some participants felt that inconsistent messaging across regions and jurisdictions in regards to specific protocols, such as mask wearing, was contributing to public confusion as was a lack of continued public education and emphasis on the benefits of this practice. Others expressed concerns about what they saw as less active communication or involvement by the Government of Canada, which left them with a sense that overall coordination and oversight was somewhat lacking.

Although participants acknowledged that Canada had done better in addressing COVID-19 relative to other countries, many participants were of the opinion that, outside of Atlantic Canada, the spread of COVID-19 was not yet under control, due to rising cases in many parts of the country. The expectation was that the return to school would lead to further transmission. Some participants in the group held in Atlantic Canada also expressed worries that the situation in their region could quickly change, given how the virus is spread from person to person, and stressed the need for continued personal and public vigilance. Most, however, were particularly concerned about the trajectory of the virus in large and densely populated urban centres, such as Toronto and Vancouver. A few participants anticipated that the situation would likely continue until a vaccine was available and noted the importance of managing public expectations and the pressure on Canada's healthcare system. Others commented on the need for the federal government to remain focused on supporting Canadians who have been adversely affected by the pandemic, whether financially, psychologically or otherwise.

On balance, participants felt uncertain about how the current situation with respect to COVID-19 would unfold, and this view was underpinned by what they saw as the changeable nature of the virus and the many unknowns.

Behaviour Change (Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents, Mid-size Centres Quebec Seniors, Major Centres Ontario Parents, Major Francophone Centres Parents, Winnipeg and NCR Indigenous Peoples, Smaller Centres Quebec, Lower Mainland, GMA CERB Recipients, GTA CERB Recipients)

Throughout the month of September, participants were asked to describe if and how their behaviours had changed recently. Specific subgroups of participants, including seniors and parents, were asked additional questions to better understand their experiences through COVID-19 and changes to their routine and behaviours.

Many participants reported some changes in behaviours and their daily routines in response to rising case counts in their province or community. As a result, they were taking more precautions, including wearing masks and hand washing more often, changing and/or washing clothes after being out, reducing the frequency of errands, especially outings with children, and generally remaining at home. This was particularly the case for people who considered themselves to be more 'at risk' or who were concerned about other family members with underlying health conditions. Older participants reported they had stopped seeing or had reduced the frequency of visits with their grandchildren. With the return of school, they said they no longer felt safe since their extended family's social bubble had expanded significantly. Others also reported watching their household budget and expenditures more closely, cutting out any extras in anticipation of further lockdowns and the possibility of a reduced income.

By contrast, other participants, mainly in areas with lower case counts, reported the opposite behaviours. They indicated that they were expanding their social circles and felt more comfortable going out as stores and restaurants in their communities were reopening. Additionally, some parents whose children were about to start the school year noted they had begun to venture out more with their children – shopping and visiting with friends – in order to establish a more normal routine and to help their children acclimatize to the new school year.

Those few participants who reported no change to their behaviour commented that this was because very little else in their lives had altered. Some participants claimed to have been working throughout the pandemic and therefore had maintained a fairly steady routine. The only difference for many of these participants was a lack of travel to and from their workplace. Furthermore, those parents who

were homeschooling their children reported minimal changes to their routine as there were no back-to-school related issues or adjustments required.

Experience of Parents

When asked to describe the experience of parenting during the pandemic, parents' responses reflected a mix of experiences. Some found it exhausting and stressful, especially those who were working from home. Those who had returned to their place of work discussed the challenges of finding daycare. All parents found it challenging to entertain their children, commenting on the need to find creative ways to keep their children busy and out of trouble, while also managing their screen time and balancing the demands and pressures of work. Finding someone to watch the children was also a difficult task. A number of parents underscored the challenges associated with their dual role, as both parent and teacher, supervising and assisting their children with online learning.

In a short exercise intended to solicit feedback on how parenting during the pandemic could best be described, participants offered a combination of positive, negative and neutral words:

POSITIVE DESCRIPTIONS	NEUTRAL/MIXED DESCRIPTIONS	NEGATIVE DESCRIPTIONS
<ul style="list-style-type: none"> • Liberating • Fun • Connection • Present • Rewarding • Proud 	<ul style="list-style-type: none"> • Creative • Adaptive • Patient • Organized • Scheduled • Selfless 	<ul style="list-style-type: none"> • Strict • Exhausting • Stressful • Busy • Demanding • Lonely • Challenging • Complicated • Multi-tasking • Isolating • Constant

Although parents vocalized the stresses and pressures of parenting through COVID-19, many spoke in positive terms about the ways in which their relationship with their child had evolved. Some said they had developed a closer bond and deeper connection with their children. The situation of forced isolation appears to have strengthened the parent-child relationship in many ways, resulting in children being more appreciative of parents' efforts and parents becoming more patient.

However, some parents did note that prolonged isolation had contributed to their children becoming more reserved, anxious and extremely attached to them. These parents expressed concerns about the transition to school and long-term psychological impacts. A few parents commented that their children's sleeping patterns had changed through COVID-19, meaning they were staying up much later than usual, further contributing to parents' level of exhaustion. For working parents in particular

differing sleep schedules meant they found themselves tired and less energetic at the start of a workday. Parents also worried about their children's health, particularly if they had returned to work and were now exposing themselves to a wider group of colleagues, some of whom they said were less diligent about taking precautions, such as wearing a mask.

Participants who were expecting at the time of the focus group said the main differences being pregnant during a pandemic were:

- How little their partner could be involved in the experience (e.g., unable to join them for appointments with physicians and for ultrasounds, or in the delivery room);
- The necessity to take additional precautions, including limiting interactions with others both in and outside of their home, and greater diligence with sanitizing behaviours (e.g., showers, handwashing, washing groceries, etc.); and
- Not participating in the usual celebratory events (e.g., baby showers). The degree of confinement was evidently emotionally difficult for some participants.

While these participants described the experience as joyful, exciting and a generally happy time, they also commented that the pandemic had injected a certain degree of worry, fear, pain and sadness. They spoke about this time in very emotional terms and described it as eye-opening, a challenging and chaotic time, one which required adaptability and patience.

For those planning to have a baby in the near future, most reported the pandemic had done little to change their plans. While some expressed concerns about the increased risk of exposure to COVID-19 when in hospital at the time of delivery, they also said that planning for a baby had been a welcome source of joy during what was otherwise a bleak time.

Experience of Seniors

Seniors were mixed in their response to being labeled as a 'vulnerable' group given they were over the age of 55. For the most part they did not wish to be singled out and generally felt that assistance and attention should be focused on anyone with a pre-existing condition, including but not limited to elderly persons. Some did not feel particularly exposed any more or less than other groups, especially as they said they were closely following recommended health and safety guidelines. Some were also taking other precautions and did note that a key change in their behaviours in recent weeks was that they were refraining from going out in public and/or from visiting family, although they found the continuing lack of physical contact with family difficult to endure.

When asked how they would describe their experience living through the pandemic to someone in their twenties, some indicated they would tell young people to be more careful and emphasize that youth were just as much at risk as anyone else. They described the experience as much like a story out of a science fiction novel, a way of emphasizing the unreality and somewhat apocalyptic nature of the current situation.

Impact on Household Budgets and Expenses

Nearly all participants agreed that their spending habits had changed since the onset of the pandemic, but there was a wide variance both in terms of the extent and direction of the change. Some who indicated their spending had gone down attributed this mostly to paying closer attention to their personal finances and purposeful decisions they had taken to reduce non-essential expenditures. Some remarked that while they were receiving the CERB or on reduced pay they felt compelled to dramatically cut back on any unnecessary items and to ensure that they had sufficient funds to cover fixed household expenses. A few participants noted that the decline in spending reflected more of a lifestyle change – they were going out less to restaurants mainly because they didn't feel comfortable taking the risk to their health and/or not using their vehicle to commute regularly to and from work which had resulted in lower fuel charges. Others observed that their monthly expenses had increased due primarily to higher costs for food and other basic household items where a shortage of supply had resulted in surge pricing. Higher expenses also reflected the fact that many were upgrading their home Internet to allow for multiple people who were now working or learning online from home. For the same reason, several participants remarked that their electricity costs had also risen. Some noted that grocery stores were no longer honouring coupons due to COVID-19 and, as a result, they were paying full price for all items purchased.

Views on a Second Wave

Most participants concurred that there were clear signs of a second wave. Depending on the region in which they were located, most participants felt that they were either witnessing the early stages of a second wave or that it was already full-blown. The remainder were of the view that a second wave was imminent and that case counts would increase even more significantly after the Thanksgiving holiday. A few participants commented on interactions they have had with others who denied the existence of COVID-19 or said that the rising number of cases was linked to an increase in testing rather than in positivity rates, but this perspective was very much in the minority.

Participants attributed the second wave to a variety of factors, primarily behavioural:

- Lax adherence to social distancing and mask wearing;
- General fatigue over the duration of the pandemic; and
- Ongoing isolation, feelings of being homebound, and pent up desire for opportunities to socialize with family and friends.

Others commented that the return to school as well as the opening of daycares, restaurants and bars were also triggering factors for a second wave of COVID-19. And, a number of participants commented that cases had not yet peaked. They expressed concerns that the situation would likely worsen through the winter months and wondered about the additional impact of the onset of flu season. Others' belief that a second wave would be worse, compared to what had been experienced in the spring, was based on media reports that cases had now been identified in remote communities. Some also commented on reported evidence of increased community transmission, which they understood had been more limited in the spring. While some participants worried about an increase

in cases as children returned to school, potentially becoming vectors for further spread of COVID-19 within their family and community, and with impending holidays and related family gatherings, others felt that winter conditions might force more people indoors thereby reducing social interactions and limiting the spread.

Participants had mixed views regarding how prepared Canada was to handle a second wave of COVID-19. Some felt that having come through the initial phase of the pandemic, governments and agencies now knew what to expect and were prepared with additional stockpiles of Personal Protective Equipment (PPE). In the same vein, they also felt that the public was more educated about appropriate preventive measures and precautions and would, as a result, be better prepared with masks, hand sanitizer, etc. and more able to adapt quickly. Other participants felt quite differently, expressing concerns that Canadians would have more difficulty adjusting to a second wave. They felt that the public may be less fearful of the effects, some may even feel they have developed immunity, and that generally people may take it less seriously. Regardless, several participants remarked that a second wave would cause additional stress and mental health issues, especially if further isolation is required, which may exacerbate the usual seasonal effects associated with the winter months.

The expectation was that more restrictions would likely be reinstated, although participants' views varied on the extent and effectiveness of widespread lockdowns. Most agreed that international travel should be restricted and borders should be closed, with some going so far as to say that travel between provinces should be restricted. Others expected that restaurants and bars would again be closed and that it would be beneficial to have measures in place which would require people to be sent home from work or school if they showed any COVID-19 symptom, not simply a fever and shortness of breath. Some participants expressed a desire for provincial governments to take stronger measures: implementing fines for those people and businesses not following guidelines around mask-wearing and social distancing, more consistent application of rules within and across provinces, and a mandatory two-week quarantine. Others, by contrast, felt there were opportunities to apply these types of measures in a more 'surgical' fashion, meaning that a more targeted approach should be taken in response to specific events viewed as causing transmission or in certain 'hot spots.' These participants, while acknowledging the difficult decisions provincial governments must make and the many unknowns, worried that the cycle of opening/closing businesses would have dire financial consequences for individuals and for Canada's economy.

Impact of COVID-19

Looking ahead, most participants were worried about how COVID-19 would impact themselves, their families, and businesses in their communities. Many were concerned about the impacts on business, small businesses in particular, their own job security, unemployment rates and the economy in general. It was expressed that experiencing a job loss at this time would have a significant impact on their personal financial situation and they worried about the prospects of quickly finding other employment. Participants also spoke about the impact of COVID-19 on their quality of life, personal routines and the health of their family and friends. Some were particularly concerned about their parents in terms of their health, but also with respect to simply staying connected.

Unprompted, some spoke about the toll the pandemic would take from the standpoint of people's mental health. And, when asked more explicitly about their degree of concern with regard to any mental health impacts in their social circles and communities, participants commented on the magnifying effects of COVID-19 especially going into a second wave. Concerns were raised about ongoing fears for family members who are essential workers or employed in jobs which increase their risk of exposure to the virus. Others talked about the emotional toll of being unable to pursue their usual routine and the absence of social and spiritual engagement on their lives. A few participants expressed concerns about the impact of heightened stress levels within the family, particularly on younger family members who may not fully understand and appreciate the severity of the situation. Still others shared stories about the devastating impacts of isolation and job loss which they said has contributed to increased substance use, depression and, in some cases, suicidal behaviours.

Financial Supports (Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents, GMA CERB Recipients, GTA CERB Recipients)

In several groups a more in-depth discussion was undertaken to gauge awareness and views on specific aspects of the various recovery benefits and financial supports being provided by the Government of Canada, following announcements in late August 2020.

Participants were shown the following information as a basis for further discussion¹:

(Major Centres Saskatchewan Parents, Mid-Size Centres Ontario Parents) The Government of Canada recently announced that it will be transitioning to a simplified Employment Insurance (EI) program. Originally the CERB was ending at the end of August, but it has been extended another four weeks. As of September 27, 2020:

New EI claimants will receive a minimum benefit rate of \$400 per week. Anyone eligible for EI will need to have worked 120 hours to qualify, well below current EI requirements - since many Canadians have been unable to work due to the pandemic and accumulate the required number of hours.

(GMA and GTA CERB Recipients) The Government of Canada recently announced that it will be transitioning to a simplified Employment Insurance (EI) program. Originally the CERB was ending at the end of August, but it was extended another four weeks and ended this past weekend.

As a follow-up to the Government of Canada's Speech from the Throne, last Thursday the Government of Canada announced that it would boost the proposed weekly payout for

¹ Some modifications were made to the information provided to participants in groups held at the beginning of the month (Major Centres Saskatchewan, Mid-Size Centres Ontario Parents) versus those held at the end of the month (GMA and GTA CERB Recipients).

unemployed Canadians transitioning to the CERB to EI to \$500 a week, up from the originally announced \$400. Anyone eligible for EI will need to have worked 120 hours to qualify, well below current EI requirements - since many Canadians have been unable to work due to the pandemic and accumulate the required number of hours.

(All Groups) The Government of Canada also announced a suite of three new recovery benefits:

*The new **Canada Recovery Benefit** would provide a benefit amount of \$500 per week for workers who are not eligible for EI - mainly the self-employed and including those working in the gig economy (e.g. freelancers, consultants, independent contractors, temporary contract workers, etc.).*

*The new **Canada Recovery Caregiver Benefit**, would provide \$500 per week to anyone who is unable to work because they need to provide care to children or support to other dependents who had to stay home (e.g. they had to stop work because their child's school or daycare closed because of COVID-19).*

*The new **Canada Recovery Sickness Benefit** would provide \$500 per week for up to two weeks for those who don't have paid sick leave and become sick or must self-isolate due to reasons linked to COVID-19.*

Participants currently in receipt of the CERB (in the groups held in the GMA and the GTA at the end of the month) were mostly aware of some changes to CERB and EI. They were keen to learn more details and some had attempted, without success, to find out more about EI specifically through the Government of Canada website.

Overall, participants across all groups reacted positively when asked about this approach, saying that it would be beneficial for a wider group of people who may not have been previously eligible for the CERB. In particular, most responded positively to having more options – the suite of three benefits – and particularly coverage for self-employed persons, caregivers and for those required to take sick leave, most felt the benefit amounts were reasonable and appreciated that they were clearly defined. Even those who questioned whether the benefits were adequate acknowledged they were better than nothing and would help keep individuals and families afloat temporarily. Some also commented that the amount remained roughly the same as it had been under CERB and, as such, would mean that anyone previously on CERB would not see a sharp decline in the benefit amount. This was, however, a greater concern for participants currently in receipt of the CERB who felt some may struggle to keep up with their monthly bills. In particular, they mentioned disabled persons and those without coverage for prescription drugs who may find the benefit amount insufficient. Some of these participants also felt that the CERB should have remained in place for an additional month.

Although some expressed concern about the level of government spending, it was also the view of participants that as the economy opens up, there would be reduced fiscal pressure on the Government of Canada and fewer people in need of these supports.

There were a number of specific questions and concerns raised based on the information provided about the suite of recovery benefits. These centered on the following:

- Qualifying hours – It was pointed out by some as being too low, potentially acting as a disincentive to work, and by others as being too high, especially those who have been off work for before and since the onset of COVID-19. Participants were unsure what the qualifying period was for obtaining 'eligible' hours of work (e.g., hours worked before March 2020 and/or only those since that date). The feeling was that some people would have difficulty reaching 120 hours if they had been unable to work since the beginning of the pandemic;
- Waiting period – Some participants queried whether there a waiting period applied, as it did with Employment Insurance, and wondered about when people should apply;
- Eligibility Criteria – Participants wondered whether the caregiving benefit would apply to someone operating a daycare out of their home and questioned how long the length of the benefit period; and
- Tax Implications – Some questioned what percentage of benefits received may have to be paid back.

Participants in groups held in Saskatchewan and Ontario only were then asked which of the following three considerations were, in their view, the most important when considering the transition from the CERB to EI.

Ensuring that there is no delay between payments from when CERB ends to when the new system starts

Ensuring that everyone who gets CERB also qualifies for EI or the new benefits

Trying to reduce the amount paid and the number of people who qualify in order to reduce the deficit

Most participants were focused on ensuring there was no delay in the transitioning – from the last CERB payment to the first payment under the new system. The general consensus was that people who had been relying on the CERB needed some reliability and continuity in terms of financial supports, particularly those who may have limited savings, with responsibility for children and who have time sensitive bills to pay (e.g., rent, utilities). The issue that many families may not have much of a safety net was cited as an overwhelming reality.

A few participants, very much in the minority, did feel strongly about the other considerations – ensuring that those who qualify for CERB also qualify for EI or the new benefits, and that the federal government should be trying to reduce the amounts paid out and the overall deficit. Those who felt the former consideration was paramount were mainly concerned about abuses of the system (i.e., people receiving the benefit who do not actually qualify and/or working for cash while also receiving the benefit). Those focused primarily on the latter issue – the deficit – simply felt that the focus of government efforts should be getting people back to work and felt that an economic rebound was both likely and imminent.

All participants were asked about their views on how long benefits should stay in place for those who cannot work due to COVID-19. Responses varied widely, reflecting a high degree of uncertainty about the future and the fluidity of the current situation. A few participants put forward an unlimited

timeframe – for as long as necessary – while others linked the duration of benefits to the point at which a vaccine is available or social distancing and stay-at-home restrictions are lifted. There were also some who suggested that these programs should be regularly reviewed in order to incentivize people to return to work as sectors open up.

When participants were told that the simplified EI system and the new recovery benefits would be in place for one year and, aside from the Canada Recovery Sickness Benefit, would provide a minimum entitlement of 26 weeks of regular benefits, participants were generally comfortable with this timeframe. They felt it would provide a certain sense of stability. However, many participants also expressed considerable uncertainty and there was a feeling that the timeline should be re-evaluated based on evolving events and circumstances (e.g., availability of a vaccine, changes to government mandates regarding isolation, school and daycare closures, etc.). It was also felt that consideration should be given to having modified approaches by industry or sector, given that some parts of the economy have been much harder hit than others. On balance, participants concluded that the fluidity of the situation made it difficult to determine an appropriate timeframe for benefits to stay in place. They felt they simply could not predict with any accuracy how quickly the economy might rebound and what the situation would look like in the spring of 2021. However, the consensus view was that once the provincial government relaxes restrictions and the economy begins to open up, the federal government should consider eliminating these programs. There was concern that a set timeframe, not directly linked to specific economic indicators, might lead to abuse of the programs in the short-term.

Those participants in the GMA and GTA, receiving CERB payments, were asked if they had any concerns about the transition from the CERB to EI. Most did not, although many indicated that they were simply unclear on the process and certain specifics (e.g., the amount they would receive). Others commented that it appeared to be a fairly seamless transition, although a few expressed some worries about an inability to obtain clarity around their questions, delays in receiving forms and any tax implications for those receiving benefits. Some participants remarked that they were receiving additional information and further clarification on the subject via group chats with their peers in the workplace.

When queried as to whether this approach had omitted anyone, participants in the GTA and GMA identified seniors as one group who may need some additional financial assistance. The view was that this group had likely experienced an increased cost of living, mainly resulting from delivery charges as they are less able to get out and run their own errands. The expectation was that this situation would become even more challenging in the winter months.

Participants in these two groups were generally aware of the taxable nature of these benefits, although a few were unsure and/or had not heard much about this aspect. There was a slight worry among several participants about the accrual of tax liability by individuals and a preference was expressed that tax be withheld at source. Even those who exhibited less concern about the tax consequences nevertheless underscored the challenge of setting monies aside and the uncertainty in terms of how much they might owe in taxes in the spring.

Economy (Major Centres Atlantic Canada, Major Centres Alberta Seniors, Major Centres Ontario Parents, Major Francophone Centres Parents)

Participants were asked whether they had heard anything about what the Government of Canada was doing to help with economic recovery. In two of the four groups, with seniors in Alberta and parents in Ontario, participants had heard very little. However, those in Atlantic Canada and in the group held among Francophones were aware of assistance the Government of Canada was providing through the CERB, in addition to financial aid for students and other groups, and wage subsidies directed to businesses with the aim of encouraging more economic activity.

Participants were shown four different phrases describing what the goals of Canada's economic recovery could be and asked to discuss the one that best summarized their preferred approach:

We need a green new deal

We need a green recovery

We need a more resilient country

We need to build back better

The last selection – we need to build back better – emerged as the preferred choice across the four groups. Participants interpreted it as a broad, all-encompassing and unifying statement that also encapsulated the ideas of strengthening and restoring the economy, with a particular focus on making it better (i.e., reinforcing more reliable, Canadian-based and local supply chains). There was a view that the COVID-19 pandemic had very clearly surfaced both what is important for the Canadian economy and possibly undervalued by Canadians (e.g., healthcare, basic food items and staples), highlighting opportunities to rebuild and strengthen these areas. Some also felt that the pandemic had revealed what was not working as well and what needed to change with respect to the economy and in the lives of Canadians. The idea of moving into a position of strength and a reinvigorated, improved economy, post-pandemic, resounded with many participants. Others also commented that they would like to combine the idea of building back better with the notions of a resilient and green economy, while the statement as is particularly resonated with some specifically because it did incorporate these ideas – they felt that expanding it would limit its appeal to a more narrow target audience. At the same time, a few participants did point out that phrase was already in use in the election campaign within the U.S. and within the United Kingdom.

There was a modest level of support for the third phrase on the list – we need a more resilient country. Many participants responded positively to the idea of an economy that demonstrates more resiliency, interpreting this as meaning one which is more self-sufficient and able to respond quickly to unanticipated and disruptive shocks and changes, including another pandemic. Many participants evaluated this phrase against the previous one, noting that resiliency reflected forward momentum,

while building back better implied going back to a previous state, albeit one that is improved. They liked the implication of change embedded within the term resilient.

A few participants responded positively to the idea of a green recovery, believing that the time was right to invest in green, environmentally friendly technologies. For some this aligned with their fundamental values with respect to environmental protection and sustainability. However, more participants tended to be critical of a green new deal. While many appreciated and supported a focus on the environment, and specifically climate change, the main criticisms of a green new deal were:

- It suggested a complete restart and possibly shutting down of certain industries (e.g., oil and gas);
- It could be seen as targeting the Alberta economy in particular at a time when it is facing significant challenges;
- That the term is more familiar to Americans and more understood in the context of initiatives put forward by the progressive wing of the Democratic Party. By the same token some felt that it was mixing up two very different ideas (e.g., green being the environment, and a new deal which harkened back to depression era actions to rejuvenate the U.S. economy); and
- That the idea itself was viewed as quite broad and fairly ill-defined. Some misinterpreted references to green as meaning the Green Party.

Schools (Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents)

Awareness of Back to School Plans

Participants were well aware of the back to school plans in each of their jurisdictions and the relevant provincial initiatives. For example, participants in Saskatchewan were familiar with the Saskatchewan Safe School Plan and aware that it had been revised both to address the evolving situation and to provide the public with more detail. Those in Ontario knew that the Ontario plan was available online and that parents could sign up by e-mail to receive further updates and stay abreast of new developments.

Parents in both groups described delayed starts to the school year, staggered school openings and the introduction of a range of distancing and sanitary procedures. Spacing on buses, cancellation of group activities such as shared use of locker areas, gyms and libraries and the introduction of smaller internal bubbles were mentioned as distancing initiatives that had been put in place. Mask protocols and the introduction of sanitizing stations were cited as sanitary procedures.

Parents in the Ontario group did mention their concerns about the variation in plans from one board to another and expressed some frustration that they had received information in what they felt was a piecemeal fashion. They also expressed some worries about the plans for high school students in particular, specifically in terms of implementing a schedule of alternating days between at-school and remote learning.

Parents' Plans, Issues and Concerns

Participants were provided with some background information on the back to school plans in question and were asked if they intended to send their children to school in person.

(Major Centres Saskatchewan Parents) The Saskatchewan Government has provided its Safe School Plan for students and staff to return to in-person class instruction. The plan includes components such as self-screening measures, assigned seating on school buses, protocols to ensure students can safely access and move throughout school facilities, increased sanitation measures, measures to reduce the risk of transmission in the classroom, supports for intensive needs and immune-compromised students, measures to reduce physical contact, and a set of 4 scenarios that may be activated based on the advice of the Chief Medical Health Officer.

(Mid-size Centres Ontario Parents) The Ontario Government has said that elementary schools will be equipped to reopen with increased health and safety standards, and that students will attend school 5 days a week. Most high schools will be a combination of in-school and remote learning days, with students attending class in-person at least 50% of instructional days. In-person school attendance is optional for the 2020-2021 school year so that parents can make decisions that work for their children and family. School boards will offer remote learning for all students who choose this option.

Most said that they were willing to send their children back into the school, although their reasons for doing so varied. For some parents, depending on the school board, there was no online alternative which left them with no choice in the matter. Others focused more so on their children's needs and their optimal learning environment (i.e., parents felt the child did not do as well with virtual learning, it was important to go back to school from the point of view of the child's mental health and the social benefits, and that since some had joined team sports they felt they were already in a similar environment from a health perspective such that there was little additional risk in returning to school). Some parents spoke about the importance for themselves as working parents, and for the entire family, to get their children back into school, as it would allow them to work more freely at home or to be able to return to their own workplace. Several said that their family could not stay locked down indefinitely and that getting back to routine activities, while also observing precautions, would be healthy for everyone. One concern that was raised, and which parents suggested may cause them to revert to home-schooling, centered on the constraints of the in-school experience, especially for components such as kindergarten or French immersion. The view was that, given the added restrictions for the in-school environment, it may not be worth the additional risk.

This is not to say that parents were completely comfortable with in-person schooling. Many of them were worried, mentioning that sending their children back to school required a level of trust that all parents/families were taking adequate precautions and proactively self-screening, concerns about 'kids being kids' and therefore not strictly adhering to health and safety rules, and a perceived inability of schools to adequately implement distancing practices, no matter how good their intentions were. Parents also expressed concern that, in balancing the increased numbers of children learning online

with those attending class in school, decisions had been made in some schools to merge classes, thereby increasing class sizes and subsequent risk exposure for their children.

Some parents described the decision to send their children back to school during COVID-19 as one of the most difficult they have had to make on behalf of their child/children. They felt that, either way, they would carry some feelings of guilt, for example if their child contracted the virus as a result, or alternatively if he/she missed vital social interaction by staying at home. While they did not want to purposely place their children in harm's way, they were equally concerned about the impact of further isolation. Some parents had also observed changes in their child's behaviour, specifically elevated levels of anxiety when witnessing others who are not following safety guidelines. They felt a return to school might exacerbate this anxiety. Moreover, they worried about the increased risk of their child catching COVID-19 and of its possible long-term effects. An additional worry was the increased likelihood of asymptomatic children spreading infection in their communities, especially the possible impacts on other family members, such as grandparents. This latter issue, the health of grandparents, was raised by many participants as a significant concern with respect to sending children back to school.

Safer Schools

Participants were asked what they thought was needed to make things safer at school. First and foremost, the related issues of class size, hiring more teachers and spreading students out were raised. There was a consensus that reducing class sizes, even for those learning online, would be the most helpful thing to do, both to enhance the learning experience and to improve safety. Parents discussed a range of more detailed ideas, such as 'stagger days', moving students from one school to another to make use of spare physical capacity, cordoning off areas of the gym for classrooms, and taking advantage of outdoor education opportunities. They were quite realistic about the dual challenge of adding extra teachers and having to find the extra space if class sizes were reduced.

Other ideas included hiring additional cleaning staff, making all-day mask wearing mandatory and replacing self-screening with touchless thermometers at the school.

Most parents, when asked, had heard something about Government of Canada announcement to help make schools safer, although few were aware of the specifics of the funding envelope. They generally understood that it involved funding for each province, but they also felt that once the overall amount of \$2 billion was broken out and distributed across the provinces it would not be sufficient to make any significant impact. No one reported knowing any more detail than this, although they mostly agreed that providing some funding was certainly better than doing nothing, and that it was particularly crucial to help school boards cover cleaning costs and supplies such as masks.

When asked what else the Government of Canada could do in this area, there were only a few comments. Participants wanted the Government of Canada to ensure rapid testing, provide incentives for home schooling and possibly formally mandate class sizes. Comments were also raised that it was important to continue to reach out to parents and engage them on what else the Government of Canada could do, especially as the school year got underway.

Detailed Findings – Part II: Other Issues

Seasonal Flu Concept Testing (Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors, Major Centres Ontario Parents, Major Francophone Centres Parents)

In five groups which took place from September 9th-15th, participants were shown a series of banner images which were under development by the Government of Canada for a possible advertising campaign regarding the seasonal vaccine. In each group participants were shown two concepts for a banner ad:

- Concept 1 – ‘This Year’
- Concept 2 – ‘Make a Plan’

The order in which the two concepts were shown was rotated across groups to reduce any overall ordering bias. It should also be noted that each concept included slight variations (e.g., to the text and

images) depending on the target audience – families, parents and/or those who are expecting, youth, and seniors. For example, in groups comprised of seniors, participants were shown the ‘seniors’ version’ of each concept (i.e., the images shown were of seniors), and similarly for parents. In the group held in Atlantic Canada, which comprised a cross-section of the general population by age and gender, participants focused primarily on the ‘youth version,’ but were also briefly shown and discussed the ‘parents version’ of each concept. Each of the concepts are included below and can also be found in the Appendix.

Overall

There was no clear consensus across the five focus groups as to which one of the two concepts was preferred by participants or which was most effective, in terms of the extent to which the concepts resonated and their motivational impact. Participants in Atlantic Canada, who reviewed the ‘youth and parents’ versions’ of the concepts, converged more clearly around Concept 2 – ‘Make a Plan’ as being the most effective at encouraging Canadians, including themselves, to get a flu shot. They found both the tone more friendly and motivating, and the imagery more vibrant and appealing, relative to Concept 1 – ‘This Year.’ Results were more mixed in the remaining groups, although the participants leaned slightly towards Concept 1 mostly in response to the phrase included in the second frame – *Protecting others is more important than ever* – which resonated quite strongly with all participants.

Overall, the message in both concepts was viewed as clear and concise – to get the flu shot – although participants’ comments suggested that the extent to which either concept was effective in motivating participants to do so varied within and across the groups. In general, however, Concept 1 was viewed as more assertive and coercive, leaving participants feeling somewhat guilty if they had not already been vaccinated for the flu. By contrast, many participants found Concept 2 more forward-looking and inviting in its tone and approach, acting as a reminder that now is the time to start thinking ahead and to book a date/time to get vaccinated.

The target audience was clear for most participants:

- Seniors saw themselves – people aged 50 or 60 and older – being the primary target audience for the ‘seniors’ version’ of each concepts.
- Parents who reviewed the ‘parents’ version’ of both concepts also saw themselves as the target audience, but suggested that, in addition, it seemed to be targeting mothers and families.
- In Atlantic Canada, where participants were exposed to several versions of the concepts, participants commented that the target audience was fairly broad, including youth, possibly a more active audience, and adults ranging from younger to middle-aged.

Across all groups, parents’ comments suggested that they were more motivated to get the flu vaccination, relative to seniors and other focus group participants, and their response to the concepts was, on balance, mostly positive. Moreover, those participants who indicated they were quite diligent about getting yearly vaccinations against the flu generally also tended to say the concepts were about equally effective in terms of their motivational impact, with some exceptions as noted above and below. Others responded by saying they would consider doing so, discussing the issue with other

family members and their primary care physicians, or doing more research on government websites to learn about where they may be able to get a flu shot. Those few participants, mostly seniors, who were typically against getting a yearly flu shot said that these ads would do little to change their minds. Some participants in Atlantic Canada also indicated that they would typically block these types of ads.

On the issue of masks, participants' were of two minds. Some felt that imagery used in Concept 1 which showed people wearing masks was relevant to the time. In fact, some thought that the masks served to reinforce the importance of the flu shot given the current COVID-19 context. Further, some felt that, in addition to the vaccine, wearing a mask would be a helpful preventive measure against contracting the flu. Others were confused by this, especially in shots where the people were presumed to be family members as was the case for the 'parents/family version' of Concept 1. The view was that members of the same family, being in the same social bubble, should not need to wear masks. At the same time, they also noted that in the context of COVID-19 and a desire to limit additional complications, the masks did make more sense.

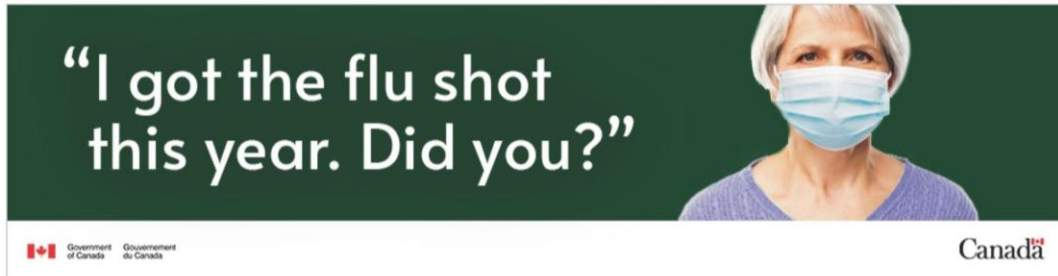
A few comments which surfaced through the discussions were illuminating with respect to better understanding what participants responded more and less positively to:

- Simplicity in terms of both the look and feel, as well as the text – participants responded favourably to the simple, clear, straightforward style. They liked that the ads got right to the point, were short, easy, clear and uncomplicated to read;
- Vibrant rather than a somber colour palette, although it is important that the ads also look official and readily reflect the Government of Canada brand;
- Contrasting colour palette – specifically some remarked that white text on a dark background stood out more than the reverse, dark text on a lighter background. Others also commented that light colours on a light background (e.g., the imagery used for the 'parents' version' of Concept 2), contributed to this image being less clear and somewhat muted; and
- Uplifting images – some participants commented that it was pleasing to see images of happy, smiling people in some versions of each concept, which was apparent to them even with the mother/child who were both wearing masks in Concept 1. This had the effect of counteracting, at least to some extent, the inherent fear that some people (and children) have of vaccinations.

Concept 1 – ‘This Year’

This concept was shown to seniors from Mid-size Centres Quebec Centres and Major Centres Alberta.

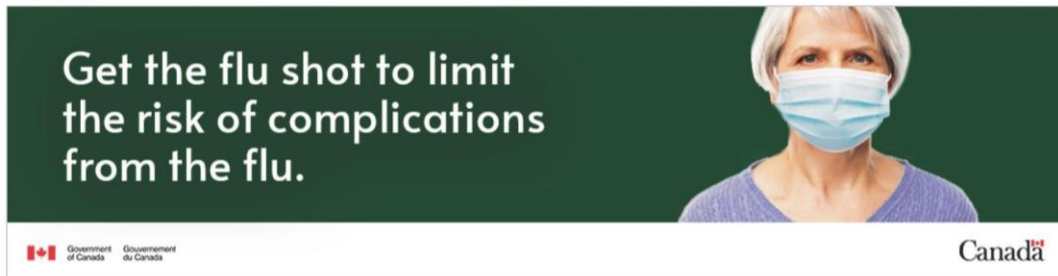
Frame 1



Frame 2



Frame 3



The above is an animated banner that consists of three frames. All frames have a dark green background colour and feature large text in on the left-hand side. The text on the first frame reads, "I got the flu shot this year. Did you?" in quotation marks. The second frame reads, "Protecting ourselves is more important than ever." The final frame reads, "Get the flu shot to limit the risk of complications from the flu." In all three frames, to the right-hand side of the text, there is an image of an older woman with short, white hair who is wearing a purple sweater and a light blue non-medical mask looking directly at the viewer. At the bottom of each frame, on a white background, is the Government of Canada logo and watermark.

This concept was shown to participants residing in Major Centres Atlantic Canada, Major Centres Ontario Parents and Major Francophone Centres Parents.

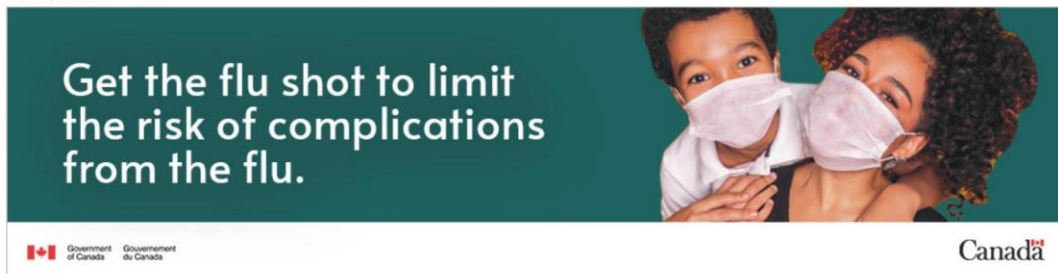
Frame 1



Frame 2



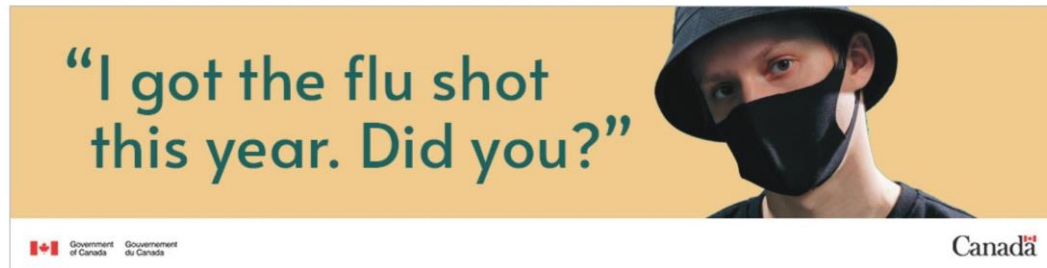
Frame 3



The above is an animated banner that consists of three frames. All frames have a dark green background colour and feature large white text on the left-hand side. The text on the first frame reads, “We got the flu shot this year. Did you?” in quotation marks. The second frame reads, “Protecting your family is more important than ever.” The last frame reads, “Get the flu shot to limit the risk of complications from the flu.” In all three frames, to the right-hand side of the text, there is an image of a mother with dark, short, curly hair with her son looking over her shoulder. Both are wearing white opaque non-medical masks. Behind the masks, both mother and son appear to be smiling. At the bottom of each frame, on a white background, is the Government of Canada logo and watermark.

This concept was shown to participants residing in Major Centres Atlantic Canada.

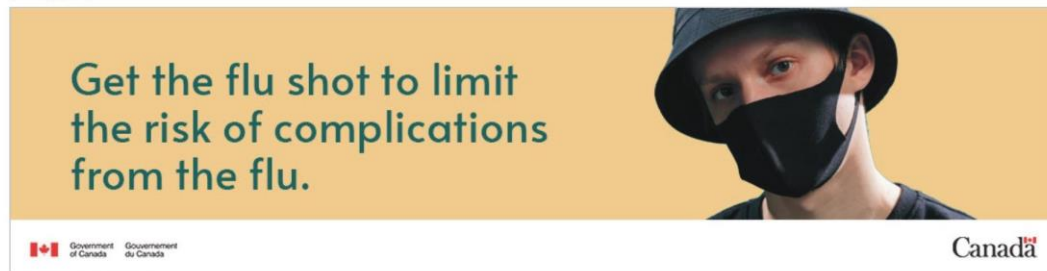
Frame 1



Frame 2



Frame 3



The above is an animated banner that consists of three frames. All frames have a tan background colour in colour and feature large dark green text on the left-hand side. The text on the first frame reads, "I got the flu shot this year. Did you?" in quotation marks. The second frame reads, "Protecting others is more important than ever." The final frame reads, "Get the flu shot to limit the risk of complications from the flu." To the right-hand side of the text, there is an image of a young man who is wearing a black bucket hat and black non-medical face mask looking directly at the viewer. At the bottom of each frame, on a white background, is the Government of Canada logo and watermark.

In as much as some participants reacted positively to this concept, specifically to the idea contained in the second frame of protecting one's family, relative to Concept 2 it did generate more mixed to negative feedback. Participants took issue with the question asked on the first frame – *'We got the flu shot this year, did you?'* – claiming that it was overly directive, forceful and coercive. Some described it as aggressive and commented that it was divisive – setting up an 'us versus them' dynamic (e.g., those who got vaccinated and those who didn't). For some, it sounded like an order, rather than a suggestion, which left them feeling like the choice of whether or not to get a vaccination had been taken away from them. Indeed, some participants in the groups with seniors got the impression that the flu vaccine was mandatory this year rather than voluntary.

At the same time, participants did respond positively to the notions of protecting one's family and limiting the risk of complications from the flu both of which reinforced the importance of the flu vaccine in the current COVID-19 context. These statements were motivating, directly linking the flu vaccine to the public's primary concern at this time in terms of limiting exposure to public health risks. It also reinforced their responsibility to others, meaning that making a decision to get vaccinated was the right thing to do in order to reduce risks for more vulnerable populations.

Views of participants on the use of masks has been discussed above. However, in Atlantic Canada there was some pushback by a few participants on the version showing an image of a young person wearing a mask and a bucket-style hat. For some, the image looked slightly militaristic in style, and the hat and general demeanour of the person further added to what was perceived as a somewhat unfriendly tone. Additionally, while some participants were comfortable showing images of people wearing masks, including the young man, they commented that a black hat and mask was a poor colour choice. Others also described the colour palette used in this version as flat and uninspiring.

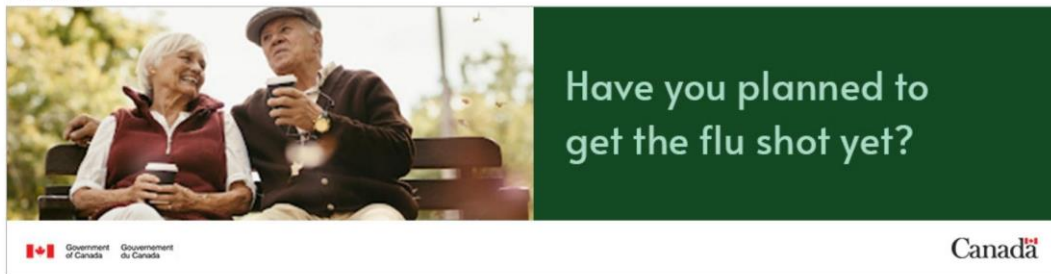
Another minor issue which was pointed out by some was the difference in the size of the font used in the first frame relative to the size employed in the other two frames. This was somewhat confusing, but also reinforced negative reaction to the polarizing nature of the question posed in the first frame.

Concept 2 – ‘Make a Plan’

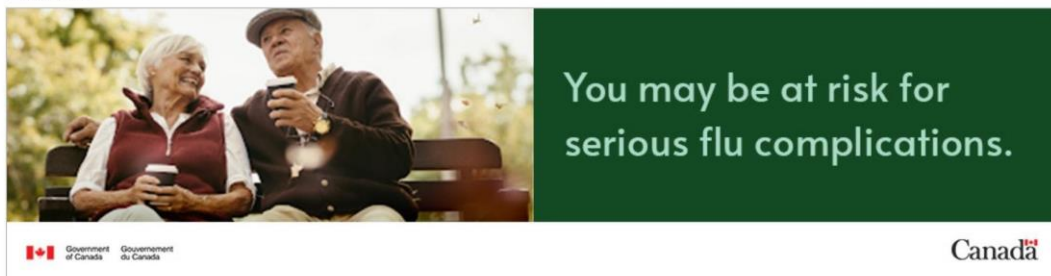
This concept was shown to seniors from Mid-size Centres Quebec Centres and Major Centres Alberta.

Make a Plan

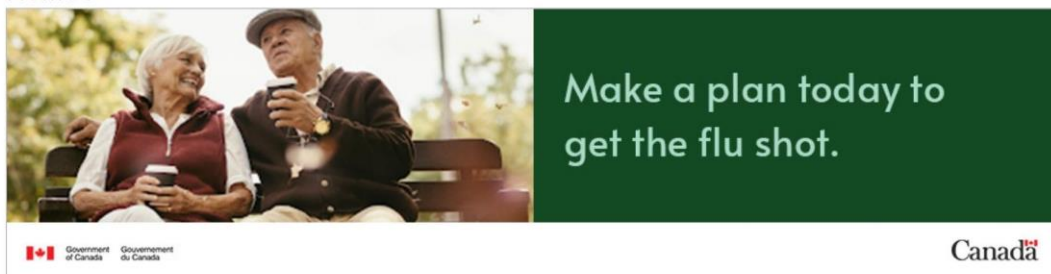
Frame 1



Frame 2



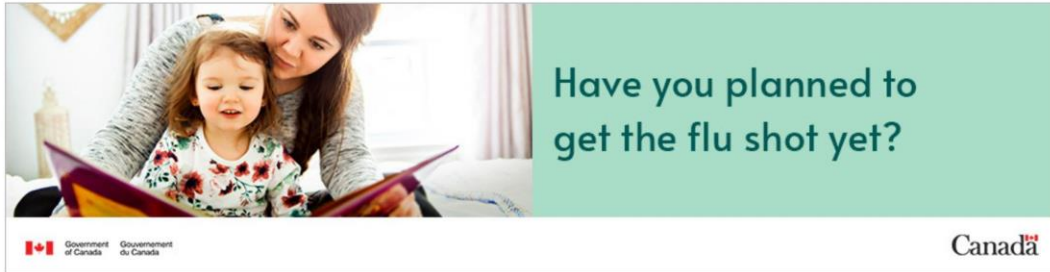
Frame 3



The above is an animated banner that consists of three frames. On the left-hand side of each frame is an image of an older couple sitting on a bench outdoors, drinking from disposable cups. The woman is looking at the man on her left and laughing, while the man seems to be speaking while looking into the distance in front of him. To the right of the image, there is a dark green background with lighter green font. The text on the first frame reads, "Have you planned to get the flu shot yet?" The second frame reads, "You may be at risk for serious flu complications." The final frame reads, "Make a plan today to get the flu shot." At the bottom of each frame, on a white background, is the Government of Canada logo and watermark.

This concept was shown to participants residing in Major Centres Atlantic Canada, Major Centres Ontario Parents and Major Francophone Centres Parents.

Frame 1



Frame 2



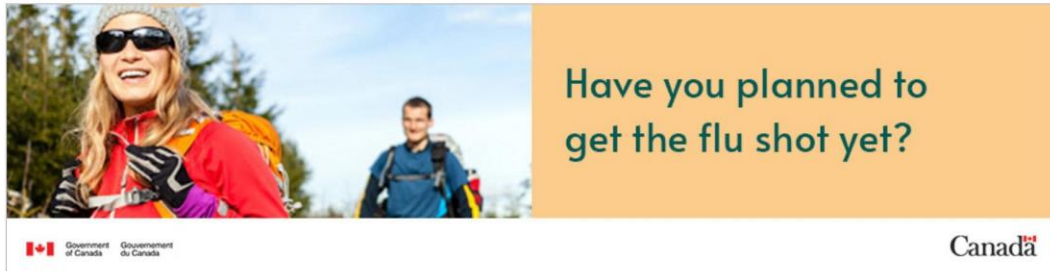
Frame 3



The above is an animated banner that consists of three frames. On the left-hand side of each frame is an image of a woman reading a book to a young girl who is sitting on her lap. To the right of the image, there is a light green background with darker green font. The text on the first frame reads, "Have you planned to get the flu shot yet?" The second frame reads, "Your loved ones may be at risk for serious flu complications." The final frame reads, "Make a plan today for your family to get the flu shot." At the bottom of each frame, on a white background, is the Government of Canada logo and watermark.

This concept was shown to participants residing in Major Centres Atlantic Canada.

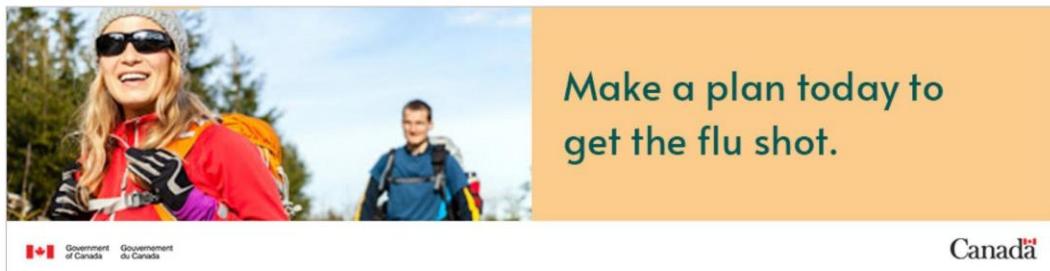
Frame 1



Frame 2



Frame 3



The above is an animated banner that consists of three frames. On the left-hand side of each frame is an image of a man and a woman outside, who appear to be on a hike. Both are in outdoor clothing and wearing backpacks. The woman is in the foreground of the image and is smiling and the man is following behind her in the background. To the right of the image, there is a tan background with dark green font. The text on the first frame reads, "Have you planned to get the flu shot yet?" The second frame reads, "People around you may be at risk for flu complications." The final frame reads, "Make a plan today to get the flu shot." At the bottom of each frame, on a white background, is the Government of Canada logo and watermark.

Overall, this concept received more positive commentary relative to Concept 1. Participants liked the reference to making a plan. It served as a polite reminder for participants and, in some cases, prompted participants to think about getting a flu shot earlier than they normally would. Some felt that a plan implied making the flu shot a priority and demonstrating more of a commitment to getting it – the use of the word ‘plan’ was thought to encourage the public to take specific steps or actions. In this sense it was seen as a more explicit ‘ask’ compared to Concept 1. Participants’ responded favourably to the idea of making a plan, saying that it wasn’t particularly onerous and simply involved committing to a date/time on one’s schedule. As some participants noted, it’s easy to put these types of activities off, but nudging people to make a plan was a gentle, yet clear, reminder not to delay. In this sense the tone of this concept was well received in that the sense was it effectively left people with little option, although some expressed concerns that the text in the third frame could be softened to something along the lines of ‘Please consider planning your flu shot today’ which framed this more as a request rather than a directive or demand.

The perceived clarity of the message was also reinforced by mention of the flu on every frame, which was not the case for Concept 1 and which, as a result, led to some confusion as to whether the ad was related to COVID-19 or the flu.

Two minor criticisms of this concept focused on:

- The change in the background colour from the first two frames to the third which some noticed and questioned; and
- The absence of a reference to a website where interested persons could get more information. Although this is common to both concepts, it was specifically raised in reaction to Concept 2.

Final Statement

After participants reviewed both concepts, they were presented with the following statement which could accompany these ads or other communications about the flu shot:

*This fall, we're protecting ourselves, our communities, and our healthcare system from the flu.
Let's keep everyone safe.*

When asked their views on this statement and, specifically, whether it would work well with these ads, most responded favourably. The statement was viewed as motivating particularly because it was both direct and supportive, and evoked a sense of inclusiveness and community. It also underscored individuals’ sense of responsibility to help protect others even if they, themselves, did not feel they were particularly at risk. A few participants responded less favourably, viewing the statement as too general in nature, although they did say that when placed in the context of the ads they had just seen, it had more meaning and was more powerful.

Childhood Vaccination Concept Testing (Major Centres Ontario Parents, Major Francophone Centres Parents)

Two short videos developed for a possible advertising campaign promoting childhood vaccinations were shown to two groups of parents. Each concept was reviewed individually before participants were asked to indicate their preference. The order in which the concepts were shown was rotated across the groups to reduce any order bias.

Participants responded positively to both videos. In general, parents found the videos to be clear, to the point, relatable, relevant and reassuring.

There was general consensus in both groups that the ads were intended as a reminder to parents to protect themselves and their families by having their children vaccinated and, importantly, to keep their children's vaccinations up-to-date. A secondary message that parents felt was implied in the videos was that vaccines were safe. This was reinforced by the various scenarios showing a child wearing a helmet while riding a scooter, in a car seat, and holding a parent's hand while crossing at a designated crosswalk, circumstances which many parents felt were reflective of their day-to-day experiences.

For most parents the ads were seen as a reality check, not just with respect to ensuring their child receives a flu vaccination, but that all childhood vaccinations are kept current. Parents were particularly receptive to the relatability of the scenes, showing children at various stages – newborn, infant, toddler, etc. This approach suggested both the 'routine' nature of vaccinations and that there is a routine immunization schedule.

A number of parents commented that, after seeing the ad, they would likely do one or more of the following:

- Double-check the status of their child's/children's vaccinations;
- Talk to their doctor or other health professional; and
- Research the prescribed regime of vaccinations, from birth through the various stages of childhood. Some expected they would be able to find this information on a government website.

Many indicated that the ads would draw their attention, if they saw them online or television. This was a factor of both the message and the tone. As noted, participants appreciated the reminder, especially given their busy schedules, but were also drawn into the ads based on the intimate nature of the scenarios. They felt that the scenarios underscored the direct link between the protective role of parents and of vaccines. Similarly, most clearly felt the target audience included families and specifically parents of young children, both mothers and fathers.

A few parents commented that they would be likely to share the video, especially among new parents or family and friends who are expecting a child. Others indicated that, while they were not active

social media users, they saw value in the message. While not the predominant opinion by any means, some parents in the group of Francophones were reluctant to share the video. It was their view that vaccination is a parent's choice and they did not wish to impose their beliefs on others.

Participants found both videos to be quite similar, particularly with respect to the central message and the tone. However, there were a few differences noted and, on balance, there was a slight preference for Video 1 over Video 2.

Video 1



1 SANTE_CANADA_SAFETY_Scooter_Father.mp4

The above video begins with a scene of a mother bent down to do up a young girl's bright pink helmet in a park. The girl is standing on a yellow scooter. The second scene showcases a father holding a newborn child. The father has a burping cloth over his shoulder and is holding the child with both hands while kissing them on the forehead. The third scene depicts a mother with a toddler on her lap. Across from the mother is a nurse applying a bandage to the child's arm and smiling. Next, there is a white screen with black text that reads, "You protect them every day," and narrator says the same message aloud. Then, the text switches to read, "So do vaccines." Underneath this text in smaller font appear the words "Learn more" and the website URL "Canada.ca/ChildhoodVaccines." Lastly, the Government of Canada logo appears on screen and the narrator says "A message from the Government of Canada."

Parents commented positively on the use of both a mother and a father in this ad which underscored the involvement and responsibility of both parents in ensuring their child's/children's vaccinations are kept up-to-date. They responded well to the inclusive approach and felt it was important to target men as much as women.

The one aspect of the ad that a few parents took issue with was the scene of a child on a scooter wearing a helmet. While most appreciated that the helmet served as a metaphor for safety, thereby further reinforcing the message about protecting children, a few were confused by this scene and felt that it was irrelevant and unrelated to the message around vaccinations.

Video 2



2 SANTE_CANADA_SAFETY_Walk_Car seat.mp4

The above video begins with a scene of a father holding a young girl's hand while they walk across the street at a designated crosswalk. The girl is holding a stuffed bear and is looking up and smiling at the man. The next scene depicts a mother buckling a toddler into a car seat. The two are laughing and smiling together. The third scene depicts a mother with a toddler on her lap. Across from the mother is a nurse applying a bandage to the child's arm and smiling. Next, there is a white screen with black text that reads, "You protect them every day," and a narrator says the same message aloud. Then, the text switches to read, "So do vaccines." Underneath this text in smaller font, appear the words "Learn more" and the website URL "Canada.ca/ChildhoodVaccines." Lastly, the Government of Canada logo appears on screen and the narrator says "A message from the Government of Canada."

Most parents found this video to be inviting, non-threatening and easy to understand. Any critique of this ad centered on the ambiguity of the parent shown in the first scene, as the face/gender of the parent was obscured and/or not entirely self-evident. As a result, some tended to favour the first video because it very clearly showed both male and female parents. Moreover, this lack of clarity in the first scene left some feeling that the ad contained a subliminal inference that the care of children is primarily the mother's responsibility.

Usage of Masks

It was pointed out that the mother and nurse shown in the vaccination scene in both ads were not wearing masks, and participants were asked whether they should be. While views were mixed across the two groups, this issue did not detract from the overall effectiveness of either concept.

Some felt the actors should be shown wearing masks, especially if the ad was to be aired while the pandemic was ongoing. At this time, these participants thought that failure to do so would be a missed opportunity, both to lead by example and to further promote current guidelines and recommendations around wearing masks. Moreover, concerns were expressed that it might in fact send a counter message, signalling to Canadians that it was now safe to stop wearing masks in public spaces.

Others held the opposite view, commenting that it was somewhat of a relief to see an ad that did not show individuals wearing masks. A few also felt that since the ad was not focused specifically on COVID-19, but rather on routine vaccinations in general or the flu vaccine in particular, it was not necessary to show the individuals wearing masks. This view was more prevalent among Francophone parents.

Opioids (Major Centres Saskatchewan Parents)

Many participants had heard about opioids recently either through media stories or personal connections. A number of participants pointed to reports which they said indicated that opioids were responsible for a higher percentage of deaths in B.C as compared to COVID-19. Others felt the issue was not confined to B.C., but was national in scope and spoke generally about an increase in fentanyl use and related overdoses which they believed had been exacerbated by the pandemic.

When asked if they thought there was an opioid crisis in Canada, most did referring to the situation as an epidemic. Several factors were raised by participants in response to a question about the reasons for the crisis, a number of which were linked to COVID-19, including:

- Underlying mental health and domestic violence issues which are being made worse as a result of isolation and financial pressures due to COVID-19 and which have resulted in a heavier reliance on opioids to ease stress;
- Challenges obtaining support and/or rehabilitation services given current social distancing protocols and the lack of face-to-face interventions; and

- Concerns that other illegally obtained drugs are being laced with fentanyl and that users may be unaware of the extent to which they are exposing themselves to additional risk.

Participants were provided with the following clarification before continuing the discussion:

Opioids such as fentanyl, morphine, oxycodone and hydromorphone are medications that can help relieve pain. Opioids are drugs that affect your mind, mood, and mental processes and can also cause euphoria, or the feeling of being "high." This creates the potential for them to be used improperly.

While most were aware of the opioid issue in Canada and deemed it a crisis, fewer could point to specific groups who are most affected. The general consensus was that this crisis was widespread and not unique to any particular demographic, although some felt that teens and young adults may be disproportionately affected. Others identified people who have had injuries and who have subsequently become dependent on pain medications. Specifically, they noted the challenges of accessing physicians, treatments and prescription medications as a result of COVID-19 which several participants felt could lead to some patients over-medicating. Others expressed concerns that some physicians may be over-prescribing opioids due to pressures or financial incentives from pharmaceutical companies, or that they may not be adequately underscoring the addictive properties of this class of drugs when issuing prescriptions for their patients.

Most agreed the opioid situation in Canada was getting worse and this view was supported by perceptions that there were more stories and headlines in the news on this issue. While several were unsure, no one felt the situation was improving.

Participants were united in their opinions about what the Government of Canada could do to help mitigate the crisis. They advocated for multiple actions, including more mental health resources, more safe injection sites, and more education about addiction and mental health. When asked specifically about their views on decriminalizing possession of illicit drugs for personal use in order to divert those with a substance use disorder toward a health care approach and away from the criminal justice system, many responded favorably. Participants supported an approach which focused more on rehabilitation, especially one which would get at the root of the issue and offer people greater access to mental health resources and other assistance. Reference was made to other countries that have had some success with this approach. Several participants emphasized that incarceration, in their view, only served to continue the cycle of dependency, although others questioned whether decriminalizing possession for personal use would directly lead to enhanced rehabilitation services. Although not a widely-held view, some suggested that decriminalization made sense in order to be able to tax this activity and direct these funds to health care, rehabilitation and related support services.

Pharmacare (Mid-size Centres Quebec Seniors,
Major Centres Atlantic Canada, Major Centres Alberta
Seniors)

Familiarity and Perceived Importance

Many participants were familiar with the term 'Pharmacare,' although awareness did vary across the three groups in which a discussion of this topic was held. In Alberta, for example, seniors were less familiar with this term. And, In Atlantic Canada participants had not heard the term used in a Canadian context. Rather they felt it was as aspect of the American health care system. Regardless, many associated Pharmacare with subsidized healthcare, specifically making access to prescription drugs more affordable for the wider population.

Few were aware of any Government of Canada plans related to Pharmacare. Those who did could not recall any specific details or commented that it was their understanding the plan targeted several key groups: families, low income households and seniors. Before continuing, participants were provided with the following background information on the Government of Canada's involvement with Pharmacare:

In 2019, the Government of Canada announced that it was intending to move forward on implementing national Pharmacare. To make prescription drugs more affordable and more accessible to more Canadians, the Government stated its intention to work with its partners on the creation of:

The Canadian Drug Agency, a new national drug agency that would co-ordinate negotiating prescription drug prices on behalf of Canadians. Buying them in large quantities will be able to save Canadians up to \$3 billion a year in the long term.

A national strategy for high-cost drugs for rare diseases to help Canadians get better access to these drugs, as a first step towards expanded coverage.

Most participants agreed that a national Pharmacare program was an important priority relative to other healthcare priorities, although seniors in Quebec were less inclined to hold this view. For most, the key benefits were seen to be lower drug prices and broader coverage, particularly for people with medical conditions or rare diseases that require costly medications which may be beyond their reach financially, especially if they are not covered by an existing plan. At the same time, some participants had questions about how the plan would be structured and administered (e.g., which drugs would be covered and which would not), expressing concerns that drugs which are vital for some people could be left off the formulary.

Participants were asked whether COVID-19 had any impact on their views regarding the need for Pharmacare. Whether or not they felt Pharmacare was a higher or lower priority, most indicated it was not a significant factor in their views on the issue. Some participants were quite firm in espousing strong support for Pharmacare, regardless of current public health issues. Their view was that Pharmacare should be a major priority at any time. Others' perspectives were based on a sense that those afflicted and hospitalized by COVID-19 would have all of their medications covered while in hospital, although some participants noted that recovering patients may have ongoing issues and complications that may require prescription drugs once out of hospital. Some also commented that they were not aware of any specific medications currently available as treatment for COVID-19. Thus, they felt Pharmacare would not have made a difference in this respect.

When further questioned about the impact of COVID-19 on vulnerable populations in particular, including low income seniors, some participants did see the value of Pharmacare in providing assistance to these groups. A few participants offered the example of recovering patients who may experience chronic or long-term effects and complications from the virus which necessitate ongoing treatment or management through prescription medications.

Some put forward a more 'universal' view that personal need should drive access (i.e., those who need medications should have ready and affordable access to them). And, at the same time, other participants, including some seniors, disagreed with the premise that COVID-19 has underscored the importance of Pharmacare. These participants were of the opinion that many seniors already have sufficient healthcare coverage or that the 'unknowns' regarding COVID-19, including the lack of preventive measures or obvious treatments, suggests that access to Pharmacare would have little impact in this instance.

Participants were also asked to consider Pharmacare within the context of reduced hospitalizations. The argument put forward was that by ensuring people have better access to affordable medications, it lowers the likelihood of treatment in hospital thereby freeing up institutional capacity to deal with other issues like pandemics. Overall, most participants agreed with this view and, in general, tended to favour an approach to healthcare which focused on prevention, including nutrition and exercise, over treatment. Nevertheless, a few participants raised concerns about the possibility that easier access to medications may result in a more widespread practice of over-prescribing. Comments suggested that participants desired a balanced approach to disease prevention, seeking to avoid or reduce the possibility of an over-reliance on medications.

What Pharmacare Could Look Like

Universal versus 'Safety Net' Approach

Discussions in each group broached the topic of what a national Pharmacare program could look like – a universal plan or a 'safety net' plan which would only apply to Canadians when prescription drug costs exceed a percentage of their income.

Almost unanimously participants favoured a universal approach. They viewed it as Canadian-wide, all-encompassing, socially responsible, a fair and equal approach, and one that would not exclude anyone. There was a strongly held view that an income-based approach would be both challenging to administer and potentially unfair given the variability in the cost-of-living across Canada and in an individual's circumstances (e.g., family size, single parent households, etc.). A few participants did, however, comment on the benefits of a safety net approach, noting that:

- It would likely be less costly overall;
- Higher income earners would likely be covered by private insurance; and
- Having to pay out of pocket for some prescription drugs may encourage better health practices and greater individual responsibility for one's own health status.

Overall, however, most supported universal Pharmacare, with some suggesting that the tax system operates as a way of ensuring fairness and equity (e.g., higher income earners generally pay higher taxes and, therefore, contribute a larger share to the funding of healthcare and Pharmacare).

Public versus “Close the Gaps” Approach

Participants were asked about the benefits of a public approach, where all Canadians are on the same plan, versus one which ‘closes the gaps’ meaning that people could still use existing public and private plans, but the plan would be set up to ensure everyone receives coverage, including those not currently covered. Some preferred a public approach for reasons of fairness, consistency, and equal treatment for all Canadians. A few also felt that eliminating employer-paid insurance plans would be advantageous. However, concerns were expressed by several participants that a universal approach would mean all Canadians would be paying into it regardless of the extent to which they accessed Pharmacare. In addition to provincial healthcare coverage and premiums, some felt that they would end up paying higher taxes to fund both systems (e.g., federal and provincial). Other benefits associated with a “close the gaps” approach included that it would be less costly, quicker to implement, and fair in the sense that coverage would be provided for those without an existing plan and/or who are unable to afford prescription medications. At the same time, some indicated that a ‘close the gaps’ approach might take Canada more in the direction of American-style healthcare. It was their perception that pharmaceutical companies stood to benefit – they viewed coverage of more expensive drugs as a government subsidy to these companies. It was clear from the discussion that participants were less certain about the mechanics of a ‘close the gaps’ approach and had many questions about how it would work and its impact, both for Canadians and for pharmaceutical companies.

When asked which approach was fairer, participants’ views were split. Some, primarily in the group held in Atlantic Canada, favoured a public approach, commenting that everyone should have the same access to prescription drugs, and that this approach would eliminate any possible loopholes in coverage. Seniors in Alberta, however, tended to favour the alternative, suggesting that the ‘close the gaps’ approach might be easier to administer, less costly and would take into account those already receiving benefits through their employer.

Drug Coverage

Participants were also asked to consider which drugs should be covered through Pharmacare, one approach being to limit coverage to essential life-saving medicines, another being to add frequently prescribed drugs covered by most basic plans, and a third being to offer more comprehensive coverage of mostly everything currently included in existing public and private plans. An additional option was put forward whereby fewer drugs would be covered, but people would have the option of expanding their coverage through add-on workplace or private plans. Participants struggled to make a definitive choice without benefit of further information about the nature and costs of those drugs that are most commonly prescribed and the financial implications of each option. As such, views varied widely from those who believed all drugs should be covered, to those who felt the program should be restricted to covering only lifesaving medicines. The former point of view was supported by

a belief that one's health status should not be entirely predicated on one's ability to pay, and that people should not be forced to make a choice between paying for needed prescriptions versus paying for other basic requirements, such as groceries. Among those voicing the latter perspective, it was acknowledged that it would be difficult to determine what fell into the category of 'lifesaving' as those who may rely on medications to manage depression, for example, might consider these medications to be lifesaving in some respects. One area of consensus, however, was that the list of drugs covered should be the same from province to province.

While participants felt there were many complexities to consider in discussing this topic, they did generate some thoughts on the process for deciding which drugs should be covered. Key factors included:

- The rate of diagnosis of a specific condition requiring medication and/or conditions that have been diagnosed by a medical doctor; and
- The seriousness of an issue or a determination that an issue affects a significant proportion of the population (e.g., reproductive health and contraception).

As part of this discussion, participants were asked about specialized high-cost drugs used to treat rare diseases which, in some cases have limited clinical evidence to support their efficacy but which give hope to patients whose options are otherwise limited. Some participants approached this as a moral question. And, while most participants agreed that these types of drugs should be covered in order to improve patient quality of life and possibly offer a cure, a few participants suggested a caveat that there should at least be some evidence of a positive therapeutic effect before the costs of these drugs are covered.

On the issue of who should pay for a national Pharmacare program, many participants favoured an approach whereby Canadians would cover part of the cost through either a Pharmacare premium or small payments (e.g., a dispensing fee for a prescription). Although there were questions about how individual premiums would be determined (e.g., based upon tax returns), most felt it was fair to apply premiums based on one's ability to pay and that this approach would help to offset the cost as well as reduce the likelihood of abuse.

Some participants also supported having employers pay for part of Pharmacare, particularly if the approach taken was universal, allowing employers to reduce or eliminate this aspect of their own benefits coverage for employees. However, others questioned the expense for employers noting that, in principle, a universal approach should mean that neither individuals nor employers should be required to pay any premiums.

Toward the conclusion of this discussion, participants were asked whether the term 'Pharmacare' was the best way of describing this type of system and, on balance if they felt Pharmacare was a good or a bad idea. Most participants were comfortable with the term, describing it as clear and self-explanatory. Others, however, felt the term reflected an American approach to healthcare, and preferred to Canadianize it suggesting options such as 'Can-Care' or something along those lines.

Overall, most participants felt that Pharmacare was a good idea, although seniors in the group held in Quebec were less positive. Many viewed Pharmacare as a fundamental and integral element of a national healthcare system and felt that the implementation of a universal Pharmacare system would generate positive health outcomes, thereby lowering overall costs for Canada's healthcare system. Echoing comments made earlier, some participants noted that it was essential to a fair healthcare system, one which would provide access to pharmaceutical treatments regardless of one's ability to pay or where they resided in Canada. In Quebec, the higher level of negativity towards Pharmacare reflected the fact that the province already has a publicly-funded drug plan which individuals can also supplement with additional personal insurance. These participants did not view Pharmacare to be as urgent a priority for the federal government relative to other priorities.

Indigenous Issues (Winnipeg and NCR Indigenous Peoples)

Government of Canada and Indigenous Issues

There was a consensus among participants that a key area of focus for the Government of Canada should be on addressing basic human needs for Indigenous peoples, particularly ensuring clean, potable water on reserves, but also food and housing.

Important issues such as cultural revitalisation, rediscovery of language, economic development and economic sovereignty were also raised, although participants felt that these issues had to be underpinned with an effective solution to meeting basic human needs. Participants also emphasized a stronger Government of Canada focus on the recommendations stemming from the Truth and Reconciliation Commission and more action in regards to the outcome of the National Inquiry into Missing and Murdered Indigenous Women and Girls. Some participants expressed a desire to see the federal government taking a more active leadership role on Indigenous issues in general and, in particular, adopting an Indigenous world view. It was thought that doing so would more directly lead to illuminating and addressing the root causes of systemic racism and other structural issues. This led to a broader discussion about the relevance of the *Indian Act* and issues related to land claims.

Nova Scotia Fisheries

Participants were generally aware of the issues between Indigenous and non-Indigenous fishers in Nova Scotia. Some were more knowledgeable of the particulars, commenting on the outcome of the Supreme Court decision in the case of Donald Marshall which affirmed treaty rights to hunt, fish and gather, and on the more specific aspects of the lobster fishery in Nova Scotia. There was general agreement that Indigenous fishers were not being treated fairly and that the value of the lobster catch was likely the driving force behind the challenge by commercial fishers on this issue. Most felt that this was an important issue for the Government of Canada to address, to avoid any further escalation.

UNDRIP (The United Nations Declaration on the Rights of Indigenous Peoples)

All participants were familiar with UNDRIP and, at a minimum, had heard of the Declaration even if their understanding of the specifics was less detailed. The following information was shared with participants.

UNDRIP is an international document adopted by the United Nations in 2007 that lays out the basic rights that Indigenous peoples should have around the world. It outlines how governments should respect the human rights of Indigenous peoples.

UNDRIP consists of 46 articles that describe specific rights and actions that governments must take to protect these rights. The main themes in the declaration are:

- *The right to self-determination*
- *The right to cultural identity*
- *The right to free, prior and informed consent (i.e. the right to be consulted and make decisions on any matter that may affect the rights of Indigenous peoples)*
- *Protection from discrimination*

Participants were asked what changes they would expect to see if Canada fully implemented UNDRIP. Overall, most anticipated that acceptance of the Declaration would mean seeing an Indigenous point of view expressed more clearly and more often in government discussions, policy proposals and decisions. There was an expectation that there would be an opportunity for more Indigenous voices to be heard and for greater engagement of Indigenous leaders in official forums and institutions, including the Parliament of Canada, as well as in wider decision-making affecting Canadians and Indigenous interests. In particular, participants felt this should also mean a greater focus on sustainability and, in this regard, the resource sector was referred to explicitly. Some reiterated a call for abolishing the *Indian Act* and for empowering Indigenous peoples at a grassroots level, specifically Indigenous women. A concern was expressed that elected Indigenous officials and decision-making bodies, such as the Assembly of First Nations, may be contributing to the marginalization of some groups within the Indigenous community.

There was also an expectation that Indigenous viewpoints would be heard within the educational system. Participants discussed curriculum change and their expectation that if UNDRIP were to be fully implemented more people would come to understand the place and contribution of Indigenous people in Canada. Beyond specific comments around decision-making and education, it also was expressed that implementing UNDRIP in Canada would help with consciousness-raising and the general evolution of opinion on Indigenous issues.

Racism

The latter part of the discussion focused more specifically on racism, beginning with a conversation to better understand how participants defined systemic racism. Most were of the view that systemic racism involves covert, subconscious or unspoken behaviours (e.g., exhibited through body language

and expressed attitudes) that occur and are evident in virtually all aspects of daily life, throughout the various agencies and services with which Indigenous people interact. They described systemic racism as fundamentally affecting how one thought about oneself as an Indigenous person. Furthermore, racism was seen as normal practice in Canada, and a factor of how most Canadians have been raised and educated.

The following definition of systemic racism was shared:

Systemic racism is generally defined as a problem with how society is set up, not just individual attitudes towards certain groups. So it's as if there's a built-in bias or racist lens in our various institutions and systems that leads to unfair treatment or outcomes for certain groups. So essentially rather than focusing on a few "bad apples" as the problem (e.g. a few racist people), systemic racism is when the whole barrel of apples is spoiled.

Based on this, participants overwhelmingly agreed that systemic racism exists in Canada. It was their view that it starts with the education system which they felt provided an inaccurate portrait of the history and rights of Indigenous people in one's formative years which subsequently carried through adulthood. As citizens move into adulthood and take their place in the workforce and in various societal institutions the impact of this understanding is felt through the policies and decisions they enact. They felt that most Canadians grow up learning little about Indigenous peoples and, as a result, are not necessarily well prepared when they enter the workforce or fully aware of the impact of workplace policies in perpetuating racist attitudes and Indigenous stereotypes. Again, the *Indian Act* was a focal point of discussion and some made the point that the way in which it is discussed, in schools for example, has left an inaccurate impression among non-Indigenous people that Indigenous people receive many 'free' services not available to other Canadians, leading to an adversarial dynamic.

Participants mentioned numerous ways in which they felt systemic racism is perpetrated within Canadian institutions and systems, including:

- The healthcare system – lower access to health care services, including specialists, which has affected youth in particular and those facing medical issues as a result of COVID-19; higher rates of cancer among Indigenous people;
- The educational system – lower graduation rates/higher drop-out rates among Indigenous youth;
- The law enforcement and judicial system – greater use of force against Indigenous people and higher rates of incarceration; and
- Other civil and democratic institutions – Indigenous women not being given the right to vote until 1960 was mentioned as an example.

Participants' comments also underscored that residential schools had, in their view, further contributed to a legacy of poverty and poor educational achievement among Indigenous people.

Changes to existing institutions to reduce systemic racism were discussed. Suggestions were offered which centered on ensuring a stronger commitment to enriching the perspective of front-line workers in law enforcement and to increasing diversity in these workplaces. In particular, it was suggested that

increasing the number of Indigenous people in law enforcement and the legal-judicial system would provide a more balanced perspective and a better understanding. On this topic, participants shared anecdotes pertaining to encounters and experiences they have had with law enforcement and judicial officials, including stereotyping, aggressive treatment and racist remarks. With respect to the judicial system in particular, participants spoke about inconsistencies among both judges and lawyers in terms of their awareness, understanding and treatment of Indigenous people, often resulting in longer sentences and higher rates of incarceration for Indigenous people. There was also a concern about broader public perceptions of a need for more prisons and incarceration as opposed to considering other measures or responses. This led to a discussion of the generational effects these decisions are having on Indigenous children, specifically about juvenile justice in Indigenous communities and recurring cycles of apprehension and foster care.

Drinking Water

A few participants were aware of the Government of Canada's efforts to lift long-term drinking water advisories on reserves. Prior to continuing a discussion on this topic, an infographic summarizing the government's progress in this area was shared with participants.

Updated February 15, 2020



All
long-term drinking water advisories on public systems on reserves **lifted** by



88 long-term drinking water advisories lifted since November 2015

61 long-term drinking water advisories in effect

Projects underway or completed as of September 30, 2019



441

projects to repair, upgrade or build infrastructure



59

supporting projects and initiatives



74

feasibility studies and projects in the design phase

The above is an infographic with a white backdrop, but the bottom third of the image had light blue, scaling into darker blue waves lower down. The top right of the image denotes "Updated February 15, 2020" in grey font, underlined by a dark blue wavy line. To the right, there is a dark blue water droplet with a white tap inside that is leaking a drop of water. In the middle of the image to the left, text reads, "All long-term drinking water advisories on public systems on reserved lifted by" in grey font, but the words "all" and "lifted" are in blue. Next to this text on the left, there is a calendar image with "March 2021" printed inside. To the right, there is a dotted blue line, and on the right of the line, text reads "88 long-term drinking water advisories lifted since November 2015" and below "61 long-term drinking water advisories in effect." In both cases, the numbers are significantly larger than the words. Below, spanning the bottom third of the image, a blue banner reads, "Projects underway or completed as of September 30, 2019" in white text. Below, separated by dotted blue lines, are three sections. The left-most section has a pylon in a water droplet in blue, with grey text reading "441 projects to repair, upgrade or build infrastructure." The middle section has three people in the water droplet in blue with text below reading "59 supporting projects and initiatives" in grey text and to the right, a map with a magnifying glass in a droplet in blue, with grey text reading "74 feasibility studies and projects in the design phase."

Initial reactions were mostly positive with participants describing the progress as encouraging and as good news. However, there was a mention of ongoing barriers to progress, including:

- A shortage of trained technicians on reserves (and the fact that the training itself was a fairly lengthy process); and
- Delays resulting from litigation between some First Nations communities and the federal government, and disputes between commercial entities which have, in some cases, halted construction of new water treatment facilities.

And, while participants responded favourably to evidence of progress, as underscored by the data shown in the chart, they reiterated the view that safe drinking water is a basic right for all Canadians and that additional efforts should be taken to fast track improvements to water infrastructure on those reserves that remain under an advisory.

When asked both how they would rate the progress of the Government of Canada on this issue and what more it could be doing, participants spoke again about the linkage to land claims and the need to return lands (and thereby access to clean water) to Indigenous communities. Some participants commented on the negative impact of hydro development on Indigenous lands. Additionally, participants emphasized the need for both sides – the federal government as well as leadership on reserves – to prioritize this issue, to move more quickly, and to ensure proper oversight of funds directed to infrastructure improvements. Some also called for more compassion and for the officials involved to put themselves in the situation of Indigenous people on reserves who daily face the challenges and health effects of poor water quality.

Speech from the Throne (Smaller Centres Quebec, Lower Mainland, GMA CERB Recipients, GTA CERB Recipients)

The Speech from the Throne (SFT) was delivered on September 23, 2020. In the four groups which took place after this date, participants were asked what they recalled hearing about it and about their views on the key pillars.

Recall of the Speech from the Throne

Awareness of the SFT was modest across all groups, even with some prompting about the timing of this event and the nature of the speech itself. While there was little familiarity with the details, some participants commented hearing about the transition from CERB to EI as well as enhanced sick leave and caregiver benefits. Although some felt this was repetitive of what they had already been hearing in regards to the CERB, and most were vague on any further details, there was interest in the CERB and the additional suite of recovery benefits among participants who were directly impacted by these

changes. It was also pointed out that mention had been made in the SFT of government partnerships with pharmaceutical companies to develop COVID-19 vaccines.

Government of Canada Pillars

The four main pillars from the SFT were shared with participants.

Build back better, to create a stronger and more resilient Canada

Fight the pandemic and save lives

Stand up for who we are as Canadians, making progress on gender equality, reconciliation, and fighting discrimination

Support people and business through the crisis, as long as it lasts, whatever it takes

Participants were asked to consider which of these four they felt was most important for the Government of Canada to focus on as well as which was most important to them personally. The fourth theme pertaining to supporting people and businesses resonated most strongly with participants with several commenting on the number of businesses that had shuttered as a result of COVID-19. On balance, this theme was deemed as being the most timely, relevant and tangible of the four pillars. Participants highlighted the need for Canadians to support each other and indicated that in tackling the fourth pillar, the federal government would de facto be addressing the second – fighting the pandemic and saving lives. By contrast, some participants found the first two themes sounded more like marketing slogans or part of an advertising campaign, although participants also felt that fighting the pandemic would in fact lift up the economy and allow for progress on all the other pillars. A few participants felt that the third pillar – standing up for who we are as Canadians – was important to pursue as a means of ensuring that every person is treated with respect, but also thought this should be an ongoing goal or pillar for the Government of Canada and less of a specific focus at the current time.

Overall, all of the pillars were seen as appropriate and, in fact, complimentary and overlapping areas of focus for the Government of Canada. While some participants did not fully understand what was meant by the phrase 'Build back better,' and compared it to America campaign themes, others commented more favourably on this idea indicating that it denoted a focus on addressing gaps and fixing what was not previously working.

Government of Canada Priorities (Smaller Centres Quebec, Lower Mainland B.C.)

Next the discussion shifted to specific priorities that the Government of Canada had pledged in the SFT to implement. The following 12 commitments were shown to participants:

Create a national, universal pharmacare program so that all Canadians have access to affordable prescription medication.

Create over one million jobs via tools such as investments in infrastructure, and incentives for employers to hire and retain workers.

Ensure faster COVID testing options, including being able to quickly meet surge testing needs.

Give municipalities the ability to further restrict or ban handguns, and strengthen measures to control the flow of illegal guns into Canada.

Help make Canada a world leader in clean technology by launching a fund to attract investments in making zero-emissions products, and cutting the corporate tax rate in half for these companies to create jobs.

Implement a plan to exceed Canada's 2030 climate goal, and legislate a goal of net-zero emissions by 2050.

Increase Old Age Security once a senior turns 75, and boost the Canada Pension Plan survivor's benefit.

Introduce more support for industries that have been the hardest hit, including travel and tourism, hospitality, and cultural industries like the performing arts.

Invest heavily in training for workers, and in connecting workers to employers and good jobs.

Invest in creating a sustainable, long-term, Canada-wide early learning and childcare system.

Penalize long-term care home operators and others who neglect seniors under their care.

Work with the provinces and territories to set new, national standards for long-term care so that seniors get the best support possible.

Participants were asked to identify up to three of these that they deemed to be the most important to them personally. Of the twelve statements shown, a cluster of five emerged as important. These centered on commitments to health and creating economic opportunity for Canadians, including:

- Creating a national, universal pharmacare program;
- Ensuring faster COVID-19 testing;
- Working with the provinces to set new national standards for long-term care;
- Creating one million jobs; and
- Investing in training for workers.

On the health front, participants spoke about access to healthcare services, including the importance of affordable prescriptions as well as rapid COVID-19 testing for children, families, seniors, those on fixed incomes, and people dealing with a chronic illness. Participants were also quite vocal about the need to address long-term care across Canada through better regulations and oversight, in addition to increased pay for staff.

Participants also focused on Canada's economic health, including job retention, creation and training, particularly for those just getting into the workforce, and they noted that some industries have been

more adversely affected than others by the pandemic. In a related comment, participants spoke about the importance of childcare in order to allow parents to return to work and enable the economy to get back on track. Some noted that a focus on childcare would be especially helpful for working women.

When participants were asked which of these priorities the Government of Canada should not do, most were hesitant to single out any of them, commenting that they were all valid areas on which to focus either now or in the future. There was, however, some concern about giving municipalities the ability to further restrict or ban handguns, and strengthen measures to control the flow of illegal handguns in Canada. Some felt that current firearm laws in Canada were sufficient and that purchasing a legal handgun was already an onerous process. Some were of the opinion that the real issue is smuggling and illegal firearms, although participants had difficulty coming up with solutions to address this issue. While raised only as a minor point, there was also some concern expressed about subsidizing corporations via tax cuts to create jobs in the clean technology sector. Although there was support for actions to reduce emissions, the view was that the government should focus more directly on those corporations that are considered to be heavy emitters, specifically industries where they might have the most impact.

Overall Reaction to Four Pillars from the SFT (Smaller Centres Quebec, Lower Mainland B.C., GMA CERB Recipients, GTA CERB Recipients)

After having discussed the four pillars and the various priorities from the SFT, participants concluded that the federal government appeared to be moving in the right direction and viewed the SFT quite favourably. Many participants described the content of the government's plan as thoughtful and well-rounded, targeting a wide range of demographics and addressing issues of relevance to various groups. Indeed, some participants expressed an interest in getting more information on each of the priorities. These comments were tempered, however, by those of other participants who felt that some of the priorities had been recycled and that they had heard them in previous announcements. Still others felt that, while the intentions were good, they would prefer to withhold judgement until they saw specific actions related to each of these commitments.

There were few suggestions in response to a question as to whether the federal government had missed any significant opportunities or if there were other priorities on which it should focus, with the exception of the following:

- Giving more attention to Indigenous issues which some participants felt have been too often left-out in Canada;
- Addressing homelessness and housing, which some felt had been exacerbated by COVID-19;
- Adding dental care to the roster of healthcare benefits that are universally covered;
- Focusing on the future, and specifically long-term projects that may not be particularly popular or politically expedient, but are necessary; and
- Communicating what the government is doing day to day and month to month.

Additionally, some negative comments were made about the idea of making Canada better, as the feeling was that Canada was already a great place. And, while some agreed that making Canada

stronger was a laudable goal, they felt it would be difficult given the level of foreign ownership of major corporations in Canada and related concerns about the erosion of jobs and growth.

Government of Canada Budget Deficit (GMA CERB Recipients, GTA CERB Recipients)

Participants were asked if they had heard anything about the Government of Canada's projected budget deficit. Most had not. Those few who had knew or speculated that it would be large expressed some concerns that it would have to be paid back at some point, but also felt that the expenditures were necessary at this time.

When told that the Government of Canada was projecting a \$343 billion this year, participants reacted with concern about the dollar amount, but still thought that it was necessary to provide financial support for the individuals, families and businesses affected by COVID-19. Again, participants underscored the importance of helping people adversely affected by the pandemic, although there were worries as to whether the recovery funding had all been spent wisely and about the longer-term consequences of such a large deficit.

Moreover, based on a fuller discussion of the commitments within the SFT, most thought that the deficit would likely increase further. They did, however, also feel it would depend on the severity of a potential second wave, the requirements for additional personal protective equipment (PPE) and the demand for employment and financial assistance for those who find themselves out of work.

Appendix A – Recruiting Scripts

English Recruiting Script

**Privy Council Office
Recruiting Script – September 2020
English Groups**

Recruitment Specifications Summary

- Groups conducted online
- Each group is expected to last for two hours
- Recruit 8 participants for 6-8 to show
- Incentives will be \$90 per person and will be sent to participants via e-transfer following the group

GROUP	DATE	TIME (EST)	TIME (LOCAL)	LOCATION	COMPOSITION	MODERATOR
1	Sept. 2	7:00-9:00	5:00-7:00 CT	Saskatchewan – Regina, Saskatoon	Parents of school-age children, JK/K to Gr. 6	DN
2	Sept. 3	6:00-8:00	6:00-8:00 EST	Ontario – Mid-size centres	Parents of school-age children, Gr. 7 and up	TBW
4	Sept. 9	5:00-7:00	6:00-8:00 AT	Atlantic Canada – Halifax, St. John's, Moncton, Charlottetown	Gen Pop	DN
5	Sept. 10	8:00-10:00	6:00-8:00 MT	Alberta – Calgary, Edmonton	Seniors age 55+	TBW
6	Sept. 14	6:00-8:00	6:00-8:00 EST	Ontario –Major Centres	Parents of children age newborn-6years, pregnant women, women expecting to become pregnant with the next year	DN
8	Sept. 22	7:00-9:00	7:00-9:00 EST (NCR) 6:00-8:00 CT (Winnipeg)	National Capital Region and Winnipeg CMA	Indigenous	TBW
10	Sept. 24	8:00-10:00	5:00-7:00 PT	B.C. – Vancouver and Lower Mainland	Gen Pop	DN
12	Sept. 29	6:00-8:00	6:00-8:00 EST	Toronto-GTA CERB RECIPIENTS	CERB Recipients	DN

Specifications for the focus groups are as follows:

Recruiting Script

INTRODUCTION

Hello, my name is **[RECRUITER NAME]**. I'm calling from The Strategic Counsel, a national public opinion research firm, on behalf of the Government of Canada. / Bonjour, je m'appelle **[NOM DU RECRUTEUR]**. Je vous téléphone du Strategic Counsel, une entreprise nationale de recherche sur l'opinion publique, pour le compte du gouvernement du Canada.

Would you prefer to continue in English or French? / Préférez-vous continuer en français ou en anglais ?
[CONTINUE IN LANGUAGE OF PREFERENCE]

RECORD LANGUAGE

English **CONTINUE**
French **THANK AND END**

On behalf of the Government of Canada, we're organizing a series of online video focus group discussions to explore current issues of interest to Canadians.

The format is a "round table" discussion, led by an experienced moderator. Participants will be given a cash honorarium in appreciation of their time.

Your participation is completely voluntary and all your answers will be kept confidential. We are only interested in hearing your opinions - no attempt will be made to sell or market you anything. The report that is produced from the series of discussion groups we are holding will not contain comments that are attributed to specific individuals.

But before we invite you to attend, we need to ask you a few questions to ensure that we get a good mix/variety of people in each of the groups. May I ask you a few questions?

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

SCREENING QUESTIONS

1. Have you, or has anyone in your household, worked for any of the following types of organizations in the last 5 years?

A market research firm	THANK AND END
A marketing, branding or advertising agency	THANK AND END
A magazine or newspaper	THANK AND END
A federal/provincial/territorial government department or agency	THANK AND END
A political party	THANK AND END
In public/media relations	THANK AND END
In radio/television	THANK AND END

No, none of the above

CONTINUE

1a. **IN ALL LOCATIONS:** Are you a retired Government of Canada employee?

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

2. In which city do you reside?

LOCATION	CITIES	
Saskatchewan – Regina, Saskatoon	Regina, Saskatoon ENSURE 4 PARTICIPANTS FROM EACH CITY. PARTICIPANTS SHOULD RESIDE IN THE ABOVE-NOTED CENTERS PROPER.	CONTINUE – GROUP 1
Ontario – Mid-size centres	100,000 – 300,000 in population Cities could include (but are not limited to): Barrie, Brantford, Cambridge, Chatham-Kent, Guelph, Kingston, Kitchener, London, Sarnia, Stratford, St. Thomas, Sudbury, Waterloo, Windsor, Woodstock Not immediately adjacent to a major center ENSURE A GOOD MIX OF CITIES ACROSS THE REGION.	CONTINUE – GROUP 2
Atlantic Canada	Halifax, St. John’s, Moncton, Charlottetown ENSURE 2 PARTICIPANTS FROM EACH CITY. PARTICIPANTS SHOULD RESIDE IN THE ABOVE-NOTED CENTERS PROPER.	CONTINUE – GROUP 4
Alberta	Calgary, Edmonton ENSURE 4 PARTICIPANTS FROM EACH CITY. PARTICIPANTS SHOULD RESIDE IN THE ABOVE-NOTED CENTERS PROPER.	CONTINUE – GROUP 5
Ontario –Major Centres	Cities could include (but are not limited to): Toronto, Ottawa, Mississauga, Brampton, Hamilton ENSURE A GOOD MIX OF CITIES ACROSS THE REGION. NO MORE THAN TWO PER CITY.	CONTINUE – GROUP 6
NCR, Winnipeg CMA	National Capital Region – Ottawa, Gatineau Winnipeg CMA ENSURE 4 PARTICIPANTS FROM EACH REGION.	CONTINUE – GROUP 8
B.C. – Vancouver and Lower Mainland	Cities could include (but are not limited to): Abbotsford, Burnaby, Chilliwack, Coquitlam, Delta, Hope, Langley, Maple Ridge, Mission, New Westminster, North Vancouver, Port Coquitlam, Port Moody Richmond, Surrey, Vancouver, Whistler ENSURE A GOOD MIX OF CITIES ACROSS THE REGION. INCLUDE THOSE RESIDING IN LARGER AND SMALLER COMMUNITIES.	CONTINUE – GROUP 10
Toronto-GTA CERB RECIPIENTS	City of Toronto Durham, Halton, Peel, York, Dufferin, Simcoe Regions	CONTINUE – GROUP 12

	ENSURE A GOOD MIX OF CITIES ACROSS THE REGION.	
Other	-	THANK AND END
VOLUNTEERED Prefer not to answer	-	THANK AND END

2a. How long have you lived in [INSERT CITY]?

Less than two years	THANK AND END
Two years or more	CONTINUE
Don't know/Prefer not to answer	THANK AND END

ENSURE A GOOD MIX BY NUMBER OF YEARS IN CITY. NO MORE THAN 2 PER GROUP UNDER 5 YEARS.

3. **ASK ONLY IF GROUP 1** Do you have any children in Junior Kindergarten to Grade 6?

Yes **CONTINUE**
 No **THANK AND END**
VOLUNTEERED Prefer not to answer **THANK AND TERMINATE**

3a. **ASK ONLY IF GROUP 2** Do you have any children in Grade 7 to 12?

Yes **CONTINUE**
 No **THANK AND END**
VOLUNTEERED Prefer not to answer **THANK AND TERMINATE**

3b. **ASK ONLY IF GROUP 1 OR 2** Could you please tell me which grade these child/these children are in?

Child	Grade
1	
2	
3	
4	
5	

ENSURE A GOOD MIX BY GRADE AND NUMBER OF CHILDREN IN EACH GROUP.

4. **ASK ONLY IF GROUP 6** Do you have any children who are between the ages of newborn to 6 years old?

Yes **CONTINUE TO Q.4a – GROUP 6**
 No **SKIP TO Q.4b**
VOLUNTEERED Prefer not to answer **THANK AND TERMINATE**

4a. **ASK ONLY IF YES TO Q.4** Could you please tell me ages of these child/children?

Child	Age
1	
2	

3	
4	
5	

ENSURE A GOOD MIX BY AGE AND NUMBER OF CHILDREN IN EACH GROUP.

4b. **ASK ONLY IF NO TO Q.4** Are you currently pregnant or hoping to become pregnant within the next year?

Yes **CONTINUE – GROUP 6**

No **THANK AND END**

VOLUNTEERED Prefer not to answer **THANK AND TERMINATE**

5. **ASK ONLY IF GROUP 8** Do you identify as Indigenous (First Nations, Métis or Inuit (Inuk))?

Yes	CONTINUE
No	THANK AND END
Don't know/Prefer not to answer	

6. **ASK ONLY IF GROUP 12** Are you currently receiving the Canada Emergency Response Benefit (CERB) from the Government of Canada?

Yes **CONTINUE TO Q.6a**

No **THANK AND END**

Don't know/Prefer not to answer **THANK AND END**

6a. **ASK ONLY IF GROUP 12** When did you first apply for the Canada Emergency Response Benefit (CERB)?

April **CONTINUE**

May **CONTINUE**

June **CONTINUE**

July **CONTINUE**

August **CONTINUE**

Don't know/Prefer not to answer **CONTINUE**

7. Would you be willing to tell me in which of the following age categories you belong?

Under 18 years of age	IF POSSIBLE, ASK FOR SOMEONE OVER 18 AND REINTRODUCE. OTHERWISE THANK AND END.
18-24	IF ALBERTA = THANK AND END OTHERWISE, CONTINUE
25-34	
35-44	
45-54	
55+	IF ALBERTA = GROUP 5 ALL OTHER LOCATIONS, CONTINUE
VOLUNTEERED Prefer not to answer	THANK AND END

ENSURE A GOOD MIX OF AGES WITHIN EACH GROUP. PARENTS IN GROUP 1/2/6 WILL SKEW YOUNGER.

8. **[DO NOT ASK] Gender RECORD BY OBSERVATION.**

Male

Female

ENSURE A GOOD MIX BY GENDER IN EACH GROUP.

9. Are you familiar with the concept of a focus group?

Yes **CONTINUE**

No **EXPLAIN THE FOLLOWING** *“a focus group consists of six to eight participants and one moderator. During a two-hour session, participants are asked to discuss a wide range of issues related to the topic being examined.”*

10. As part of the focus group, you will be asked to actively participate in a conversation. Thinking of how you engage in group discussions, how would you rate yourself on a scale of 1 to 5 where 1 means ‘you tend to sit back and listen to others’ and 5 means ‘you are usually one of the first people to speak’?

1-2 **THANK AND END**

3-5 **CONTINUE**

11. As this group is being conducted online, in order to participate you will need to have high-speed Internet and a computer with a working webcam, microphone and speaker. **RECRUITER TO CONFIRM THE FOLLOWING. TERMINATE IF NO TO ANY.**

Participant has high-speed access to the Internet

Participant has a computer/webcam

12. Have you used online meeting software, such as Zoom, Webex, Microsoft Teams, Google Hangouts/Meet, etc., in the last two years?

Yes **CONTINUE**

No **CONTINUE**

13. How would skilled are you at using online meeting platforms on your own, using a scale of 1 to 5, where 1 means you are not at all skilled, and 5 means you are very skilled?

1-2 **THANK AND END**

3-5 **CONTINUE**

14. During the discussion, you could be asked to read or view materials on screen and/or participate in poll-type exercises online. You will also be asked to actively participate online using a webcam. Can you think of any reason why you may have difficulty reading the materials or participating by video?

TERMINATE IF RESPONDENT OFFERS ANY REASON SUCH AS SIGHT OR HEARING PROBLEM, A WRITTEN OR VERBAL LANGUAGE PROBLEM, A CONCERN WITH NOT BEING ABLE TO COMMUNICATE EFFECTIVELY, ANY CONCERNS WITH USING A WEBCAM OR IF YOU AS THE INTERVIEWER HAVE A CONCERN ABOUT THE PARTICIPANT’S ABILITY TO PARTICIPATE EFFECTIVELY.

15. Have you ever attended a focus group discussion, an interview or survey which was arranged in advance and for which you received a sum of money?

- Yes **CONTINUE**
No **SKIP TO Q.19**

16. How long ago was the last focus group you attended?

- Less than 6 months ago **THANK AND END**
More than 6 months ago **CONTINUE**

17. How many focus group discussions have you attended in the past 5 years?

- 0-4 groups **CONTINUE**
5 or more groups **THANK AND END**

18. And on what topics were they?

TERMINATE IF ANY ON SIMILAR/SAME TOPIC

ADDITIONAL RECRUITING CRITERIA

Now we have just a few final questions before we give you the details of the focus group, including the time and date.

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

- Grade 8 or less
Some high school
High school diploma or equivalent
Registered Apprenticeship or other trades certificate or diploma
College, CEGEP or other non-university certificate or diploma
University certificate or diploma below bachelor's level
Bachelor's degree
Post graduate degree above bachelor's level

VOLUNTEERED Prefer not to answer

ENSURE A GOOD MIX.

20. Which of the following categories best describes your total household income in 2019? That is, the total income of all persons in your household combined, before taxes?

- Under \$20,000
\$20,000 to just under \$40,000
\$40,000 to just under \$60,000
\$60,000 to just under \$80,000
\$80,000 to just under \$100,000
\$100,000 to just under \$150,000

\$150,000 and above

VOLUNTEERED Prefer not to answer

ENSURE A GOOD MIX.

21. The focus group discussion will be audio-taped and video-taped for research purposes only. The taping is conducted to assist our researchers in writing their report. Do you consent to being audio-taped and video-taped?

Yes

No **THANK AND END**

INVITATION

I would like to invite you to this online focus group discussion, which will take place the evening of **[INSERT DATE/TIME BASED ON GROUP # IN CHART ON PAGE 1]**. The group will be two hours in length and you will receive \$90 for your participation following the group via an e-transfer.

Please note that there may be observers from the Government of Canada at the group and that the discussion will be videotaped. By agreeing to participate, you have given your consent to these procedures.

Would you be willing to attend?

Yes

CONTINUE

No

THANK AND END

May I please have your full name, a telephone number that is best to reach you at as well as your e-mail address if you have one so that I can send you the details for the group?

Name:

Telephone Number:

E-mail Address:

You will receive an e-mail from **The Strategic Counsel** with the instructions to login to the online group. Should you have any issues logging into the system specifically, you can contact our technical support team at support@thestrategiccounsel.com.

We ask that you are online at least 15 minutes prior to the beginning of the session in order to ensure you are set up and to allow our support team to assist you in case you run into any technical issues.

You may be required to view some material during the course of the discussion. If you require glasses to do so, please be sure to have them handy at the time of the group. Also, you will need pen and paper in order to take some notes throughout the group.



This is a firm commitment. If you anticipate anything preventing you from attending (either home or work-related), please let me know now and we will keep your name for a future study. If for any reason you are unable to attend, please let us know as soon as possible at [1-800-xxx-xxxx] so we can find a replacement.

Thank you very much for your time.

RECRUITED BY: _____

DATE RECRUITED: _____

French Recruiting Script

**Bureau du Conseil privé
Questionnaire de recrutement — septembre 2020
Groupes en français**

Résumé des consignes de recrutement

- Groupes tenus en ligne.
- Durée prévue de chaque rencontre : deux heures.
- Recrutement de huit participants pour assurer la présence d'au moins six à huit personnes.
- Incitatifs de 90 \$ par personne, versés aux participants par transfert électronique après la rencontre.

Caractéristiques des groupes de discussion :

GROUPE	DATE	HEURE (DE L'EST)	LIEU	COMPOSITION DU GROUPE	MODÉRATEUR
3	8 septembre	18 h-20 h	Villes de taille moyenne du Québec	Aînés (55 ans et +)	M. Proulx
7	15 septembre	18 h-20 h	Francophones de Winnipeg/Saint-Boniface, du Québec, du Nouveau-Brunswick et de l'Ontario	Parents d'enfants de 6 ans ou moins, femmes enceintes, femmes qui prévoient tomber enceintes dans la prochaine année	M. Proulx
9	24 septembre	18 h-20 h	Petites villes du Québec	Population générale	M. Proulx
11	28 septembre	18 h-20 h	Région métropolitaine de Montréal	Bénéficiaires de la PCU	M. Proulx

Questionnaire de recrutement

INTRODUCTION

Hello, my name is **[RECRUITER NAME]**. I'm calling from The Strategic Counsel, a national public opinion research firm, on behalf of the Government of Canada / Bonjour, je m'appelle **[NOM DU RECRUTEUR]**. Je vous téléphone du Strategic Counsel, une entreprise nationale de recherche sur l'opinion publique, pour le compte du gouvernement du Canada.

Would you prefer to continue in English or French? / Préférez-vous continuer en français ou en anglais ?
[CONTINUER DANS LA LANGUE PRÉFÉRÉE]

NOTER LA LANGUE ET CONTINUER

Anglais **REMERCIER ET CONCLURE**

Français **CONTINUER**

Nous organisons, pour le compte du gouvernement du Canada, une série de groupes de discussion vidéo en ligne afin d'explorer des questions d'actualité qui intéressent les Canadiens.

La rencontre prendra la forme d'une table ronde animée par un modérateur expérimenté. Les participants recevront un montant d'argent en remerciement de leur temps.

Votre participation est entièrement volontaire et toutes vos réponses seront confidentielles. Nous aimerions simplement connaître vos opinions : personne n'essaiera de vous vendre quoi que ce soit ou de promouvoir des produits. Notre rapport sur cette série de groupes de discussion n'attribuera aucun commentaire à une personne en particulier.

Avant de vous inviter à participer, je dois vous poser quelques questions qui nous permettront de former des groupes suffisamment diversifiés. Puis-je vous poser quelques questions ?

Oui **CONTINUER**

Non **REMERCIER ET CONCLURE**

QUESTIONS DE SÉLECTION

1. Est-ce que vous ou une personne de votre ménage avez travaillé pour l'un des types d'organisations suivants au cours des cinq dernières années ?

Une société d'études de marché

REMERCIER ET CONCLURE

Une agence de commercialisation, de marque ou de publicité

REMERCIER ET CONCLURE

Un magazine ou un journal

REMERCIER ET CONCLURE

Un ministère ou un organisme gouvernemental fédéral, provincial ou territorial

REMERCIER ET CONCLURE

Un parti politique

REMERCIER ET CONCLURE

Dans les relations publiques ou les relations avec les médias

REMERCIER ET CONCLURE

Dans le milieu de la radio ou de la télévision

REMERCIER ET CONCLURE

Non, aucune de ces réponses

CONTINUER

1a. **POUR TOUS LES LIEUX** : Êtes-vous un ou une employé(e) retraité(e) du gouvernement du Canada ?

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

2. Quelle langue parlez-vous le plus souvent à la maison ?

Anglais **REMERCIER ET CONCLURE**

Français **CONTINUER**

Autre [Préciser ou non la langue, selon les besoins de l'étude] **REMERCIER ET CONCLURE**

Préfère ne pas répondre **REMERCIER ET CONCLURE**

3. Dans quelle ville habitez-vous ?

LIEU	VILLES	
Villes de taille moyenne du Québec	100 000 à 300 000 habitants (comme les régions métropolitaines de recensement de Montréal ou de Québec) ASSURER UNE BONNE REPRÉSENTATION DES VILLES DANS CHAQUE LIEU.	CONTINUER – GROUPE 3
Francophones de Winnipeg/Saint-Boniface, du Québec, du Nouveau-Brunswick et de l'Ontario	Winnipeg/Saint-Boniface, Québec, Nouveau-Brunswick, Ontario ASSURER UNE BONNE REPRÉSENTATION DES VILLES DANS CHAQUE LIEU. MAXIMUM DE DEUX PARTICIPANTS PAR PROVINCE	CONTINUER – GROUPE 7
Petites villes du Québec	25 000 à 100 000 habitants (comme les régions métropolitaines de recensement de Montréal ou de Québec) ASSURER UNE BONNE REPRÉSENTATION DES VILLES DANS CHAQUE LIEU.	CONTINUER – GROUPE 9
Région métropolitaine de Montréal	Montréal, Laval, Longueuil, Terrebonne, Brossard, Repentigny, Saint-Jérôme, Blainville, Mirabel, Dollard-des-Ormeaux ASSURER UNE BONNE REPRÉSENTATION DES VILLES DANS CHAQUE LIEU.	CONTINUER – GROUPE 11
Autre lieu	-	REMERCIER ET CONCLURE

RÉPONSE SPONTANÉE Préfère ne pas répondre	-	REMERCIER ET CONCLURE
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3a. Depuis combien de temps habitez-vous à [INSÉRER LE NOM DE LA VILLE]?

Moins de deux ans	REMERCIER ET CONCLURE
Deux ans ou plus	CONTINUER
Ne sais pas/Préfère ne pas répondre	REMERCIER ET CONCLURE

ASSURER UNE BONNE REPRÉSENTATION EN FONCTION DU NOMBRE D'ANNÉES DE RÉSIDENCE DANS LA VILLE. PAS PLUS DE DEUX PAR GROUPE DOIVENT Y VIVRE DEPUIS MOINS DE 5 ANS.

4. **DEMANDER SEULEMENT POUR LE GROUPE 7** Avez-vous des enfants de 6 ans ou moins ?

Oui **CONTINUER À Q.4a – GROUPE 7**

Non **PASSER À LA Q.4b**

RÉPONSE SPONTANÉE Préfère ne pas répondre **REMERCIER ET CONCLURE**

4a. **DEMANDER SEULEMENT SI OUI À LA Q.4** Pouvez-vous me dire dans quel groupe d'âge se situe(nt) cet enfant/ces enfants ?

Enfant	Âge
1	
2	
3	
4	
5	

ASSURER UN BON MÉLANGE EN FONCTION DE L'ÂGE DES ENFANTS ET DU NOMBRE D'ENFANTS DANS CHAQUE GROUPE.

4b. **DEMANDER SEULEMENT SI NON À LA Q.4** Êtes-vous enceinte ou espérez-vous tomber enceinte dans la prochaine année ?

Oui **CONTINUER – GROUPE 7**

Non **REMERCIER ET CONCLURE**

RÉPONSE SPONTANÉE Préfère ne pas répondre **REMERCIER ET CONCLURE**

5. **DEMANDER SEULEMENT POUR LE GROUPE 11** Recevez-vous actuellement la Prestation canadienne d'urgence (PCU) du gouvernement du Canada ?

Oui **CONTINUER**

Non **REMERCIER ET CONCLURE**

Ne sais pas/Préfère ne pas répondre **REMERCIER ET CONCLURE**

5a. **DEMANDER SEULEMENT POUR LE GROUPE 11** Quand avez-vous fait votre première demande de Prestation canadienne d'urgence (PCU) ?

- En avril **CONTINUER**
- En mai **CONTINUER**
- En juin **CONTINUER**
- En juillet **CONTINUER**
- En août **CONTINUER**
- Ne sais pas/Préfère ne pas répondre **CONTINUER**

6. Seriez-vous prêt/prête à m'indiquer votre tranche d'âge dans la liste suivante ?

Moins de 18 ans	SI POSSIBLE, DEMANDER À PARLER À UNE PERSONNE DE 18 ANS OU PLUS ET REFAIRE L'INTRODUCTION. SINON, REMERCIER ET CONCLURE.
18 à 24	+ VILLES DE TAILLE MOYENNE DU QUÉBEC = REMERCIER ET CONCLURE SINON, CONTINUER
25 à 34	
35 à 44	
45 à 54	
55 ans ou plus	+ VILLES DE TAILLE MOYENNE DU QUÉBEC =GROUPE 3 TOUS LES AUTRES LIEUX, CONTINUER
RÉPONSE SPONTANÉE Préfère ne pas répondre	REMERCIER ET CONCLURE

ASSURER UNE BONNE REPRÉSENTATION DES ÂGES DANS CHAQUE GROUPE. LES GROUPES DE PARENTS (GROUPE 7) AURONT TENDANCE À ÊTRE PLUS JEUNES.

7. **[NE PAS DEMANDER]** Sexe **NOTER SELON VOTRE OBSERVATION.**

- Homme
- Femme

ASSURER UNE PROPORTION ÉGALE D'HOMMES ET DE FEMMES DANS CHAQUE GROUPE.

8. En ce qui concerne votre patrimoine ethnique et culturel, vous définissez-vous comme ...? Choisissez toutes les réponses pertinentes.

Européen, Européenne de l'Ouest (R.-U., Espagne, Portugal, France, Allemagne, Autriche, Suisse, etc.)	CONTINUER ASSURER UN BON MÉLANGE SUR LE PLAN ETHNIQUE.
Européen, Européenne de l'Est (Pologne, Hongrie, Roumanie, Ukraine, Russie, etc.)	
Africain, Africaine	
D'origine moyen-orientale (Israël, Syrie, Jordanie, Égypte, Iran, Irak, etc.)	
Asiatique du Sud (Inde, Afghanistan, Pakistan, Sri Lanka, etc.)	

Asiatique du Sud-Est (Thaïlande, Vietnam, Singapour, Philippines, Indonésie, Cambodge, etc.)	
Asiatique de l'Est (Chine, Corée, Japon, Taiwan, etc.)	
Sud-Américain, Sud-Américaine; Centraméricain, Centraméricaine; Latino-Américain, Latino-Américaine	
Antillais, Antillaise (Caraïbes)	
Autre ; veuillez préciser : _____	
Préfère ne pas répondre	REMERCIER ET CONCLURE

9. Est-ce que vous connaissez le concept du « groupe de discussion » ?

Oui **CONTINUER**

Non **EXPLIQUER QUE** : « *un groupe de discussion se compose de six à huit participants et d'un modérateur. Au cours d'une période de deux heures, les participants sont invités à discuter d'un éventail de questions reliées au sujet abordé* ».

10. Dans le cadre du groupe de discussion, on vous demandera de participer activement à une conversation. En pensant à la manière dont vous interagissez lors de discussions en groupe, quelle note vous donneriez-vous sur une échelle de 1 à 5 si 1 signifie « j'ai tendance à ne pas intervenir et à écouter les autres parler » et 5, « je suis habituellement une des premières personnes à parler » ?

1-2 **REMERCIER ET CONCLURE**

3-5 **CONTINUER**

11. Étant donné que ce groupe se réunira en ligne, vous aurez besoin, pour participer, d'un accès Internet haut débit et d'un ordinateur muni d'une caméra Web, d'un microphone et d'un haut-parleur en bon état de marche. **CONFIRMER LES POINTS CI-DESSOUS. METTRE FIN À L'APPEL SI NON À L'UN DES TROIS.**

Le participant a accès à Internet haut débit

Le participant a un ordinateur avec caméra Web

12. Avez-vous utilisé des logiciels de réunion en ligne tels que Zoom, Webex, Microsoft Teams, Google Hangouts/Meet, etc., au cours des deux dernières années ?

Oui **CONTINUER**

Non **CONTINUER**

13. Sur une échelle de 1 à 5 où 1 signifie que vous n'êtes pas du tout habile et 5 que vous êtes très habile, comment évaluez-vous votre capacité à utiliser seul(e) les plateformes de réunion en ligne ?

1-2 **REMERCIER ET CONCLURE**

3-5 **CONTINUER**

14. Au cours de la discussion, vous pourriez devoir lire ou visionner du matériel affiché à l'écran, ou faire des exercices en ligne comme ceux qu'on trouve dans les sondages. On vous demandera aussi de participer activement à la discussion en ligne à l'aide d'une caméra Web. Pensez-vous avoir de la difficulté, pour une raison ou une autre, à lire les documents ou à participer à la discussion par vidéo ?

CONCLURE L'ENTRETIEN SI LE RÉPONDANT SIGNALE UN PROBLÈME DE VISION OU D'AUDITION, UN

PROBLÈME DE LANGUE PARLÉE OU ÉCRITE, S'IL CRAINT DE NE POUVOIR COMMUNIQUER EFFICACEMENT, SI L'UTILISATION D'UNE CAMÉRA WEB LUI POSE PROBLÈME, OU SI VOUS, EN TANT QU'INTERVIEWEUR, AVEZ DES DOUTES QUANT À SA CAPACITÉ DE PARTICIPER EFFICACEMENT AUX DISCUSSIONS.

15. Avez-vous déjà participé à un groupe de discussion, à une entrevue ou à un sondage organisé à l'avance en contrepartie d'une somme d'argent ?

Oui **CONTINUER**
Non **PASSER À LA Q.19**

16. À quand remonte le dernier groupe de discussion auquel vous avez participé ?

À moins de six mois, **REMERCIER ET CONCLURE**
À plus de six mois, **CONTINUER**

17. À combien de groupes de discussion avez-vous participé au cours des cinq dernières années ?

0 à 4 groupes, **CONTINUER**
5 groupes ou plus **REMERCIER ET CONCLURE**

18. Et sur quels sujets portaient-ils ?

METTRE FIN À L'ENTRETIEN SI LES SUJETS ÉTAIENT LES MÊMES OU SEMBLABLES

CRITÈRES DE RECRUTEMENT SUPPLÉMENTAIRES

Il me reste quelques dernières questions avant de vous donner les détails du groupe de discussion, comme l'heure et la date.

19. Quel est le niveau de scolarité le plus élevé que vous avez atteint ?

École primaire
Études secondaires partielles
Diplôme d'études secondaires ou l'équivalent
Certificat ou diplôme d'apprenti inscrit ou d'une école de métiers
Certificat ou diplôme d'un collège, cégep ou autre établissement non universitaire
Certificat ou diplôme universitaire inférieur au baccalauréat
Baccalauréat
Diplôme d'études supérieur au baccalauréat
RÉPONSE SPONTANÉE : Préfère ne pas répondre
ASSURER UN BON MÉLANGE.

20. Laquelle des catégories suivantes décrit le mieux le revenu annuel total de votre ménage en 2019— c'est-à-dire le revenu cumulatif de l'ensemble des membres de votre ménage avant impôt ?

Moins de 20 000 \$

20 000 \$ à moins de 40 000 \$
40 000 \$ à moins de 60 000 \$
60 000 \$ à moins de 80 000 \$
80 000 \$ à moins de 100 000 \$
100 000 \$ à moins de 150 000 \$
150 000 \$ ou plus

RÉPONSE SPONTANÉE : Préfère ne pas répondre

ASSURER UN BON MÉLANGE.

21. La discussion sera enregistrée sur bandes audio et vidéo, strictement aux fins de la recherche. Les enregistrements aideront nos chercheurs à rédiger leur rapport. Est-ce que vous consentez à ce qu'on vous enregistre sur bandes audio et vidéo ?

Oui

Non **REMERCIER ET CONCLURE**

INVITATION

J'aimerais vous inviter à ce groupe de discussion en ligne, qui aura lieu le **[DONNER LA DATE ET L'HEURE EN FONCTION DU N° DE GROUPE INDIQUÉ DANS LE TABLEAU, PAGE 1]**. La discussion durera deux heures et vous recevrez 90 \$ pour votre participation. Ce montant vous sera envoyé par transfert électronique après la tenue du groupe de discussion.

Veillez noter que des observateurs du gouvernement du Canada pourraient être présents au groupe et que la discussion sera enregistrée sur bande vidéo. En acceptant de participer, vous donnez votre consentement à ces modalités.

Est-ce que vous accepteriez de participer ?

Oui **CONTINUER**

Non **REMERCIER ET CONCLURE**

Puis-je avoir votre nom complet, le numéro de téléphone où vous êtes le plus facile à joindre et votre adresse électronique, si vous en avez une, pour vous envoyer les détails au sujet du groupe ?

Nom :

Numéro de téléphone :

Adresse courriel :

Vous recevrez un courrier électronique du **Strategic Counsel** expliquant comment rejoindre le groupe en ligne. Si la connexion au système vous pose des difficultés, veuillez en aviser notre équipe de soutien technique à : support@thestrategiccounsel.com.

Nous vous prions de vous mettre en ligne au moins 15 minutes avant l'heure prévue, afin d'avoir le temps de vous installer et d'obtenir l'aide de notre équipe de soutien en cas de problèmes techniques.

Vous pourriez devoir lire des documents au cours de la discussion. Si vous utilisez des lunettes, assurez-vous de les avoir à portée de main durant la rencontre. Vous aurez également besoin d'un stylo et de papier pour prendre des notes.

Ce rendez-vous est un engagement ferme. Si vous pensez ne pas pouvoir participer pour des raisons personnelles ou professionnelles, veuillez m'en aviser dès maintenant et nous conserverons votre nom pour une étude ultérieure. Enfin, si jamais vous n'êtes pas en mesure de participer, veuillez nous prévenir le plus rapidement possible au [1-800-xxx-xxxx] pour que nous puissions trouver quelqu'un pour vous remplacer.

Merci de votre temps.

RECRUTEMENT FAIT PAR : _____

DATE DU RECRUTEMENT : _____

Appendix B – Discussion Guides

English Moderators Guide

MODERATOR'S GUIDE – September 2020 MASTER

INTRODUCTION (10 minutes) All Locations

- Moderator or technician should let participants know that they will need pen and paper in order to take some notes, jot down some thoughts around some material that we will show them later in the discussion.

COVID-19 IN THE NEWS (5-15 minutes) Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents, Mid-size Centres Quebec Seniors

- What have you heard about COVID-19 in the last few days?
- **Mid-size Centres Ontario Parents** Have you seen, read or heard anything about the Government of Canada's recent announcement regarding the launch of a new COVID Alert app?
 - IF AWARE: Based on what you know, how does it work?

Mid-size Centres Ontario Parents CLARIFY

The Government of Canada is launching the COVID Alert app that lets people know if someone they have come in contact with has tested positive for COVID-19, so that they can then go get tested. Several provinces have similar apps.

- **Mid-size Centres Ontario Parents** Do you think you'll download the COVID Alert app? What makes you say that?
- Have you heard anything about the Canada Emergency Response Benefit (CERB) recently?
 - PROMPT AS NECESSARY: Have you heard anything about transitioning from CERB to the Employment Insurance (EI) system?
 - Have you heard anything about eligibility requirements or the minimum amount of money EI recipients will receive per week, or anything like that? What have you heard?
 - Have you heard anything about any new benefits? What have you heard?

GOVERNMENT OF CANADA IN THE NEWS (5-20 minutes) Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors, Major Centres Ontario Parents, Major

Francophone Centres Parents, Winnipeg and NCR Indigenous Peoples, Smaller Centres Quebec, Lower Mainland, GMA CERB RECIPIENTS CERB Recipients, GTA CERB RECIPIENTS CERB Recipients

- What have seen, read or heard about the Government of Canada in the last few days?
- Winnipeg and NCR Indigenous Peoples, Smaller Centres Quebec, Lower Mainland, GMA CERB RECIPIENTS, GTA CERB RECIPIENTS Have you heard about what the Government of Canada is doing regarding the current COVID-19 pandemic?
- GMA CERB RECIPIENTS, GTA CERB RECIPIENTS Have you heard anything about COVID-19 testing in your community? What have you heard?
 - PROMPT AS NEEDED:
 - What about the number of testing sites, or capacity – are there enough?
 - Have you heard or know anything about long wait times for tests or for test results?
- GMA CERB RECIPIENTS, GTA CERB RECIPIENTS Does anything need to be done about testing capacity? What needs to be done?
 - Is there anything the Government of Canada can do to address this?

CURRENT COVID-19 SITUATION (5 minutes) Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors

- And now thinking about COVID-19 in Canada currently, how do you feel about it?
 - Do you think the spread is under control in Canada?
 - How about locally – do you think it’s under control in your region?

BEHAVIOUR (20-30 minutes) Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents, Mid-size Centres Quebec Seniors, Major Centres Ontario Parents, Major Francophone Centres Parents, Winnipeg and NCR Indigenous Peoples, Smaller Centres Quebec, Lower Mainland, GMA CERB RECIPIENTS, GTA CERB RECIPIENTS

- Major Centres Ontario Parents, Major Francophone Centres Parents Now I’d like to talk about COVID-19...
- Have you changed your behaviour in the last few weeks?
 - Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents, Mid-size Centres Quebec Seniors, Major Centres Ontario Parents, Major Francophone Centres Parents What have you done? (*Probe for going to stores or restaurants (not just grocery), visit people more, run more errands, use public transit, etc.*)
 - Winnipeg and NCR Indigenous Peoples, Smaller Centres Quebec, Lower Mainland, GMA CERB RECIPIENTS, GTA CERB RECIPIENTS What have you done? (*Probe for whether or not*

things have changed with children going back to school, or given the increase in cases in Canada).

- If yes: why are you doing these things more?
 - If no: why haven't you changed your behaviour?
- **Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents** Imagine you were speaking to a friend or relative who does not have any children.
 - What would you tell them about the experience of being a parent during the COVID-19 pandemic?
 - **Major Centres Ontario Parents, Major Francophone Centres Parents** Imagine you were speaking to a friend or relative who does not have any children nor any plans to have children in the near future.
 - For those of you who are parents: what would you tell them about the experience of being a parent during the COVID-19 pandemic?
 - For those of you who are expecting: what would you tell them about the experience of being pregnant during the COVID-19 pandemic?
 - For those of you who are planning on having a baby in the near future: what would you tell them about how, if at all, the pandemic impacted your plans?
 - **Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents** What three words best describe being a parent during the COVID-19 pandemic? Please elaborate.
 - **Major Centres Ontario Parents, Major Francophone Centres Parents** What three words best describe being a parent during the COVID-19 pandemic? Please elaborate. For those of you without kids: what 3 words best describe being pregnant or planning to become pregnant soon?
 - **Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents** Has your relationship with your child/children changed since the start of the COVID-19 pandemic?
 - If so, what has changed?
 - **Major Centres Ontario Parents, Major Francophone Centres Parents** For those of you with young children: has your relationship with your child/children changed since the start of the COVID-19 pandemic?
 - If so, what has changed?
 - **Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents, Major Centres Ontario Parents, Major Francophone Centres Parents** Have your kids changed their behaviour in the last few weeks?
 - What have they done? (*Probe for starting to go out more, have friends over, visit friends, etc.*)
 - **Mid-size Centres Quebec Seniors** Imagine you were speaking to a friend or relative who was in their twenties. What would you tell them about your experience living through the COVID-19 pandemic?

- **Mid-size Centres Quebec Seniors** During the COVID-19 pandemic, Canadians over the age of 55 have been called a particularly “vulnerable” population.
 - Does that label resonate with you? Why or why not?
- **Mid-size Centres Quebec Seniors** Thinking about how your behaviour and habits have or haven’t changed because of COVID-19:
 - What has been most challenging for you?
 - What has been easier than you expected?
- **GMA CERB RECIPIENTS, GTA CERB RECIPIENTS** What about your spending habits - have these changed over the course of the pandemic? How so?
- **GMA CERB RECIPIENTS, GTA CERB RECIPIENTS** And when you think of your various expenses, has the pandemic impacted your day-to-day cost of living?
- **Winnipeg and NCR Indigenous Peoples, Smaller Centres Quebec, Lower Mainland, GMA CERB RECIPIENTS, GTA CERB RECIPIENTS** Do you think we’re currently experiencing a second wave, do you think a second wave is coming, or do you think there won’t be a second wave?
- **Winnipeg and NCR Indigenous Peoples, Smaller Centres Quebec, Lower Mainland, GMA CERB RECIPIENTS, GTA CERB RECIPIENTS** Do you think we’re prepared to handle a second wave? What makes you say that?
- **Winnipeg and NCR Indigenous Peoples, Smaller Centres Quebec, Lower Mainland, GMA CERB RECIPIENTS, GTA CERB RECIPIENTS** What do you expect to happen as we go through the fall?
 - For those of you who feel we’re currently experiencing a second wave or that it’s coming, do you think that it will be better, worse or about the same as the spring?
 - Do you think restrictions will be reinstated? Why/why not?
 - If yes: to what extent?
 - Under what conditions do you think restrictions should be reinstated? And, what should those restrictions be?
- **Winnipeg and NCR Indigenous Peoples, Smaller Centres Quebec, Lower Mainland, GMA CERB RECIPIENTS, GTA CERB RECIPIENTS** And as we go through the fall, are you concerned about impacts on you, your families, your community, business due to COVID? How so?
 - Do you have any concerns about mental health impacts for those in your social circles or your community?

EI/RECOVERY BENEFITS (20 minutes) **Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents**

SHOW ON SCREEN:

The Government of Canada recently announced that it will be transitioning to a simplified Employment Insurance (EI) program. Originally the CERB was ending at the end of August, but it has been extended another four weeks. As of September 27, 2020:

New EI claimants will receive a minimum benefit rate of \$400 per week. Anyone eligible for EI will need to have worked 120 hours to qualify, well below current EI requirements - since many Canadians have been unable to work due to the pandemic and accumulate the required number of hours.

The Government of Canada also announced a suite of three new recovery benefits:

1. The new **Canada Recovery Benefit** would provide a benefit amount of \$400 per week for workers who are not eligible for EI - mainly the self-employed and including those working in the gig economy (e.g. freelancers, consultants, independent contractors, temporary contract workers, etc.)
 2. The new **Canada Recovery Caregiving Benefit**, would provide \$500 per week to anyone who is unable to work because they need to provide care to children or support to other dependents who had to stay home (e.g. they had to stop work because their child's school or daycare closed because of COVID-19).
 3. The new **Canada Recovery Sickness Benefit** would provide \$500 per week for up to two weeks for those who don't have paid sick leave and become sick or must self-isolate due to reasons linked to COVID-19.
- What do you think about this approach? Do the minimum benefit rate and the eligibility requirements make sense? Why/why not?
 - Now, thinking about transitioning individuals from the CERB to this new system, what do you think is the most important consideration: SHOW 3 BULLET POINTS ON SCREEN
 - Ensuring that there is no delay between payments from when CERB ends to when the new system starts
 - Ensuring that everyone who gets CERB also qualifies for EI or the new benefits
 - Trying to reduce the amount paid and the number of people who qualify in order to reduce the deficit
 - How long do you think the benefits for people who can't work due to COVID-19 or because they need to care for others will need to be in place?

CLARIFY AS NECESSARY

The simplified EI system and the new recovery benefits will be in place for one year, and will provide a minimum entitlement of 26 weeks of regular benefits (aside from the Canada Recovery Sickness Benefit - which is for up to 2 weeks).

- Do you think keeping these in place for a year seems reasonable? Why/why not?

CERB TO EI (40 minutes) GMA CERB Recipients, GTA CERB Recipients

- Have you seen, read or heard anything recently about the Canada Emergency Response Benefit (CERB) or Employment Insurance (EI)? What did you hear?

SHOW ON SCREEN:

The Government of Canada recently announced that it will be transitioning to a simplified Employment Insurance (EI) program. Originally the CERB was ending at the end of August, but it was extended another four weeks and ended this past weekend.

As a follow-up to the Government of Canada's Speech from the Throne, last Thursday the Government of Canada announced that it would boost the proposed weekly payout for unemployed Canadians transitioning to the CERB to EI to \$500 a week, up from the originally announced \$400. Anyone eligible for EI will need to have worked 120 hours to qualify, well below current EI requirements - since many Canadians have been unable to work due to the pandemic and accumulate the required number of hours.

The Government of Canada also announced a suite of three new recovery benefits:

1. The new **Canada Recovery Benefit** would provide a benefit amount of \$500 per week for workers who are not eligible for EI - mainly the self-employed and including those working in the gig economy (e.g. freelancers, consultants, independent contractors, temporary contract workers, etc.)
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 3. The new **Canada Recovery Sickness Benefit** would provide \$500 per week for up to two weeks for those who don't have paid sick leave and become sick or must self-isolate due to reasons linked to COVID-19.
- What do you think about this approach? Do the minimum benefit rate and the eligibility requirements make sense? Why/why not?

- How long do you think the benefits for people who can't work due to COVID-19 or because they need to care for others will need to be in place?

CLARIFY AS NECESSARY

The simplified EI system and the new recovery benefits will be in place for one year, and will provide a minimum entitlement of 26 weeks of regular benefits (aside from the Canada Recovery Sickness Benefit - which is for up to 2 weeks).

- Do you think keeping these in place for a year seems reasonable? Why/why not?
- Do you have any concerns regarding the transfer of the CERB to EI?
 - Do you know how the transfer works?
 - AS NECESSARY: does it apply to you? Do you need to apply?
- Do you think that this approach is leaving anyone out? Why/why not?

Under the previous system, EI payments were taxable income, meaning federal and provincial or territorial taxes, where applicable, are deducted when you receive them.

- Do you think that applies for the simplified EI system and the new recovery benefits? i.e., are these taxable?
- Would you have any concerns about it come tax time in the spring?

ECONOMY (20 minutes) Major Centres Atlantic Canada, Major Centres Alberta Seniors, Major Centres Ontario Parents, Major Francophone Centres Parents

- I'd now like to talk about the economy for a bit.
- As Canada's economy has restarted, have you heard about anything the Government of Canada is doing to help with economic recovery? What have you heard? (MOVE QUICKLY THROUGH THIS QUESTION) I'm now going to show you a few different phrases to describe what the goals of Canada's economic recovery could be. I'd like you to read it individually and then we'll discuss. SHOW OPTIONS ON SCREEN.
 - We need a green new deal
 - We need a green recovery
 - We need a more resilient country
 - We need to build back better

POLL: I'm going to show you a poll. I'd like you to select which of these best summarizes what you want from Canada's economic recovery (participants to select 1 ONLY). Now let's go through each of these phrases...

- What does "We need a green new deal" mean to you?
 - For those who selected it: why did you select this one? What do you like about it?
 - For those who didn't select it: why didn't you select this one? What do you dislike about it?

- What does "We need a green recovery" mean to you?
 - For those who selected it: why did you select this one? What do you like about it?
 - For those who didn't select it: why didn't you select this one? What do you dislike about it?

- What does "We need a more resilient country" mean to you?
 - For those who selected it: why did you select this one? What do you like about it?
 - For those who didn't select it: why didn't you select this one? What do you dislike about it?

- What does "We need to build back better" mean to you?
 - For those who selected it: why did you select this one? What do you like about it?
 - For those who didn't select it: why didn't you select this one? What do you dislike about it?

SEASONAL FLU CONCEPT TESTING (30 minutes) Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors, Major Centres Ontario Parents, Major Francophone Centres Parents

- Mid-size Centres Quebec Seniors, Major Centres Alberta Seniors I'm going to show you 2 sets of banner images that are currently being developed by the Government of Canada for possible advertising. Each set has 3 animated banners, meaning that they will rotate from one frame to the next.

- Major Centres Atlantic Canada, Major Centres Ontario Parents, Major Francophone Centres Parents Today, as part of the discussion, we're going to look at some concepts for a couple of different advertising campaigns. For the first one, I'm going to show you 2 banner images that are currently being developed by the Government of Canada for possible advertising.

Seniors Concepts:

Mid-size Centres Quebec Seniors Order: 1, 2

Major Centres Alberta Seniors Order: 2, 1

Young Adults Concepts:

Major Centres Atlantic Canada Order: 2, 1

Parents/Pregnant Concepts:

Major Centres Ontario Parents Order: 1, 2

Major Francophone Centres Parents Order: 2, 1

SHOW BANNER AD 1 ON SCREEN:

- What do you think of this banner?
- What did you like most? What did you like least?
- What is the main message?
- What do you think about the fact that the people are wearing masks? Is this relevant? Confusing? Why do you say that?
- Who is this ad aimed at? Why do you say that? What do you think specifically of the statements? Are they clear or confusing?
- Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors What about “I got the flu shot this year, did you?” Does it work in the context of this ad? What does it mean to you?
- Major Centres Ontario Parents, Major Francophone Centres Parents What about “We got the flu shot this year. Did you?” Does it work in the context of this ad? What does it mean to you?
- Would they stand out to you if you saw this online? Would you be persuaded to look for more information?
- Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors If you saw this ad, would you be motivated to take action, such as getting a flu shot/finding out where you can get a flu shot/learning more about the flu shot?
- Major Centres Ontario Parents, Major Francophone Centres Parents If you saw this ad, would you be motivated to take action, such as getting a flu shot/finding out where you can get a flu shot/learning more about the flu shot, for yourself/your family?

SHOW BANNER AD 2 ON SCREEN:

- What do you think of this banner?
- What did you like most? What did you like least?
- What is the main message?
- Who is this ad aimed at? Why do you say that? What do you think specifically of the statements? Are they clear or confusing?
- Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors What about “Make a plan today to get your flu shot.”? Does it work in the context of this ad? What does it mean to you?

- **Major Centres Ontario Parents, Major Francophone Centres Parents** What about “Make a plan today for your family to get the flu shot.”? Does it work in the context of this ad? What does it mean to you?
- Would they stand out to you if you saw this online? Would you be persuaded to look for more information?
- **Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors** If you saw this ad, would you be motivated to take action, such as getting a flu shot/finding out where you can get a flu shot/learning more about the flu shot?
- **Major Centres Ontario Parents, Major Francophone Centres Parents** If you saw this ad, would you be motivated to take action, such as getting a flu shot/finding out where you can get a flu shot/learning more about the flu shot, for yourself/your family?

WRAP UP

- **POLL** Which banner do you feel would be most effective to encourage Canadians/you to get their/your flu shot?

Parents/Pregnant Concepts:

Major Centres Atlantic Canada Order: 2, 1

- **Major Centres Atlantic Canada** There may be a series of these banner ads. I’m going to show you an alternate version of each of the concepts you just saw.

Major Centres Atlantic Canada SHOW BANNER AD 1 ON SCREEN:

- What do you think of this banner?
- Who is this ad aimed at - the same target audience as the first version you saw or a different one?
- Do you have any other comments about this banner?

Major Centres Atlantic Canada SHOW BANNER AD 2 ON SCREEN:

- What do you think of this banner?
- Who is this ad aimed at - the same target audience as the first version you saw or a different one?
- Do you have any other comments about this banner?

Accompanying Statement

- **Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors, Major Centres Ontario Parents, Major Francophone Centres Parents** I’m going to show you an example of a statement that could accompany these ads or other communications about the flu shot.

Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors
Major Centres Ontario Parents, Major Francophone Centres Parents

SHOW STATEMENT ON SCREEN:
This fall, we're protecting ourselves, our communities, and our healthcare system from the flu. Let's keep everyone safe.

- Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors
Major Centres Ontario Parents, Major Francophone Centres Parents What do you think of a statement like that? Do you think it works well with the ads you saw? Do you think it helps in terms of motivating you to take action?

CHILDHOOD VACCINATION CONCEPT TESTING (30 minutes) Major Centres Ontario Parents, Major Francophone Centres Parents

We are now going to review some concepts for a different campaign being developed by the Government of Canada for possible advertising.

Major Centres Ontario Parents Order: 1, 2
Major Francophone Centres Parents Order 2, 1

SHOW VIDEO 1

- What do you think of these ads?
- What did you like most? What did you like least?
- What is the main message?
- What does it suggest about vaccination? Probe if not mentioned: safe; effective; important
- Who is this ad aimed at? Why do you say that? What do you think specifically of the statements? Are they clear or confusing? Are they believable?
- Would they stand out to you if you saw this on TV or online?
- What, if anything, would you personally do after seeing this video?
 - To what extent does this concept make you want to find out more about childhood vaccination?
 - Where would you go for that information?
 - Would you share this video with your networks on social media? Why/why not?
- Is anything unclear or problematic?
 - You may have noticed that the mother and nurse in the vaccination scene are not wearing any masks, do you feel they should be?
- I'd like your opinion on an alternative version of this ad....

SHOW VIDEO 2

- What are your thoughts on this one?

COMPARISON

- **POLL** Which ad do you feel would be most effective to encourage parents/you to find out more about childhood vaccination? MODERATOR TO READ RESULTS OF POLL.

SCHOOLS (40 minutes) Major Centres Saskatchewan Parents, Mid-size Centres Ontario Parents

- What have you heard about back to school plans in your community?

Major Centres Saskatchewan Parents CLARIFY AS NECESSARY

The Saskatchewan Government has provided its Safe School Plan for students and staff to return to in-person class instruction. The plan includes components such as self-screening measures, assigned seating on school buses, protocols to ensure students can safely access and move throughout school facilities, increased sanitation measures, measures to reduce the risk of transmission in the classroom, supports for intensive needs and immune-compromised students, measures to reduce physical contact, and a set of 4 scenarios that may be activated based on the advice of the Chief Medical Health Officer.

Mid-size Centres Ontario Parents CLARIFY AS NECESSARY

The Ontario Government has said that elementary schools will be equipped to reopen with increased health and safety standards, and that students will attend school 5 days a week. Most high schools will be a combination of in-school and remote learning days, with students attending class in-person at least 50% of instructional days. In-person school attendance is optional for the 2020-2021 school year so that parents can make decisions that work for their children and family. School boards will offer remote learning for all students who choose this option.

[NOTE FOR MODERATOR: FOR SECONDARY IV AND V, SCHOOL SERVICE CENTRES AND SCHOOL BOARDS (ENGLISH SECTOR AND THOSE WITH A SPECIAL STATUS) MAY OPT FOR AN ALTERNATIVE SOLUTION IF THE COURSE SCHEDULE CANNOT BE REORGANIZED TO MAINTAIN STABLE GROUPS]

- **Mid-size Centres Ontario Parents** Are you planning to send your kids to school in person? Why/why not?
- Are you worried about sending your kids to school in person?
 - IF YES: what kinds of things are you worried about?
 - PROMPT AS NECESSARY: Your kids' health? Your kids passing COVID on to you or other family members? Something else?
- What do you think is most needed in order to make things safer in schools?

- PROBE: Do schools need more space so kids can be spaced more? Do they need to hire more teachers so that class sizes are smaller? Hire more cleaning staff? Something else?
- Have you heard of anything the Government of Canada has done or announced recently to help make schools safer?
 - IF YES: What have you heard?
- The Government of Canada announced that it is giving \$2 billion more to provinces and territories to help them ensure kids can safely go back to school. Did anyone hear about this?
 - What do think of this? Do you think it will help?
- Is there anything else you think the Government of Canada could do to help provinces and territories ensure kids can safely go back to school?

OPIOIDS (15 minutes) Major Centres Saskatchewan Parents

Now I'd like to talk about a completely different topic...

- Have you heard anything about opioids recently? What have you heard?
- Do you think there is an opioid crisis in Canada? Why/why not?
 - IF YES: What are the reasons for this crisis? Who do you see as responsible for this becoming a crisis?

CLARIFY AS NECESSARY:

Opioids such as fentanyl, morphine, oxycodone and hydromorphone are medications that can help relieve pain.

Opioids are drugs that affect your mind, mood, and mental processes and can also cause euphoria, or the feeling of being "high." This creates the potential for them to be used improperly.

- Now, thinking about opioids being used improperly, who do you think is most affected by this?
- Do you think the opioid situation (i.e. opioids being used improperly) in Canada is getting better or worse?
- What, if anything, should the Government of Canada do?
- Some have suggested that the Government of Canada should decriminalize possession of illicit drugs for personal use, so that those with a substance use disorder are diverted away from the

criminal justice system and towards a health-care approach instead. What do you think about that approach?

PHARMACARE (45 minutes) Mid-size Centres Quebec Seniors, Major Centres Atlantic Canada, Major Centres Alberta Seniors

- I'd now like to talk about a different topic.
- Who is familiar with the term pharmacare? What does it mean to you?
- Are you aware of any Government of Canada plans related to pharmacare? What have you heard?

SHOW ON SCREEN:

In 2019, the Government of Canada announced that it was intending to move forward on implementing national pharmacare. To make prescription drugs more affordable and more accessible to more Canadians, the Government stated its intention to work with its partners on the creation of:

- The **Canadian Drug Agency**, a new national drug agency that would co-ordinate negotiating prescription drug prices on behalf of Canadians. Buying them in large quantities will be able to save Canadians up to \$3 billion a year in the long term.
- A **national strategy for high-cost drugs for rare diseases** to help Canadians get better access to these drugs, as a first step towards expanded coverage.
- When you think of various healthcare priorities, how important is pharmacare as a priority compared to others? What makes you say that?
 - Does COVID make you think differently about the need for pharmacare? How so?
 - PROBE: Some people say COVID has shown the importance of protecting vulnerable populations like low income seniors, and ensuring good health, and so pharmacare is more important than ever. What do you think of that viewpoint? Do you agree or disagree? What makes you say that?
 - PROBE: Some people say that if people can afford medication, they're less likely to need to be in hospital for treatment, which gives hospitals more ability to deal with other things like pandemics. What do you think of that viewpoint? Do you agree or disagree? What makes you say that?
- Now, thinking about national pharmacare for Canada, let's talk for a bit about what this could look like. It could be a universal plan like healthcare, *or* it could be a "safety net" plan so that it only applies to Canadians when prescription drug costs exceed a percentage of their income.

- What are some benefits of the universal approach?
- What are some benefits of the safety net approach?
- Which approach is more fair?

Pharmacare could be completely public, like healthcare, where all Canadians are on the same plan. Alternatively, it could “close the gaps” so that people can still use existing public and private plans, but with a plan set up to ensure that everyone receives coverage, including those currently not covered.

- What are some benefits of a public approach where everyone is on the same plan?
- What are some benefits of “closing the gap”?
- Which approach is more fair?

Another question to consider would be to decide which drugs are covered by Pharmacare. One approach would be to limit coverage to essential life-saving medicine. Another approach would be to add frequently prescribed drugs, which are covered by most basic plans. Finally, it could be a more comprehensive approach so that it covers mostly everything currently included in existing public and private plans.

- How extensive do you think coverage should be under Pharmacare?
 - How would you feel about fewer drugs being covered, but people having the option to expand their coverage via add-on workplace or private plans?
- What do you think the process should be for deciding which drugs are covered?
- Let us now consider specialized high cost drugs that are used to treat rare diseases. Often in these cases, there is not much clinical evidence supporting how well they work, and usually they are quite expensive. However, they can give hope to very sick patients with limited options. Should these type of drugs be covered?
- Do you think the list of drugs that are covered should be the same in all provinces, or should variations be allowed?

Finally, there is the question of who pays for National Pharmacare.

- Should Canadians themselves cover part of the cost, either through small payments (e.g. a dispensing fee for a prescription), or through annual Pharmacare premiums?
- Given that employers currently pay for private plans, should they be required to pay for part of Pharmacare?

- Now that we've spent a bit of time talking about Pharmacare, do you have any further questions or suggestions about what it would look like?
- And do you think the term "pharmacare" is the best word to describe this type of system? Do you have any other suggestions?
- **POLL** Now, based on all the discussions we've had, how do you feel about national pharmacare? I'm going to show you a poll and I would like you to select either "national pharmacare is a good idea" or "national pharmacare is bad idea".
 - Now, I would like you to enter a short explanation for why you selected what you did.

INDIGENOUS ISSUES (60 minutes) Winnipeg and NCR Indigenous Peoples

I'd now like to shift our attention to Indigenous issues.

- What important Indigenous issues do you think the Government of Canada should focus on?
- Has the GC done anything well?
- What can they improve on?
- Have you heard anything about fisheries in Nova Scotia?
 - PROMPT AS NECESSARY: Anything about Indigenous fishers and commercial fishers related to lobster fishing?
 - What have you heard?
 - How do you feel about this?
 - Is this an important issue for the Government of Canada to address?

Now moving on to a different topic...

- Have you heard of UNDRIP (the United Nations Declaration on the Rights of Indigenous Peoples)?

SHOW ON SCREEN

UNDRIP is an international document adopted by the United Nations in 2007 that lays out the basic rights that Indigenous peoples should have around the world. It outlines how governments should respect the human rights of Indigenous peoples.

UNDRIP consists of 46 articles that describe specific rights and actions that governments must take to protect these rights. The main themes in the declaration are:

- The right to self-determination
- The right to cultural identity

- The right to free, prior and informed consent (i.e. the right to be consulted and make decisions on any matter that may affect the rights of Indigenous peoples)
- Protection from discrimination

- Let's say that Canada fully implemented UNDRIP. What do you think that would involve? What kinds of changes would you expect to see?

I'd now like to talk about racism for a bit...

- How would you define systemic racism?

CLARIFY AS NECESSARY

Systemic racism is generally defined as a problem with how society is set up, not just individual attitudes towards certain groups. So it's as if there's a built-in bias or racist lens in our various institutions and systems that leads to unfair treatment or outcomes for certain groups. So essentially rather than focusing on a few "bad apples" as the problem (e.g. a few racist people), systemic racism is when the whole barrel of apples is spoiled.

- Do you believe there is systemic racism against Indigenous people in Canada?

- Are there any institutions or systems that perpetrate systemic racism in Canada?
 - AS NECESSARY: for example, our education systems, healthcare systems, etc.?
 - IF YES: what kind of changes need to be made to these institutions/systems to improve their treatment of Indigenous people?

- What about the RCMP or police forces – is there systemic racism in our policing systems? How so? Do you have any examples or anecdotes that come to mind?

- What about our judicial system, such as the way courts engage with Indigenous people and how they do sentencing – is there systemic racism here? How so? Do you have any examples or anecdotes that come to mind?

I'd now like to talk about drinking water for a bit...

- Have you heard about Government of Canada efforts to lift long-term drinking water advisories on reserves?

I'm going to show you an infographic about the work being done by the federal government to lift long-term drinking water advisories and I will ask you for your opinion about it afterwards.

SHOW INFOGRAPHIC 'Progress on lifting long-term drinking water advisories on public systems on reserves'

- What are your first reactions?
- Now that you've seen this, how would you rate the progress the Government of Canada has made on this issue? Would you say they've made a lot of progress, a bit, none, or have they made things worse?
- What else should the Government of Canada be doing to improve drinking water on reserves?

SPEECH FROM THE THRONE (20-60 minutes) Smaller Centres Quebec, Lower Mainland, GMA CERB RECIPIENTS, GTA CERB RECIPIENTS

I'd now like to shift our attention to another topic.

- Have you seen, read or heard anything about the Government of Canada's Speech from the Throne?
 - IF YES: What have you heard?

Smaller Centres Quebec, Lower Mainland GMA CERB RECIPIENTS, GTA CERB RECIPIENTS CLARIFY AS NECESSARY

Yesterday/Last Wednesday, a new session of Parliament opened with the Speech from the Throne, which introduced the government's direction and goals, and outlines how it will work to achieve them.

- Now that I've provided a bit of information, do you recall hearing anything about this?

IF YES:

- What did you hear? What did you hear about what it includes?
- What is the focus of this new plan?
- GMA CERB RECIPIENTS, GTA CERB RECIPIENTS Is there something about this new plan that you particularly liked or did not like?

Smaller Centres Quebec, Lower Mainland Now I'd like to go through a few things outlined in the Speech from the Throne.

- Smaller Centres Quebec, Lower Mainland The following is a list of the four main pillars of the speech:

Smaller Centres Quebec, Lower Mainland SHOW ON SCREEN:

- Build back better, to create a stronger and more resilient Canada
- Fight the pandemic and save lives

- Stand up for who we are as Canadians, making progress on gender equality, reconciliation, and fighting discrimination
- Support people and business through the crisis, as long as it lasts, whatever it takes
- **Smaller Centres Quebec, Lower Mainland** **POLL 1:** I'm going to show you a poll. I'd like you to select which of these is the most important for the Government of Canada to focus on (participants to select ONE)
- **Smaller Centres Quebec, Lower Mainland** Now I'd like to go through the one you selected as the most important to you personally. SHOW RESULTS FROM POLL 1 ON SCREEN
- **Smaller Centres Quebec, Lower Mainland** **HAVE EACH PARTICIPANT LIST THEIR SELECTION AND EXPLAIN WHY.**
- **Smaller Centres Quebec, Lower Mainland** Now thinking of all 4 pillars, do these make sense as the key things the government should be focused on? Why/why not?
- **Smaller Centres Quebec, Lower Mainland** Now I'm going to show you a list of some of the priorities that the Government of Canada pledged to implement in the Throne Speech:

Smaller Centres Quebec, Lower Mainland SHOW ON SCREEN:

- Create a national, universal pharmacare program so that all Canadians have access to affordable prescription medication
- Create over one million jobs via tools such as investments in infrastructure, and incentives for employers to hire and retain workers
- Ensure faster COVID testing options, including being able to quickly meet surge testing needs
- Give municipalities the ability to further restrict or ban handguns, and strengthen measures to control the flow of illegal guns into Canada
- Help make Canada a world leader in clean technology by launching a fund to attract investments in making zero-emissions products, and cutting the corporate tax rate in half for these companies to create jobs
- Implement a plan to exceed Canada's 2030 climate goal, and legislate a goal of net-zero emissions by 2050
- Increase Old Age Security once a senior turns 75, and boost the Canada Pension Plan survivor's benefit
- Introduce more support for industries that have been the hardest hit, including travel and tourism, hospitality, and cultural industries like the performing arts
- Invest heavily in training for workers, and in connecting workers to employers and good jobs

- Invest in creating a sustainable, long-term, Canada-wide early learning and childcare system
 - Penalize long-term care home operators and others who neglect seniors under their care
 - Work with the provinces and territories to set new, national standards for long-term care so that seniors get the best support possible
- **Smaller Centres Quebec, Lower Mainland** **POLL 2:** I'm going to show you a poll. I'd like you to select which of these are the most important to you personally (participants to select UP TO THREE).
 - **Smaller Centres Quebec, Lower Mainland** Now I'd like to go through the priorities you selected as the most important to you personally. SHOW RESULTS FROM POLL 2 ON SCREEN
 - **HAVE EACH PARTICIPANT LIST THEIR MOST IMPORTANT SELECTIONS AND EXPLAIN WHICH ONE THEY CONSIDER TO BE THE MOST IMPORTANT TO THEM AND WHY.**
 - **Smaller Centres Quebec, Lower Mainland** **POLL 3:** Now I'd like you to select which of these, if any, you think the Government of Canada should not do (participants to select UP TO THREE).
 - **Smaller Centres Quebec, Lower Mainland** Now I'd like to go through any priorities you thought the Government of Canada should not do. SHOW RESULTS FROM POLL 3 ON SCREEN
 - **HAVE EACH PARTICIPANT LIST ANY PRIORITIES THEY SELECTED AS THINGS THE GOVERNMENT SHOULD NOT DO AND EXPLAIN WHICH ONE THEY FEEL THE MOST STRONGLY ABOUT AND WHY.**
 - **Smaller Centres Quebec, Lower Mainland** Now that we've gone through and discussed the main pillars and some of the priorities, how do you feel about the Throne Speech in general?

GMA CERB RECIPIENTS, GTA CERB RECIPIENTS CLARIFY AS NECESSARY

The GC introduced four main pillars that they wish to focus on.

- Build back better, to create a stronger and more resilient Canada;
 - Fight the pandemic and save lives;
 - Stand up for who we are as Canadians, making progress on gender equality, reconciliation, and fighting discrimination; and
 - Support people and business through the crisis, as long as it lasts, whatever it takes.
- Do you think the Government of Canada is missing any important opportunities? Are they leaving anything out?
 - IF YES: What other priorities does the government need to focus on?

- **GMA CERB RECIPIENTS, GTA CERB RECIPIENTS** Have any of you heard anything about the Government of Canada's projected deficit this year? What have you heard?
- **GMA CERB RECIPIENTS, GTA CERB RECIPIENTS** A couple of months ago, the Government of Canada was projecting a \$343-billion deficit this year. How do you feel about that?
 - Based on the Speech from the Throne, do you think the deficit will increase, decrease or stay the same? How do you feel about that?

CONCLUSION (5 minutes) **All Locations**

French Moderators Guide

GUIDE DU MODÉRATEUR — SEPTEMBRE 2020 DOCUMENT MAÎTRE

INTRODUCTION (10 minutes) Tous les lieux

- Le modérateur ou la personne responsable du soutien technique doit faire savoir aux participantes et aux participants qu'un stylo et du papier seront nécessaires afin de prendre des notes et d'écrire quelques réflexions au sujet des pièces de communication que nous leur montrerons plus tard au cours de la discussion.

LA COVID DANS L'ACTUALITÉ (5-15 minutes) Parents de grands centres de la Saskatchewan, parents de centres de taille moyenne de l'Ontario, population aînée de centres de taille moyenne du Québec

- Qu'avez-vous entendu dire au sujet de la COVID-19 au cours des quelques derniers jours ?
- **Parents de centres de taille moyenne de l'Ontario** Avez-vous vu, lu ou entendu quoi que ce soit concernant l'annonce récente, par le gouvernement du Canada, du lancement de la nouvelle application Alerte COVID ?
 - S'ILS EN ONT ENTENDU PARLER : D'après ce que vous savez, comment fonctionne-t-elle ?

Parents de centres de taille moyenne de l'Ontario ÉCLAIRCISSEMENT

Le gouvernement du Canada s'apprête à lancer l'application Alerte COVID, qui avertit les utilisateurs lorsqu'une personne avec laquelle ils ont été en contact est déclarée positive à la COVID-19, afin qu'ils puissent aller passer un test de dépistage. Plusieurs provinces ont des applications semblables.

- **Parents de centres de taille moyenne de l'Ontario** Pensez-vous télécharger l'application Alerte COVID ? Qu'est-ce qui vous fait dire cela ?
- Avez-vous entendu quoi que ce soit au sujet de la Prestation canadienne d'urgence (PCU) récemment ?
 - AU BESOIN, DEMANDER : Avez-vous entendu quoi que ce soit quant à la transition de la PCU vers le régime d'assurance-emploi ?
 - Avez-vous entendu quoi que ce soit à propos des critères d'admissibilité ou du montant minimum d'argent que les bénéficiaires de l'assurance-emploi recevront par semaine ou autre chose du genre ? Qu'avez-vous entendu ?
 - Avez-vous entendu quoi que ce soit au sujet de nouvelles prestations ? Qu'avez-vous entendu ?

LE GOUVERNEMENT DU CANADA DANS L'ACTUALITÉ (5-20 minutes) Population âgée de centres de taille moyenne du Québec, grands centres des provinces atlantiques, population âgée de grands centres de l'Alberta, parents de grands centres de l'Ontario, parents de grands centres francophones, peuples autochtones de Winnipeg et de la RCN, petits centres du Québec, Lower Mainland, prestataires de la PCU de la GRM, prestataires de la PCU de la RGT

- Qu'avez-vous vu, lu ou entendu au sujet du gouvernement du Canada au cours des derniers jours ?
- Peuples autochtones de Winnipeg et de la RCN, petits centres du Québec, Lower Mainland, prestataires de la PCU de la GRM, prestataires de la PCU de la RGT Avez-vous entendu parler de ce que fait le gouvernement du Canada concernant la pandémie actuelle de COVID-19 ?
- Prestataires de la PCU de la GRM, prestataires de la PCU de la RGT Avez-vous entendu quoi que ce soit au sujet des tests de dépistage de la COVID-19 dans votre communauté ? Qu'avez-vous entendu ?
 - AU BESOIN, DEMANDER :
 - Qu'en est-il du nombre de sites de dépistage, ou du nombre de tests qu'ils peuvent effectuer — est-ce suffisant ?
 - Avez-vous entendu ou savez-vous quoi que ce soit par rapport aux longs délais d'attente pour subir un test de dépistage ou pour en obtenir les résultats ?
- Prestataires de la PCU de la GRM, prestataires de la PCU de la RGT Faut-il faire quelque chose quant à la capacité de dépistage ? Que faut-il faire ?
 - Y a-t-il quelque chose que le gouvernement du Canada peut faire pour y remédier ?

SITUATION ACTUELLE DE LA COVID-19 (5 minutes) Population âgée de centres de taille moyenne du Québec, grands centres des provinces atlantiques, population âgée de grands centres de l'Alberta

- Et maintenant, en pensant à la COVID-19 au Canada actuellement, comment vous sentez-vous ?
 - Pensez-vous que la propagation au Canada est maîtrisée ?
 - Qu'en est-il à l'échelle locale — pensez-vous que la situation est maîtrisée dans votre région ?

COMPORTEMENT (20-30 minutes) Parents de grands centres de la Saskatchewan, parents de centres de taille moyenne de l'Ontario, population âgée de centres de taille moyenne du Québec, parents de grands centres de l'Ontario, parents de grands centres francophones, peuples autochtones de Winnipeg et de la RCN, petits centres du Québec, Lower Mainland, prestataires de la PCU de la GRM, prestataires de la PCU de la RGT

- Parents de grands centres de l'Ontario, parents de grands centres francophones J'aimerais maintenant parler de COVID-19...

- Avez-vous modifié votre comportement au cours de ces dernières semaines ?
 - Parents de grands centres de la Saskatchewan, parents de centres de taille moyenne de l'Ontario, population aînée de centres de taille moyenne du Québec, parents de grands centres de l'Ontario, parents de grands centres francophones Qu'avez-vous fait ? (Sonder : *aller dans les magasins ou au restaurant [pas seulement à l'épicerie], à rendre visite aux gens, à faire plus de courses, à utiliser les transports en commun, etc.*)
 - Peuples autochtones de Winnipeg et de la RCN, petits centres du Québec, Lower Mainland, prestataires de la PCU de la GRM, prestataires de la PCU de la RGT Qu'avez-vous fait ? (Sonder : *aller dans les magasins ou au restaurant [pas seulement à l'épicerie], à rendre visite aux gens, à faire plus de courses, à utiliser les transports en commun, etc.*)
 - Si oui : pourquoi les faites-vous davantage ces choses ?
 - Si non : pourquoi n'avez-vous pas changé votre comportement ?

- Parents de grands centres de la Saskatchewan, parents de centres de taille moyenne de l'Ontario Imaginez que vous parlez à un ami ou à un membre de votre famille qui n'a pas d'enfant.
 - Que leur diriez-vous de l'expérience d'être parent pendant la pandémie de COVID-19 ?
- Parents de grands centres de l'Ontario, parents de grands centres francophones Imaginez que vous parlez à un ami ou à un membre de votre famille qui n'a pas d'enfant et ne prévoit pas d'en avoir dans un avenir rapproché.
 - Pour vous qui êtes parents : que leur diriez-vous de l'expérience d'être parent pendant la pandémie de COVID-19 ?
 - Pour vous qui attendez un enfant : que leur diriez-vous de l'expérience d'être enceinte pendant la pandémie de COVID-19 ?
 - Pour vous qui avez l'intention d'avoir un bébé dans un avenir rapproché : que leur diriez-vous sur l'impact de la pandémie sur vos projets, le cas échéant ?

- Parents de grands centres de la Saskatchewan, parents de centres de taille moyenne de l'Ontario Quels sont les trois mots qui décrivent le mieux ce que c'est que d'être parent pendant la pandémie de COVID-19 ? Veuillez préciser.
- Parents de grands centres de l'Ontario, parents de grands centres francophones Quels sont les trois mots qui décrivent le mieux ce que c'est que d'être parent pendant la pandémie de COVID-19 ? Veuillez préciser. Pour vous qui n'avez pas d'enfant : quels sont les 3 mots qui décrivent le mieux le fait d'être enceinte ou de prévoir une grossesse prochainement ?

- Parents de grands centres de la Saskatchewan, parents de centres de taille moyenne de l'Ontario Est-ce que votre relation avec votre ou vos enfant(s) a changé depuis le début de la pandémie de COVID-19 ?
 - Si c'est le cas, qu'est-ce qui a changé ?

- **Parents de grands centres de l'Ontario, parents de grands centres francophones** Pour vous qui êtes parents de jeunes enfants : est-ce que votre relation avec votre ou vos enfant(s) a changé depuis le début de la pandémie de COVID-19 ?
 - Si c'est le cas, qu'est-ce qui a changé ?
- **Parents de grands centres de la Saskatchewan, parents de centres de taille moyenne de l'Ontario, parents de grands centres de l'Ontario, parents de grands centres francophones** Est-ce que vos enfants ont changé de comportement au cours des dernières semaines ?
- **Qu'est-ce qu'ils ou elles ont fait ?** (Sonder quant à ces éléments : ont commencé à sortir plus souvent ; ont invité des amis à la maison ; rendent visite à des amis, etc.)
- **Population âgée de centres de taille moyenne du Québec** Imaginez que vous parlez à un ami ou à un membre de votre famille qui a une vingtaine d'années. Que lui diriez-vous de votre expérience au cours de la pandémie de COVID-19 ?
- **Population âgée de centres de taille moyenne du Québec** Pendant la pandémie de COVID-19, les Canadiens de plus de 55 ans ont été qualifiés de population particulièrement « vulnérable ».
 - Est-ce que cette étiquette a une résonance pour vous ? Pourquoi ou pourquoi pas ?
- **Population âgée de centres de taille moyenne du Québec** Veuillez décrire comment votre comportement et vos habitudes ont ou n'ont pas changé à cause de la COVID-19.
 - Qu'est-ce qui fut pour vous le plus grand défi ?
 - Qu'est-ce qui a été plus facile que ce que vous attendiez ?
- **Prestataires de la PCU de la GRM, prestataires de la PCU de la RGT** Qu'en est-il de vos habitudes de dépenses — ont-elles changé au cours de la pandémie ? De quelle façon ?
- **Prestataires de la PCU de la GRM, prestataires de la PCU de la RGT** Et lorsque vous pensez à vos diverses dépenses, est-ce que la pandémie a eu un impact sur votre coût de la vie de tous les jours ?
- **Peuples autochtones de Winnipeg et de la RCN, petits centres du Québec, Lower Mainland, prestataires de la PCU de la GRM, prestataires de la PCU de la RGT** Pensez-vous que nous connaissons actuellement une deuxième vague, pensez-vous qu'une deuxième vague s'en vient, ou pensez-vous qu'il n'y aura pas de deuxième vague ?
- **Peuples autochtones de Winnipeg et de la RCN, petits centres du Québec, Lower Mainland, prestataires de la PCU de la GRM, prestataires de la PCU de la RGT** Pensez-vous que nous sommes prêts à faire face à une deuxième vague ? Qu'est-ce qui vous fait dire cela ?

- **Peuples autochtones de Winnipeg et de la RCN, petits centres du Québec, Lower Mainland, prestataires de la PCU de la GRM, prestataires de la PCU de la RGT** À quoi vous attendez-vous au cours de l'automne ?
 - Pour vous qui pensez que nous connaissons actuellement une deuxième vague ou bien qu'elle s'en vient, pensez-vous qu'elle sera moins grave, pire ou comparable à celle du printemps ?
 - Pensez-vous que les restrictions seront remises en place ? Pourquoi ou pourquoi pas ?
 - Si oui : Jusqu'à quel point ?
 - Selon vous, quelles conditions seraient nécessaires pour que les restrictions soient réinstaurées ? Et quelles devraient être ces restrictions ?
- **Peuples autochtones de Winnipeg et de la RCN, petits centres du Québec, Lower Mainland, prestataires de la PCU de la GRM, prestataires de la PCU de la RGT** Et en cette période d'automne, êtes-vous préoccupés par les répercussions de la COVID sur vous, vos familles, votre communauté et les entreprises ? De quelle façon ?
 - Êtes-vous préoccupé par les effets sur la santé mentale des personnes appartenant à vos cercles sociaux ou à votre communauté ?

ASSURANCE-EMPLOI ET PRESTATIONS DE RELANCE ÉCONOMIQUE (20 minutes) Parents de grands centres de la Saskatchewan, parents de centres de taille moyenne de l'Ontario

AFFICHER À L'ÉCRAN :

Le gouvernement du Canada a récemment annoncé qu'il allait amorcer une transition vers un programme d'assurance-emploi simplifié. À l'origine, la PCU devait se terminer à la fin du mois d'août, mais elle a été prolongée de quatre semaines supplémentaires. En date du 27 septembre 2020 :

Les nouveaux demandeurs d'assurance-emploi en date du 27 septembre 2020 toucheront un taux de prestation minimum de 400 \$ par semaine. Toute personne admissible à l'assurance-emploi devra avoir travaillé 120 heures pour y avoir droit, ce qui est bien inférieur aux critères actuels de l'assurance-emploi — puisqu'un grand nombre de Canadiennes et de Canadiens n'ont pas pu travailler en raison de la pandémie et accumuler le nombre d'heures requis.

Le gouvernement du Canada a également annoncé une série de trois nouvelles prestations de relance économique :

1. La nouvelle **Prestation canadienne de la relance économique** verserait un montant de 500 \$ par semaine pour les travailleurs qui ne sont pas admissibles à l'assurance-emploi — principalement les travailleurs(-euses) autonomes, y compris ceux et celles qui font partie de l'économie à la demande (par exemple, les pigistes, les consultant(e)s, les entrepreneur(e)s indépendant(e)s, les personnes ayant un contrat temporaire, etc.)

2. La nouvelle **Prestation canadienne de relance économique pour proches aidants** verserait 500 \$ par semaine à toute personne qui ne peut travailler parce qu'elle doit s'occuper d'enfants ou d'autres personnes à charge qui ont dû rester à la maison (par exemple, elle a dû arrêter de travailler en raison d'une fermeture d'école ou de garderie due à la COVID-19).
 3. La nouvelle **Prestation canadienne de maladie pour la relance économique** verserait 500 \$ par semaine pour une période maximale de deux semaines à toute personne qui n'a pas de congé de maladie payé et qui tombe malade ou doit s'isoler pour des raisons liées à la COVID-19.
- Que pensez-vous de cette approche ? Est-ce que le taux de prestation minimum et les critères d'admissibilité sont sensés ? Pourquoi ou pourquoi pas ?
 - Maintenant, si l'on pense à la transition pour les prestataires de la PCU vers ce nouveau système, quel est, selon vous, l'élément le plus important à considérer ? AFFICHER LES TROIS POINTS À L'ÉCRAN
 - S'assurer qu'il n'y a pas de délai d'attente entre les versements effectués à la fin de la PCU et au début du nouveau système.
 - S'assurer que toute personne qui reçoit la PCU sera également admissible à l'assurance-emploi ou aux nouvelles prestations
 - Tenter de réduire le montant versé et le nombre de personnes qui y sont admissibles afin de réduire le déficit
 - Combien de temps pensez-vous que les prestations pour les personnes qui ne peuvent pas travailler en raison de la COVID-19 ou parce qu'elles doivent s'occuper de quelqu'un d'autre devront être en place ?

ÉCLAIRCISSEMENT AU BESOIN

Le système d'assurance-emploi simplifié et les nouvelles prestations de relance économique seront en place pendant un an et donneront droit à un minimum de 26 semaines de prestations régulières (à l'exception de la Prestation canadienne de maladie pour la relance économique — qui est d'une durée maximale de deux semaines.)

- Est-ce que cela vous semble raisonnable de les maintenir en place pendant un an ? Pourquoi ou pourquoi pas ?

DE LA PCU À L'ASSURANCE-EMPLOI (40 minutes) Prestataires de la PCU de la GRM, prestataires de la PCU de la RGT

- Avez-vous vu, lu ou entendu quoi que ce soit récemment au sujet de la Prestation canadienne d'urgence (PCU) ou de l'assurance-emploi ? Qu'avez-vous entendu ?

AFFICHER À L'ÉCRAN :

Le gouvernement du Canada a récemment annoncé qu'il allait amorcer une transition vers un programme d'assurance-emploi simplifié. À l'origine, la PCU devait se terminer à la fin du mois d'août, mais elle a été prolongée de quatre semaines supplémentaires et s'est terminée la fin de semaine dernière.

Pour faire suite au discours du Trône, le gouvernement du Canada a annoncé jeudi dernier qu'il allait bonifier le versement hebdomadaire proposé pour les chômeurs canadiens qui passent de la PCU à l'assurance-emploi à 500 \$ par semaine, plutôt que les 400 \$ initialement annoncés. Toute personne admissible à l'assurance-emploi devra avoir travaillé 120 heures pour y avoir droit, ce qui est bien inférieur aux critères actuels de l'assurance-emploi — puisqu'un grand nombre de Canadiennes et de Canadiens n'ont pas pu travailler en raison de la pandémie et accumuler le nombre d'heures requis.

Le gouvernement du Canada a également annoncé une série de trois nouvelles prestations de relance économique :

1. La nouvelle **Prestation canadienne de la relance économique** verserait un montant de 500 \$ par semaine pour les travailleurs qui ne sont pas admissibles à l'assurance-emploi — principalement les travailleurs(-euses) autonomes, y compris ceux et celles qui font partie de l'économie à la demande (par exemple, les pigistes, les consultant(e)s, les entrepreneur(e)s indépendant(e)s, les personnes ayant un contrat temporaire, etc.).
 2. La nouvelle **Prestation canadienne de relance économique pour proches aidants** verserait 500 \$ par semaine à toute personne qui ne peut travailler parce qu'elle doit s'occuper d'enfants ou d'autres personnes à charge qui ont dû rester à la maison (par exemple, elle a dû arrêter de travailler en raison d'une fermeture d'école ou de garderie due à la COVID-19).
 3. La nouvelle **Prestation canadienne de maladie pour la relance économique** verserait 500 \$ par semaine pour une période maximale de deux semaines à toute personne qui n'a pas de congé de maladie payé et qui tombe malade ou doit s'isoler pour des raisons liées à la COVID-19.
- Que pensez-vous de cette approche ? Est-ce que le taux de prestation minimum et les critères d'admissibilité sont sensés ? Pourquoi ou pourquoi pas ?
 - Combien de temps pensez-vous que les prestations pour les personnes qui ne peuvent pas travailler en raison de la COVID-19 ou parce qu'elles doivent s'occuper de quelqu'un d'autre devront être en place ?

ÉCLAIRCISSEMENT AU BESOIN

Le système d'assurance-emploi simplifié et les nouvelles prestations de relance économique seront en place pendant un an et donneront droit à un minimum de 26 semaines de prestations régulières

(à l'exception de la Prestation canadienne de maladie pour la relance économique — qui est d'une durée maximale de deux semaines).

- Est-ce que cela vous semble raisonnable de les maintenir en place pendant un an ? Pourquoi ou pourquoi pas ?
- Avez-vous des préoccupations par rapport à passer de la PCU à l'assurance-emploi ?
 - Savez-vous comment s'effectue le transfert ?
 - SI NÉCESSAIRE : Est-ce que ça s'applique à vous ? Avez-vous besoin de faire une demande ?
- Pensez-vous que cette approche laisse qui que ce soit de côté ? Pourquoi ou pourquoi pas ?

Sous l'ancien régime, les prestations d'assurance-emploi constituaient un revenu imposable, ce qui signifie que les impôts fédéraux et provinciaux ou territoriaux, le cas échéant, sont déduits lorsque vous les recevez.

- Pensez-vous que cela s'applique au système simplifié d'assurance-emploi et aux nouvelles prestations de relance économique ? Autrement dit, sont-elles imposables ?
- Auriez-vous des préoccupations à ce sujet quand viendra la période des impôts au printemps ?

ÉCONOMIE (20 minutes) Grands centres des provinces atlantiques, population aînée de grands centres de l'Alberta, parents de grands centres de l'Ontario, parents de grands centres francophones

- J'aimerais maintenant parler un peu de l'économie.
- Alors que l'économie canadienne a redémarré, avez-vous entendu parler de ce que le gouvernement du Canada fait pour contribuer à la reprise économique ? Qu'avez-vous entendu ? (NE DISCUTER QUE BRIÈVEMENT DE CETTE QUESTION)
- Je vais maintenant vous montrer différentes phrases pour décrire ce que pourraient être les objectifs de la reprise économique du Canada. J'aimerais que vous les lisiez individuellement et nous en discuterons par la suite. AFFICHER LES OPTIONS À L'ÉCRAN.
 - Nous avons besoin d'un nouveau pacte vert.
 - Nous avons besoin d'une relance verte.
 - Nous avons besoin d'un pays plus résilient.

- Nous devons reconstruire en mieux.

- **SONDAGE** : Je vais procéder à un sondage. J'aimerais que vous choisissiez celle qui résume le mieux ce que vous souhaitez de la reprise économique du Canada. (Les participant(e)s ne doivent choisir qu'une seule option.)

- Maintenant, passons en revue chacune de ces phrases...

- Et que signifie pour vous, « nous avons besoin d'un nouveau pacte vert » ?
 - Pour les personnes l'ayant choisie : Pourquoi l'avez-vous choisie ? Qu'est-ce qui vous plaît ?
 - Pour les personnes ne l'ayant pas choisie : Pourquoi ne l'avez-vous pas choisie ? Qu'est-ce qui vous déplaît ?

- Et que signifie pour vous, « nous avons besoin d'une relance verte » ?
 - Pour les personnes l'ayant choisie : Pourquoi l'avez-vous choisie ? Qu'est-ce qui vous plaît ?
 - Pour les personnes ne l'ayant pas choisie : Pourquoi ne l'avez-vous pas choisie ? Qu'est-ce qui vous déplaît ?

- Et que signifie pour vous, « nous avons besoin d'un pays plus résilient » ?
 - Pour les personnes l'ayant choisie : Pourquoi l'avez-vous choisie ? Qu'est-ce qui vous plaît ?
 - Pour les personnes ne l'ayant pas choisie : Pourquoi ne l'avez-vous pas choisie ? Qu'est-ce qui vous déplaît ?

- Et que signifie pour vous, « nous devons reconstruire en mieux » ?
 - Pour les personnes l'ayant choisie : Pourquoi l'avez-vous choisie ? Qu'est-ce qui vous plaît ?
 - Pour les personnes ne l'ayant pas choisie : Pourquoi ne l'avez-vous pas choisie ? Qu'est-ce qui vous déplaît ?

ÉVALUATION DE CONCEPT SUR LA GRIPPE SAISONNIÈRE (30 minutes) Population âgée de centres de taille moyenne du Québec, grands centres des provinces atlantiques, population âgée de grands centres de l'Alberta, parents de grands centres de l'Ontario, parents de grands centres francophones

- **Population âgée de centres de taille moyenne du Québec, population âgée de grands centres de l'Alberta** Je vais vous montrer deux séries d'images de bannières que le gouvernement du Canada est en train de développer pour une éventuelle publicité. Chaque série comporte trois bannières animées, ce qui signifie qu'elles passeront d'une image à l'autre en alternance.
- **Grands centres des provinces atlantiques, parents de grands centres de l'Ontario, parents de grands centres francophones** Aujourd'hui, dans le cadre de la discussion, nous allons examiner des concepts pour quelques différentes campagnes publicitaires. Pour ce qui est de la première, je vais vous montrer les images de deux bannières publicitaires que le gouvernement du Canada est en train de développer pour une éventuelle publicité.

Concepts destinés à la population âgée :

Population âgée de centres de taille moyenne du Québec Ordre séquentiel : 1, 2

Population âgée de grands centres de l'Alberta Ordre séquentiel : 2, 1

Concepts destinés aux jeunes adultes :

Grands centres des provinces atlantiques Ordre séquentiel : 2, 1

Concepts destinés aux parents et aux femmes enceintes :

Parents de grands centres de l'Ontario Ordre séquentiel : 1, 2

Parents de grands centres francophones Ordre séquentiel : 2, 1

AFFICHER À L'ÉCRAN LA BANNIÈRE PUBLICITAIRE 1 :

- Que pensez-vous de cette bannière publicitaire ?
- Qu'est-ce qui vous plaît le plus ? Qu'est-ce qui vous plaît le moins ?
- Quel est le message principal ?
- Que pensez-vous du fait que les gens portent des masques ? Est-ce pertinent ? Est-ce que cela prête à confusion ? Pourquoi dites-vous cela ?
- À qui s'adresse ce message ? Pourquoi dites-vous cela ? Que pensez-vous précisément des énoncés ? Sont-ils clairs ou prêtent-ils à confusion ?
- **Population âgée de centres de taille moyenne du Québec, grands centres des provinces atlantiques, population âgée de grands centres de l'Alberta** Qu'en est-il de « Je me suis fait vacciner contre la grippe cette année. Et vous ? » Est-ce que ça tient dans le contexte de cette publicité ? Qu'est-ce que cela signifie pour vous ?

- **Parents de grands centres de l'Ontario, parents de grands centres francophones** Qu'en est-il de « On s'est fait vacciner contre la grippe cette année. Et vous ? » Est-ce que ça tient dans le contexte de cette publicité ? Qu'est-ce que cela signifie pour vous ?
- Est-ce qu'elle se démarquerait si vous la voyiez en ligne ? Est-ce qu'elle vous inciterait à obtenir plus d'information ?
- **Population âgée de centres de taille moyenne du Québec, Grands centres des provinces atlantiques, population âgée de grands centres de l'Alberta** Si vous voyiez cette publicité, seriez-vous motivé d'agir, par exemple en vous faisant vacciner contre la grippe ou bien en vous renseignant sur les endroits où vous pouvez vous faire vacciner ou bien à en apprendre davantage sur le vaccin antigrippal ?
- **Parents de grands centres de l'Ontario, parents de grands centres francophones** Si vous voyiez cette publicité, seriez-vous motivé d'agir, par exemple en vous faisant vacciner contre la grippe ou bien en vous renseignant sur les endroits où il est possible d'aller se faire vacciner ou bien à en apprendre davantage sur le vaccin antigrippal pour vous-même ou votre famille ?

AFFICHER À L'ÉCRAN LA BANNIÈRE PUBLICITAIRE 2

- Que pensez-vous de cette bannière publicitaire ?
- Qu'est-ce qui vous plaît le plus ? Qu'est-ce qui vous plaît le moins ?
- Quel est le message principal ?
- Que pensez-vous du fait que les gens portent des masques ? Est-ce pertinent ? Est-ce que cela prête à confusion ? Pourquoi dites-vous cela ?
- **Population âgée de centres de taille moyenne du Québec, grands centres des provinces atlantiques, population âgée de grands centres de l'Alberta** Qu'en est-il de « Planifiez de vous faire vacciner contre la grippe maintenant. » Est-ce que ça tient dans le contexte de cette publicité ? Qu'est-ce que cela signifie pour vous ?
- **Parents de grands centres de l'Ontario, parents de grands centres francophones** Qu'en est-il de « Planifiez de faire vacciner votre famille contre la grippe maintenant. » Est-ce que ça tient dans le contexte de cette publicité ? Qu'est-ce que cela signifie pour vous ?
- Est-ce qu'elle se démarquerait si vous la voyiez en ligne ? Est-ce qu'il vous inciterait à obtenir plus d'information ?
- **Population âgée de centres de taille moyenne du Québec, grands centres des provinces atlantiques, population âgée de grands centres de l'Alberta** Si vous voyiez cette publicité, seriez-vous motivé d'agir, par exemple en vous faisant vacciner contre la grippe ou bien en vous renseignant sur les endroits où vous pouvez vous faire vacciner ou bien à en apprendre davantage sur le vaccin antigrippal ?
- **Parents de grands centres de l'Ontario, parents de grands centres francophones** Si vous voyiez cette publicité, seriez-vous motivé d'agir, par exemple en vous faisant vacciner contre la grippe ou bien en vous renseignant sur les endroits où il est possible d'aller se faire vacciner ou bien à en apprendre davantage sur le vaccin antigrippal pour vous-même ou votre famille ?

RÉCAPITULATIF DE LA PUBLICITÉ

- **SONDAGE** : Selon vous, quelle bannière serait la plus efficace pour encourager la population canadienne à se faire vacciner ainsi que vous-même ?

Concepts destinés aux parents et aux femmes enceintes :

Grands centres des provinces atlantiques Ordre séquentiel : 2, 1

- **Grands centres des provinces atlantiques** Il se peut qu'il y ait une série de ces bannières publicitaires. Je vais vous montrer une autre version de chacun des concepts que vous venez de voir.

Grands centres des provinces atlantiques AFFICHER LA BANNIÈRE PUBLICITAIRE 1 À L'ÉCRAN :

- Que pensez-vous de cette bannière publicitaire ?
- À qui s'adresse cette publicité — le même public cible que la première version que vous avez vue ou un public différent ?
- Avez-vous d'autres commentaires à faire sur cette bannière ?

Grands centres des provinces atlantiques AFFICHER LA BANNIÈRE PUBLICITAIRE 2 À L'ÉCRAN :

- Que pensez-vous de cette bannière publicitaire ?
- À qui s'adresse cette publicité — le même public cible que la première version que vous avez vue ou un public différent ?
- Avez-vous d'autres commentaires à faire sur cette bannière ?

Énoncé complémentaire

- **Population âgée de centres de taille moyenne du Québec, grands centres des provinces atlantiques, population âgée de grands centres de l'Alberta, parents de grands centres de l'Ontario, parents de grands centres francophones** Je vais vous montrer un exemple de message qui pourrait accompagner ces publicités ou d'autres communications relatives au vaccin contre la grippe.

Population âgée de centres de taille moyenne du Québec, grands centres des provinces atlantiques, population âgée de grands centres de l'Alberta, parents de grands centres de l'Ontario, parents de grands centres francophones AFFICHER LE MESSAGE À L'ÉCRAN :

Cet automne, protégeons notre communauté, notre système de santé et nous-mêmes contre la grippe. Gardons tout le monde en santé.

- **Population âgée de centres de taille moyenne du Québec, grands centres des provinces atlantiques, population âgée de grands centres de l'Alberta, parents de grands centres de**

l'Ontario, parents de grands centres francophones Que pensez-vous d'un tel message ? Pensez-vous qu'il concorde bien avec les publicités que vous avez vues ? Croyez-vous qu'il contribue à vous motiver à agir ?

ÉVALUATION DE CONCEPTS SUR LA VACCINATION DES ENFANTS (30 minutes) **Parents de grands centres de l'Ontario, parents de grands centres francophones**

Nous allons maintenant passer en revue quelques concepts pour une tout autre campagne que le gouvernement du Canada est en train de développer en vue d'une éventuelle publicité.

Parents de grands centres de l'Ontario Ordre séquentiel : 1, 2

Parents de grands centres francophones Ordre séquentiel : 2, 1

MONTRER LA VIDÉO N° 1

- Que pensez-vous de cette publicité ?
- Qu'est-ce qui vous plaît le plus ? Qu'est-ce qui vous plaît le moins ?
- Quel est le message principal ?
- Qu'est-ce que ça suggère au sujet de la vaccination ? Sonder si ce n'est pas mentionné : sécuritaire ; efficace ; important
- À qui s'adresse ce message ? Pourquoi dites-vous cela ? Que pensez-vous précisément des énoncés ? Sont-ils clairs ou prêtent-ils à confusion ? Sont-ils crédibles ?
- Est-ce qu'elle se démarquerait si vous la voyiez à la télé ou en ligne ?
- Que feriez-vous personnellement, le cas échéant, après avoir vu cette vidéo ?
 - Dans quelle mesure est-ce que ce concept vous incite à vous renseigner sur la vaccination des enfants ?
 - Où iriez-vous pour obtenir ces informations ?
 - Est-ce que vous partageriez cette vidéo avec vos réseaux sur les médias sociaux ? Pourquoi ou pourquoi pas ?
- Y a-t-il quelque chose qui n'est pas clair ou qui pose problème ?
 - Vous avez peut-être remarqué que la mère et l'infirmière dans la séquence de vaccination ne portent pas de masque, pensez-vous qu'elles le devraient ?
- J'aimerais avoir votre avis sur une autre version de cette publicité...

MONTRER LA VIDÉO N° 2

- Que pensez-vous de celle-ci ?

COMPARAISON

- **SONDAGE** : Selon vous, quelle publicité serait la plus efficace pour encourager les parents ou vous-même à vous renseigner davantage sur la vaccination des enfants ?
LE MODÉRATEUR LIRA LES RÉSULTATS À HAUTE VOIX.

LES ÉCOLES (40 minutes) Parents de grands centres de la Saskatchewan, parents de centres de taille moyenne de l'Ontario

- Qu'avez-vous entendu au sujet des plans de retour à l'école dans votre région ?

Parents de grands centres de la Saskatchewan ÉCLAIRCISSEMENT AU BESOIN

Le gouvernement de la Saskatchewan a présenté son plan pour la sécurité à l'école (Safe School Plan) afin que les élèves et le personnel puissent reprendre l'enseignement en présentiel. Le plan comprend des éléments tels que des mesures d'auto-évaluation, l'attribution de sièges dans les autobus scolaires, des protocoles pour assurer que les élèves peuvent accéder et se déplacer en toute sécurité dans les installations scolaires, des mesures sanitaires accrues, des mesures pour réduire le risque de transmission en classe, du soutien pour les élèves ayant des besoins intensifs ou étant immunovulnérables, des mesures pour réduire les contacts physiques et un ensemble de quatre scénarios qui peuvent être mis en œuvre selon l'avis du médecin-hygiéniste en chef.

Parents de centres de taille moyenne de l'Ontario ÉCLAIRCISSEMENT AU BESOIN

Le gouvernement de l'Ontario a déclaré que les écoles primaires seront équipées pour rouvrir avec des normes de santé et de sécurité accrues, et que les élèves fréquenteront l'école 5 jours par semaine. La plupart des écoles secondaires offriront une combinaison de journées d'enseignement en classe et à distance, avec un minimum de 50 % des jours de classe en présentiel. La fréquentation scolaire en personne sera facultative pour l'année scolaire 2020-2021 afin que les parents puissent prendre des décisions qui conviennent à leurs enfants et à leur famille. Les conseils scolaires offriront un enseignement à distance à tous les élèves qui choisiront cette option.

[LE MODÉRATEUR DOIT NOTER : QU'EN CE QUI CONCERNE LES ÉLÈVES DE 4^e ET 5^e SECONDAIRE, LES CENTRES DE SERVICES SCOLAIRES ET LES COMMISSIONS SCOLAIRES (ANGLOPHONES ET À STATUT PARTICULIER) PEUVENT OPTER POUR UNE SOLUTION ALTERNATIVE SI LE RÉAMÉNAGEMENT DE L'HORAIRE DES COURS EST IMPOSSIBLE POUR RESPECTER LE PRINCIPE DES GROUPES-CLASSES STABLES.]

- Parents de centres de taille moyenne de l'Ontario Avez-vous l'intention d'envoyer vos enfants à l'école en personne ? Pourquoi ou pourquoi pas ?
- Avez-vous des inquiétudes par rapport à les envoyer à l'école en personne ?
 - SI OUI : Quels genres de choses vous inquiètent ?

- AU BESOIN, DEMANDER : La santé de vos enfants ? Que vos enfants vous transmettent la COVID ou la transmettent à d'autres membres de votre famille ? Y a-t-il autre chose ?

- À votre avis, de quoi a-t-on le plus besoin pour rendre les choses plus sécuritaires dans les écoles ?
 - SONDER : Est-ce que les écoles ont besoin de plus d'espace afin de placer les enfants à plus grande distance les uns des autres ? Doivent-elles embaucher plus de personnel enseignant pour que les classes soient moins nombreuses ? Doivent-elles embaucher plus de personnel d'entretien ménager ? Y a-t-il autre chose ?

- Avez-vous entendu quoi que ce soit sur ce que le gouvernement du Canada a fait ou a annoncé récemment pour aider à rendre les écoles plus sécuritaires ?
 - SI OUI : Qu'avez-vous entendu ?

- Le gouvernement du Canada a annoncé qu'il accordait 2 milliards de dollars supplémentaires aux provinces et territoires pour les aider à faire en sorte que les enfants puissent retourner à l'école en toute sécurité. Est-ce que quelqu'un en a entendu parler ?
 - Que pensez-vous de cela ? Pensez-vous que cela va aider ?

- Selon vous, y a-t-il autre chose que le gouvernement du Canada pourrait faire afin d'aider les provinces et les territoires à s'assurer que les enfants peuvent retourner à l'école en toute sécurité ?

LES OPIOÏDES (15 minutes) Parents de grands centres de la Saskatchewan

Maintenant, j'aimerais parler d'un tout autre sujet...

- Avez-vous entendu quoi que ce soit sur les opioïdes récemment ? Qu'avez-vous entendu ?

- Pensez-vous qu'il y a une crise des opioïdes au Canada ? Pourquoi ou pourquoi pas ?
 - SI OUI : Quelles sont les raisons de cette crise ? Selon vous, qui est responsable du fait que ceci soit devenu une crise ?

ÉCLAIRCISSEMENT AU BESOIN :

Les opioïdes, comme le fentanyl, la morphine, l'oxycodone et l'hydromorphone, sont des médicaments pouvant calmer la douleur. Ces médicaments agissent sur votre esprit, votre humeur et

vos processus mentaux. Vous pouvez éprouver un sentiment d'euphorie ou avoir l'impression de « planer ». C'est pourquoi ils peuvent comporter un risque de mauvais usage.

- Maintenant, en ce qui concerne un mauvais usage des opioïdes, qui, selon vous, est le plus touché par cela ?
- Pensez-vous que la situation des opioïdes (c'est-à-dire le mauvais usage des opioïdes) au Canada s'améliore ou se détériore ?
- Que devrait faire le gouvernement du Canada, le cas échéant ?
- Certains ont proposé que le gouvernement du Canada décriminalise la possession de drogues illicites pour usage personnel, afin que les personnes souffrant de troubles liés à l'utilisation de substances soient détournées du système de justice pénale et qu'elles soient plutôt orientées vers une approche de soins de santé. Que pensez-vous de cette approche ?

ASSURANCE-MÉDICAMENTS (45 minutes) Population âgée de centres de taille moyenne du Québec, grands centres des provinces atlantiques, population âgée de grands centres de l'Alberta

- J'aimerais maintenant aborder un autre sujet.
- Qui connaît le terme « assurance-médicaments » ? Qu'est-ce qu'il signifie pour vous ?
- A Êtes-vous au courant de quelconques projets du gouvernement du Canada en ce qui concerne l'assurance-médicaments ? Qu'avez-vous entendu ?

AFFICHER À L'ÉCRAN :

En 2019, le gouvernement du Canada a annoncé qu'il avait l'intention d'aller de l'avant avec la mise en œuvre d'un régime national d'assurance-médicaments. Afin de rendre les médicaments sur ordonnance plus abordables et plus accessibles à un plus grand nombre de Canadiens, le gouvernement a déclaré son intention de travailler avec ses partenaires avec les objectifs suivants :

- Créer l'**Agence canadienne des médicaments**, une nouvelle agence nationale des médicaments qui coordonnerait la négociation des prix des médicaments sur ordonnance au nom des Canadiens. L'achat de ces médicaments en grandes quantités permettra aux Canadiens d'économiser jusqu'à 3 milliards de dollars par an sur le long terme.
- Élaborer une **stratégie nationale pour les médicaments à coût élevé destinés aux maladies rares** afin d'aider les Canadiens à avoir un meilleur accès à ces médicaments, comme première étape vers une couverture élargie.

- Lorsque vous pensez aux différentes priorités en matière de soins de santé, quelle est l'importance de l'assurance-médicaments en tant que priorité par rapport aux autres ? Qu'est-ce qui vous fait dire cela ?
 - Est-ce que la COVID vous fait penser différemment quant à la nécessité d'une assurance-médicaments ? De quelle façon ?
 - SONDER : Certaines personnes disent que la COVID a révélé l'importance de protéger les populations vulnérables comme les personnes âgées à faibles revenus, et de s'assurer d'une bonne santé, et donc que l'assurance-médicaments est plus importante que jamais. Que pensez-vous de ce point de vue ? Êtes-vous en accord ou en désaccord ? Qu'est-ce qui vous fait dire cela ?
 - SONDER : Certaines personnes disent que si les gens peuvent se payer des médicaments, ils ont moins de chances d'avoir besoin d'être hospitalisés pour se faire soigner, ce qui donne aux hôpitaux une plus grande capacité à faire face à d'autres choses comme les pandémies. Que pensez-vous de ce point de vue ? Êtes-vous en accord ou en désaccord ? Qu'est-ce qui vous fait dire cela ?
- Parlons maintenant un peu de ce à quoi ressemblerait le régime d'assurance-médicaments. Il pourrait s'agir d'un régime universel comme le système de santé, *ou* il pourrait s'agir d'un régime de type « filet de sécurité » qui ne couvrirait les Canadiens que dans les cas où le coût des médicaments dépasserait un certain pourcentage de leur revenu.
 - Quels sont les avantages de l'approche universelle ?
 - Quels sont les avantages de l'approche du filet de sécurité ?
 - Quelle approche est la plus équitable ?

Le régime national d'assurance-médicaments pourrait être entièrement public comme le système de santé dans le cadre duquel tous les Canadiens sont assujettis au même régime. Autrement, il pourrait servir à « combler les lacunes » de façon à ce que les gens puissent tout de même utiliser les régimes publics et privés actuels, et être conçu pour permettre que tous soient couverts, y compris ceux qui n'ont actuellement pas d'assurance-médicaments.

- Quels sont les avantages d'un régime universel où tous bénéficient de la même couverture ?
- Quels sont les avantages de « combler ces lacunes » ?
- Quelle approche est la plus équitable ?

Il reste également à déterminer quels médicaments seront couverts par le régime. L'une des approches possibles serait de limiter la couverture aux médicaments nécessaires pour la survie. Une autre approche serait d'ajouter fréquemment des médicaments sur ordonnance qui sont couverts par la plupart des régimes d'assurance de base. Enfin, il pourrait s'agir d'une approche plus inclusive qui couvrirait presque tout ce que comprennent les régimes publics et privés existants.

- Selon vous, quelle devrait être l'étendue de la couverture dans le cadre du régime d'assurance-médicaments ?
 - Qu'en penseriez-vous si un moins grand nombre de médicaments étaient couverts, mais que les gens avaient la possibilité d'étendre leur couverture au moyen de compléments d'assurance offerts au travail ou par un régime privé ?
- Selon vous, quel processus devrait être suivi afin de déterminer quels médicaments seront couverts ?
- Passons maintenant aux médicaments spécialisés très coûteux utilisés pour traiter des maladies rares. Dans ces cas, il n'existe souvent que très peu de données cliniques qui appuient l'efficacité de ces médicaments généralement très chers. Ces derniers peuvent toutefois donner de l'espoir à des patients très malades qui ont un nombre limité d'options. Est-ce que ces types de médicaments devraient être couverts ?
- Croyez-vous que la liste de médicaments couverts devrait être identique pour toutes les provinces, ou est-ce que certaines modifications devraient être permises ?

Enfin, il reste à savoir qui paiera pour le régime national d'assurance-médicaments.

- Les Canadiens devraient-ils avoir à payer eux-mêmes une partie des coûts du régime d'assurance-médicaments, soit sous la forme de petits montants (p. ex. des frais d'ordonnance pour un médicament) ou d'une prime annuelle ?
- Étant donné que les employeurs paient déjà pour des régimes privés, devraient-ils avoir à déboursier un montant pour le régime d'assurance-médicaments ?
- Maintenant que vous en savez un peu plus sur le régime d'assurance-médicaments, avez-vous d'autres questions ou suggestions à ce sujet ?
- Croyez-vous que « régime d'assurance-médicaments » est le meilleur terme pour désigner ce type de système ? Avez-vous d'autres suggestions ?
- **SONDAGE** : Maintenant, sur la base de toutes les discussions que nous avons eues, que pensez-vous du régime national d'assurance-médicaments ? Je vais vous montrer un sondage et j'aimerais que vous choisissiez soit « le régime national d'assurance-médicaments est une bonne idée », soit « le régime national d'assurance-médicaments est une mauvaise idée ».
 - Maintenant, j'aimerais que vous écriviez une brève explication des raisons pour lesquelles vous avez fait ce choix.

QUESTIONS AUTOCHTONES (60 minutes) Peuples autochtones de Winnipeg et de la RCN

J'aimerais maintenant porter notre attention sur les questions autochtones.

- Quels sont les enjeux autochtones importants sur lesquels le gouvernement du Canada devrait, selon vous, se concentrer ?
- Est-ce que le gouvernement du Canada a fait quoi que ce soit de bien ?
- Que peut-il améliorer ?

- Avez-vous entendu quoi que ce soit au sujet de la pêche en Nouvelle-Écosse ?
 - DEMANDER AU BESOIN : Quelque chose au sujet des pêcheurs autochtones et des pêcheurs commerciaux concernant la pêche au homard ?
 - Qu'avez-vous entendu ?
 - Que pensez-vous de cela ?
 - Considérez-vous qu'il s'agit d'une question importante sur laquelle le gouvernement du Canada doit se pencher ?

Maintenant, passons à un autre sujet...

- Avez-vous entendu parler de la Déclaration des Nations unies sur les droits des peuples autochtones ?

AFFICHER À L'ÉCRAN

La Déclaration des Nations unies sur les droits des peuples autochtones est un document international adopté par les Nations unies en 2007 qui énonce les droits fondamentaux que les peuples autochtones devraient avoir dans le monde entier. Elle explique comment les gouvernements devraient respecter les droits de l'homme des peuples autochtones.

La Déclaration universelle des droits de l'homme comprend 46 articles qui décrivent les droits spécifiques et les mesures que les gouvernements doivent prendre pour protéger ces droits. Les principaux thèmes de la déclaration sont les suivants :

- Le droit à l'autodétermination
 - Le droit à l'identité culturelle
 - Le droit au consentement libre, préalable et éclairé (c'est-à-dire le droit d'être consulté et de prendre des décisions sur toute question susceptible d'affecter les droits des peuples autochtones)
 - Protection contre la discrimination
-
- Disons que le Canada mettait en œuvre intégralement la Déclaration des Nations unies sur les droits des peuples autochtones. Que pensez-vous que cela impliquerait ? À quels types de changements vous attendriez-vous ?

J'aimerais maintenant parler de racisme pour un moment...

- Comment définiriez-vous le racisme systémique ?

ÉCLAIRCISSEMENT AU BESOIN

Le racisme systémique est généralement défini comme un problème lié à la manière dont la société est organisée, et pas seulement aux attitudes individuelles à l'égard de certains groupes. C'est donc comme s'il y avait des préjugés structurels ou si une lentille raciste était intégrée dans nos divers systèmes et institutions, qui mènent à un traitement ou à des dénouements injustes pour certains groupes. Ainsi, plutôt que de se pencher sur le problème de quelques « brebis galeuses » (par exemple, quelques personnes racistes), le racisme systémique est essentiellement lorsque le troupeau entier est gâté.

- Croyez-vous qu'il existe du racisme systémique envers les peuples autochtones au Canada ?
- Existe-t-il des institutions ou des systèmes qui sont responsables du racisme systémique au Canada ?
 - SI NÉCESSAIRE : par exemple, nos systèmes d'éducation, nos systèmes de santé, etc. ?
 - SI OUI : quels types de changements doivent être apportés à ces institutions/systèmes pour améliorer la façon dont ils traitent les peuples autochtones ?
- Qu'en est-il de la GRC ou des corps policiers — y a-t-il un racisme systémique dans nos systèmes de maintien de l'ordre ? En quoi consiste-t-il ? Avez-vous des exemples ou des anecdotes qui vous viennent à l'esprit ?
- Qu'en est-il de notre système judiciaire, comme la façon dont les tribunaux interviennent auprès des peuples autochtones et dont ils prononcent les peines — y a-t-il un racisme systémique dans ce contexte ? En quoi consiste-t-il ? Avez-vous des exemples ou des anecdotes qui vous viennent à l'esprit ?

J'aimerais maintenant parler d'eau potable pour un petit moment...

- Avez-vous entendu parler des efforts déployés par le gouvernement du Canada pour lever les avis sur l'eau potable à long terme dans les réserves ?

Je vais vous montrer un document infographique portant sur le travail qu'effectue le gouvernement fédéral afin de lever les avis sur la qualité de l'eau potable à long terme et ensuite je vous demanderai votre opinion à ce sujet.

AFFICHER LE DOCUMENT INFOGRAPHIQUE « Avis sur la qualité de l'eau potable à long terme touchant des systèmes publics dans les réserves »

- Quelles sont vos premières réactions ?
- Maintenant que vous avez vu cela, comment évaluez-vous les progrès réalisés par le gouvernement du Canada quant à cette question ? Diriez-vous qu'il a fait beaucoup de progrès, un peu, aucun, ou qu'il a aggravé la situation ?
- Que devrait faire d'autre le gouvernement du Canada pour améliorer l'eau potable dans les réserves ?

LE DISCOURS DU TRÔNE (20-60 minutes) Petits centres du Québec, Lower Mainland, prestataires de la PCU de la GRM, prestataires de la PCU de la RGT

J'aimerais maintenant tourner notre attention vers un autre sujet.

- Avez-vous vu, lu ou entendu quoi que ce soit à propos du discours du Trône du gouvernement du Canada ?
 - SI OUI : Qu'avez-vous entendu ?

Petits centres du Québec, Lower Mainland, prestataires de la PCU de la GRM, prestataires de la PCU de la RGT ÉCLAIRCISSEMENT AU BESOIN

Hier ou mercredi dernier, une nouvelle session du Parlement s'est ouverte avec le discours du Trône, dans lequel furent énoncés l'orientation et les objectifs du gouvernement, ainsi que la façon dont il compte les respecter.

- Maintenant que j'ai partagé avec vous quelques informations, vous souvenez-vous d'en avoir entendu parler ?

SI OUI :

- Qu'avez-vous entendu ? Qu'avez-vous entendu à propos de ce qui y est inclus ?
- Quel est le point central de ce nouveau plan ?
- Prestataires de la PCU de la GRM, prestataires de la PCU de la RGT Y a-t-il quelque chose dans ce nouveau plan qui vous a particulièrement plu ou qui ne vous a pas plu ?

Petits centres du Québec, Lower Mainland J'aimerais maintenant passer en revue quelques éléments du discours du Trône.

- Petits centres du Québec, Lower Mainland Voici une liste des quatre principaux piliers du discours :

Petits centres du Québec, Lower Mainland AFFICHER À L'ÉCRAN :

- Rebâtir en mieux afin de créer un Canada plus fort et plus résilient
 - Lutter contre la pandémie et sauver des vies
 - Être fidèle à qui nous sommes en tant que Canadiens, faire des progrès sur le plan de l'égalité des sexes, de la réconciliation et de la lutte contre la discrimination
 - Soutenir les gens et les entreprises aussi longtemps que la crise durera, en prenant les mesures qui s'imposeront
-
- **Petits centres du Québec, Lower Mainland** **SONDAGE 1** : Je vais procéder à un sondage. J'aimerais que vous choisissiez celui sur lequel il est le plus important pour le gouvernement du Canada de se concentrer. (Les participant(e)s doivent sélectionner qu'**UNE** seule option.)
 - **Petits centres du Québec, Lower Mainland** J'aimerais maintenant passer en revue celui que vous avez choisi comme étant pour vous le plus important. AFFICHER LES RÉSULTATS DU SONDAGE 1 À L'ÉCRAN.
 - **Petits centres du Québec, Lower Mainland** **DEMANDER À CHAQUE PARTICIPANT(E) D'ÉNUMÉRER SON CHOIX ET D'EXPLIQUER POURQUOI.**
 - **Petits centres du Québec, Lower Mainland** Si l'on considère maintenant les quatre piliers, est-ce que cela a du sens que le gouvernement se concentre sur ces éléments clés ? Pourquoi ou pourquoi pas ?
 - **Petits centres du Québec, Lower Mainland** Je vais maintenant vous montrer une liste de quelques-unes des priorités que le gouvernement du Canada s'est engagé à mettre en œuvre dans le discours du Trône :

Petits centres du Québec, Lower Mainland AFFICHER À L'ÉCRAN :

- Créer un régime national universel d'assurance-médicaments afin que toute la population canadienne ait accès à des médicaments d'ordonnance abordables
- Créer plus d'un million d'emplois grâce à des outils tels que des investissements dans les infrastructures et des mesures incitant les employeurs à embaucher et à conserver leurs travailleurs
- S'assurer d'avoir des options permettant d'offrir des tests de dépistage de la COVID-19 plus rapides, y compris la possibilité de répondre rapidement aux besoins urgents à cet égard
- Donner aux municipalités la capacité de restreindre davantage ou d'interdire les armes de poing, et de renforcer les mesures de contrôle du flux d'armes illégales qui entrent au Canada

- Contribuer à faire du Canada un leader mondial dans le domaine des technologies propres en lançant un nouveau fonds pour attirer les investissements dans la fabrication de produits zéro émission et en réduisant de moitié le taux d'imposition des sociétés pour ces entreprises afin de créer des emplois
 - Mettre en place un plan qui permettra de surpasser les objectifs climatiques du Canada pour 2030, et légiférer sur l'objectif canadien de zéro émission nette d'ici 2050
 - Augmenter la pension de la Sécurité de la vieillesse lorsqu'une personne âgée atteint 75 ans et augmenter la prestation de survivant du Régime de pensions du Canada
 - Mettre en place d'autres mesures d'aide pour les industries les plus durement touchées, notamment l'industrie du voyage et du tourisme, l'industrie de l'accueil et les industries culturelles comme les arts de la scène
 - Investir massivement dans la formation des travailleurs et les mettre en contact avec des employeurs et de bons emplois
 - Investir dans la création d'un système d'apprentissage et de garde des jeunes enfants durable, à long terme et à l'échelle du Canada
 - Sanctionner les exploitants de foyers de soins de longue durée et toute autre personne qui néglige les aînés dont ils prennent soin
 - Collaborer avec les provinces et les territoires en vue d'établir de nouvelles normes nationales pour les soins de longue durée afin que les personnes âgées bénéficient du meilleur soutien possible
- **Petits centres du Québec, Lower Mainland** **SONDAGE 2** : Je vais procéder à un sondage. J'aimerais que vous choisissiez celles qui sont les plus importantes pour vous personnellement. (Les participant(e)s doivent sélectionner au maximum TROIS priorités.)
 - **Petits centres du Québec, Lower Mainland** J'aimerais maintenant passer en revue les priorités que vous avez choisies comme étant les plus importantes pour vous personnellement. AFFICHER LES RÉSULTATS DU SONDAGE 2 À L'ÉCRAN.
 - **DEMANDER À CHAQUE PERSONNE D'ÉNUMÉRER LEURS CHOIX DES PLUS IMPORTANTS ET D'EXPLIQUER LEQUEL LEUR EST LE PLUS IMPORTANT ET POURQUOI.**
 - **Petits centres du Québec, Lower Mainland** **SONDAGE 3** : J'aimerais maintenant que vous choisissiez parmi celles-ci, le cas échéant, celles que vous pensez que le gouvernement du Canada ne devrait pas entreprendre. (Les participant(e)s doivent sélectionner au maximum TROIS priorités.)

- **Petits centres du Québec, Lower Mainland** J'aimerais maintenant passer en revue les priorités que vous pensez que le gouvernement du Canada ne devrait pas entreprendre. AFFICHER LES RÉSULTATS DU SONDAGE 3 À L'ÉCRAN.
- **DEMANDEZ À CHAQUE PERSONNE D'ÉNUMÉRER LES PRIORITÉS QU'ELLE A CHOISIES COMME ÉTANT DES CHOSES QUE LE GOUVERNEMENT NE DEVRAIT PAS ENTREPRENDRE ET D'EXPLIQUER POUR LAQUELLE ELLE EST LA PLUS CONVAINCUE ET POURQUOI.**
- **Petits centres du Québec, Lower Mainland** Maintenant que nous avons passé en revue et discuté des principaux piliers et de certaines des priorités, que pensez-vous du discours du Trône en général ?

Prestataires de la PCU de la GRM, prestataires de la PCU de la RGT ÉCLAIRCISSEMENT AU BESOIN

Le gouvernement du Canada a introduit quatre piliers principaux sur lesquels il souhaite se concentrer.

- Rebâtir en mieux afin de créer un Canada plus fort et plus résilient ;
 - Lutter contre la pandémie et sauver des vies ;
 - Être fidèle à qui nous sommes en tant que Canadiens, faire des progrès sur le plan de l'égalité des sexes, de la réconciliation et de la lutte contre la discrimination ;
 - Soutenir les gens et les entreprises aussi longtemps que la crise durera, en prenant les mesures qui s'imposeront.
- Pensez-vous que le gouvernement du Canada rate d'importantes occasions ? Est-ce qu'il omet quelque chose ?
 - SI OUI : Sur quelles autres priorités le gouvernement doit-il se concentrer ?
 - **Prestataires de la PCU de la GRM, prestataires de la PCU de la RGT** Est-ce que quelqu'un a entendu quoi que ce soit au sujet du déficit prévu par le gouvernement du Canada cette année ? Qu'avez-vous entendu ?
 - **Prestataires de la PCU de la GRM, prestataires de la PCU de la RGT** Il y a quelques mois, le gouvernement du Canada prévoyait un déficit de 343 milliards de dollars cette année. Que pensez-vous de cela ?
 - Sur la base du discours du Trône, pensez-vous que le déficit va augmenter, diminuer ou rester le même ? Que pensez-vous de cela ?

CONCLUSION (5 minutes) Tous les lieux

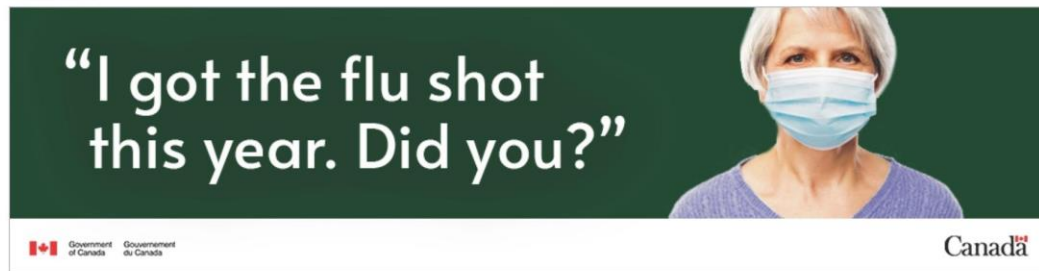
Appendix C – Advertising Concepts

COVID-19 Youth Ad Testing Seasonal Flu Concept Testing

Senior Concepts

Banner 1

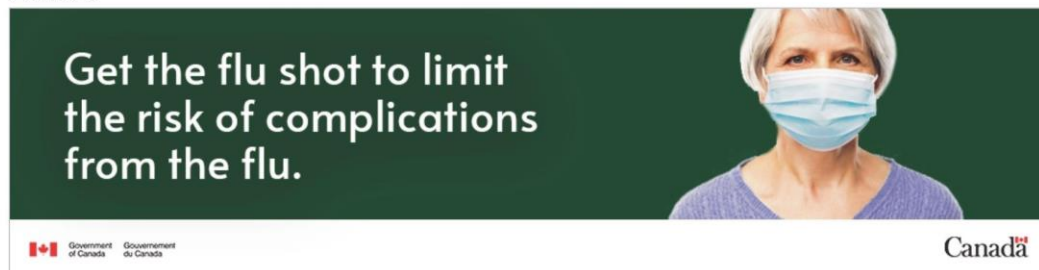
Frame 1



Frame 2



Frame 3

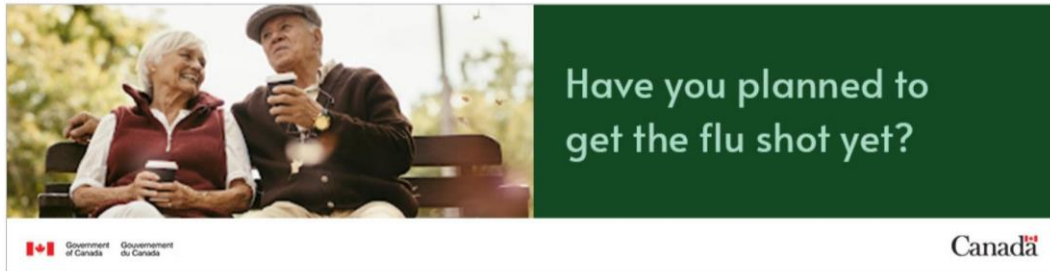


The above is an animated banner that consists of three frames. All frames have a dark green background colour and feature large text in on the left-hand side. The text on the first frame reads, "I got the flu shot this year. Did you?" in quotation marks. The second frame reads, "Protecting ourselves is more important than ever." The final frame reads, "Get the flu shot to limit the risk of complications from the flu." In all three frames, to the right-hand side of the text, there is an image of an older woman

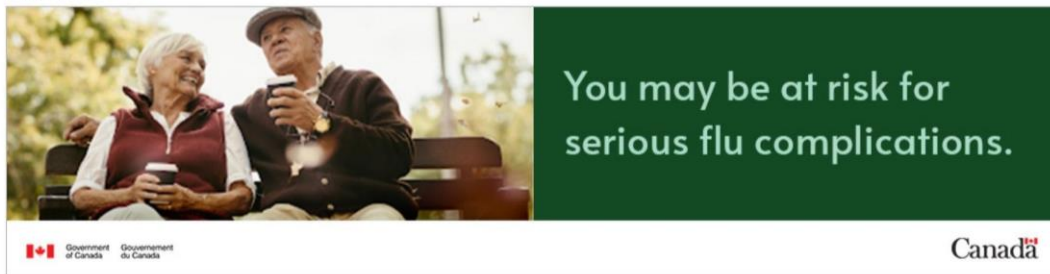
with short, white hair who is wearing a purple sweater and a light blue non-medical mask looking directly at the viewer. At the bottom of each frame, on a white background, is the Government of Canada logo and watermark.

Banner 2

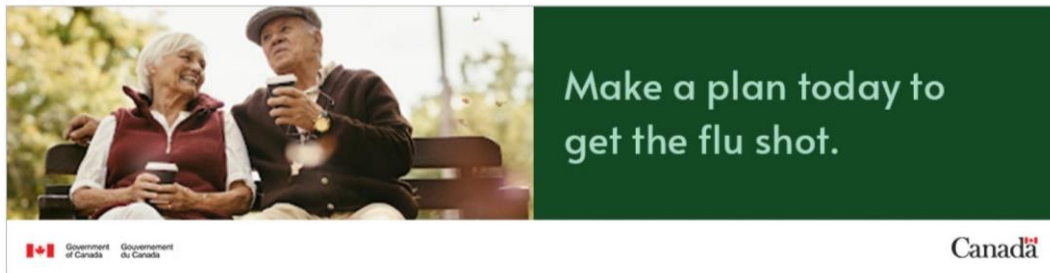
Frame 1



Frame 2



Frame 3



The above is an animated banner that consists of three frames. On the left-hand side of each frame is an image of an older couple sitting on a bench outdoors, drinking from disposable cups. The woman is looking at the man on her left and laughing, while the man seems to be speaking while looking into the distance in front of him. To the right of the image, there is a dark green background with lighter green font. The text on the first frame reads, "Have you planned to get the flu shot yet?" The second frame reads, "You may be at risk for serious flu complications." The final frame reads, "Make a plan today to get the flu shot." At the bottom of each frame, on a white background, is the Government of Canada logo and watermark.

Parents/Pregnant Concepts

Banner 1

Frame 1



Frame 2



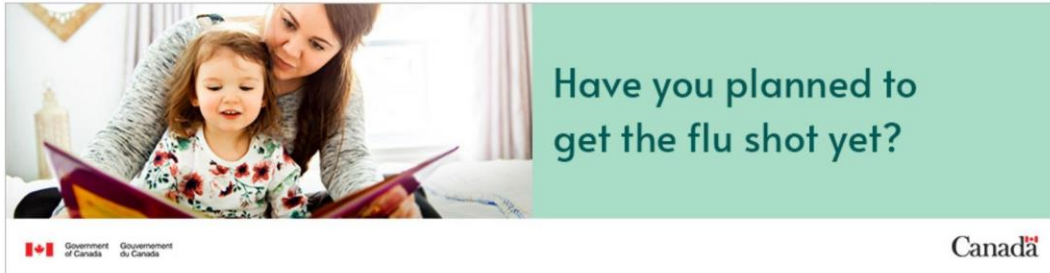
Frame 3



The above is an animated banner that consists of three frames. All frames have a dark green background colour and feature large white text on the left-hand side. The text on the first frame reads, “We got the flu shot this year. Did you?” in quotation marks. The second frame reads, “Protecting your family is more important than ever.” The last frame reads, “Get the flu shot to limit the risk of complications from the flu.” In all three frames, to the right-hand side of the text, there is an image of a mother with dark, short, curly hair with her son looking over her shoulder. Both are wearing white opaque non-medical masks. Behind the masks, both mother and son appear to be smiling. At the bottom of each frame, on a white background, is the Government of Canada logo and watermark.

Banner 2

Frame 1



Frame 2



Frame 3

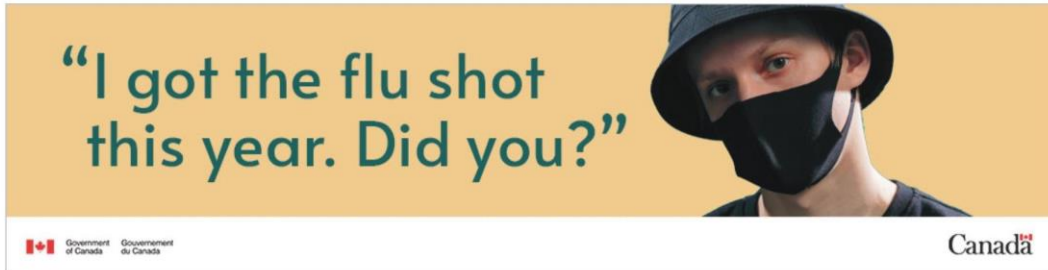


The above is an animated banner that consists of three frames. On the left-hand side of each frame is an image of a woman reading a book to a young girl who is sitting on her lap. To the right of the image, there is a light green background with darker green font. The text on the first frame reads, "Have you planned to get the flu shot yet?" The second frame reads, "Your loved ones may be at risk for serious flu complications." The final frame reads, "Make a plan today for your family to get the flu shot." At the bottom of each frame, on a white background, is the Government of Canada logo and watermark.

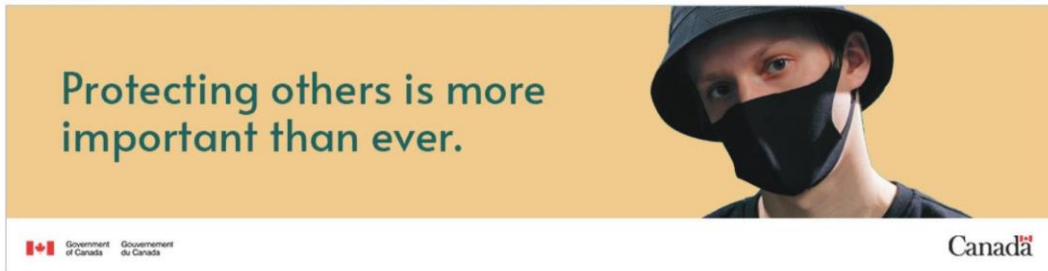
Young Adult Concepts

Banner 1

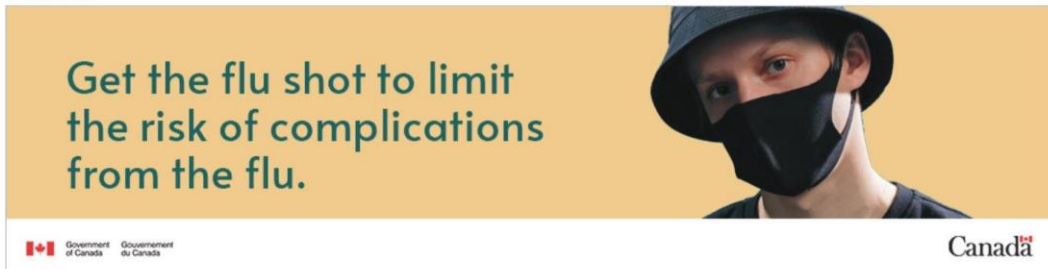
Frame 1



Frame 2



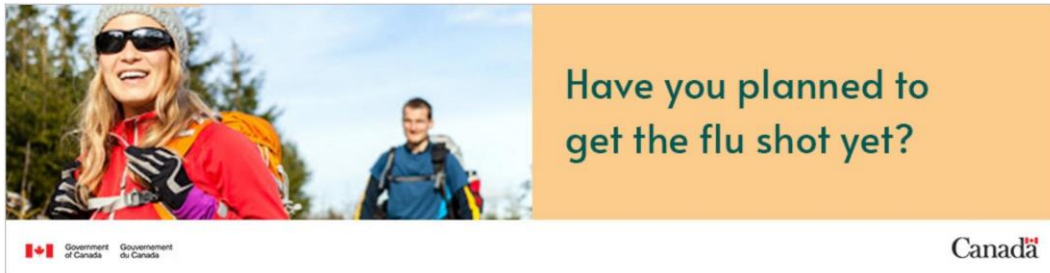
Frame 3



The above is an animated banner that consists of three frames. All frames have a tan background colour in colour and feature large dark green text on the left-hand side. The text on the first frame reads, "I got the flu shot this year. Did you?" in quotation marks. The second frame reads, "Protecting others is more important than ever." The final frame reads, "Get the flu shot to limit the risk of complications from the flu." To the right-hand side of the text, there is an image of a young man who is wearing a black bucket hat and black non-medical face mask looking directly at the viewer. At the bottom of each frame, on a white background, is the Government of Canada logo and watermark.

Banner 2

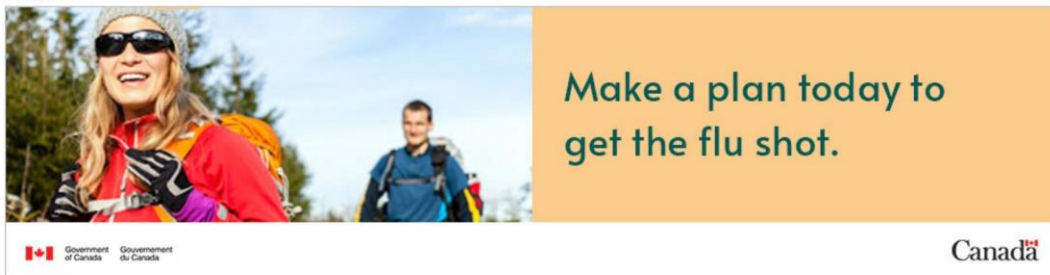
Frame 1



Frame 2



Frame 3



The above is an animated banner that consists of three frames. On the left-hand side of each frame is an image of a man and a woman outside, who appear to be on a hike. Both are in outdoor clothing and wearing backpacks. The woman is in the foreground of the image and is smiling and the man is following behind her in the background. To the right of the image, there is a tan background with dark green font. The text on the first frame reads, "Have you planned to get the flu shot yet?" The second frame reads, "People around you may be at risk for flu complications." The final frame reads, "Make a plan today to get the flu shot." At the bottom of each frame, on a white background, is the Government of Canada logo and watermark.

Childhood Vaccination Concept Testing

Video 1

SANTE CANADA SAFETY Scooter Father

The above video begins with a scene of a mother bent down to do up a young girl's bright pink helmet in a park. The girl is standing on a yellow scooter. The second scene showcases a father holding a newborn child. The father has a burping cloth over his shoulder and is holding the child with both hands while kissing them on the forehead. The third scene depicts a mother with a toddler on her lap. Across from the mother is a nurse applying a bandage to the child's arm and smiling. Next, there is a white screen with black text that reads, "You protect them every day," and narrator says the same message aloud. Then, the text switches to read, "So do vaccines." Underneath this text in smaller font appear the words "Learn more" and the website URL "Canada.ca/ChildhoodVaccines." Lastly, the Government of Canada logo appears on screen and the narrator says "A message from the Government of Canada."

Video 2

SANTE CANADA SAFETY Walk carseat

The above video begins with a scene of a father holding a young girl's hand while they walk across the street at a designated crosswalk. The girl is holding a stuffed bear and is looking up and smiling at the man. The next scene depicts a mother buckling a toddler into a car seat. The two are laughing and smiling together. The third scene depicts a mother with a toddler on her lap. Across from the mother is a nurse applying a bandage to the child's arm and smiling. Next, there is a white screen with black text that reads, "You protect them every day," and a narrator says the same message aloud. Then, the text switches to read, "So do vaccines." Underneath this text in smaller font, appear the words "Learn more" and the website URL "Canada.ca/ChildhoodVaccines." Lastly, the Government of Canada logo appears on screen and the narrator says "A message from the Government of Canada."

Infographic: Progress on lifting long-term drinking water advisories on public systems on reserves

Updated February 15, 2020



All

long-term drinking water advisories on public systems on reserves **lifted** by



88

long-term drinking water advisories lifted since November 2015

61

long-term drinking water advisories in effect

Projects underway or completed as of September 30, 2019



441

projects to repair, upgrade or build infrastructure



59

supporting projects and initiatives



74

feasibility studies and projects in the design phase

The above is an infographic with a white backdrop, but the bottom third of the image had light blue, scaling into darker blue waves lower down. The top right of the image denotes "Updated February 15, 2020" in grey font, underlined by a dark blue wavy line. To the right, there is a dark blue water droplet with a white tap inside that is leaking a drop of water. In the middle of the image to the left, text reads, "All long-term drinking water advisories on public systems on reserved lifted by" in grey font, but the words "all" and "lifted" are in blue. Next to this text on the left, there is a calendar image with "March 2021" printed inside. To the right, there is a dotted blue line, and on the right of the line, text reads "88 long-term drinking water advisories lifted since November 2015" and below "61 long-term drinking water advisories in effect." In both cases, the numbers are significantly larger than the words. Below, spanning the bottom third of the image, a blue banner reads, "Projects underway or completed as of September 30, 2019" in white text. Below, separated by dotted blue lines, are three sections. The left-most section has a pylon in a water droplet in blue, with grey text reading "441 projects to repair, upgrade or build infrastructure." The middle section has three people in the water droplet in blue with text below reading "59 supporting projects and initiatives" in grey text and to the right, a map with a magnifying glass in a droplet in blue, with grey text reading "74 feasibility studies and projects in the design phase."