

Appendix 1: A Cross-Border Survey of Medical Students' Knowledge and Attitudes on Health Care Delivery Systems in the United States and Canada

Section I: Introduction

Dear Medical Student,

We are a research team at the McGill University Faculty of Medicine, Montreal, Quebec, and the University of California, Irvine School of Medicine, Irvine, California, studying the knowledge and attitudes of medical students in the United States and Canada on health care policy issues and health care delivery systems. The study consists of a short survey of medical students in the province of Ontario and the state of California. As a future physician who could potentially shape the future of health care delivery, we value your opinion and hope that you will complete this survey. The questionnaire is 5 pages long and should take no more than 10 minutes to complete. Please note the following:

- You are being asked to participate in a research study about what medical students know and how they feel about the health care delivery systems in Canada and the United States.
- You are eligible to participate in this study if you are a medical student attending school in the Canadian province of Ontario or the state of California.
- The research procedures involve completing an anonymous on line survey.
- Possible discomfort(s) associated with the study are: None
- There are no direct benefits from participation in the study. However, this study may help medical educators develop more effective health policy related curricula, and may help health care policy-makers understand the views of future physicians.
- Participation in this study is voluntary. There is no cost to you for participating. You may refuse to participate or discontinue your involvement at any time without penalty. You may choose to skip a question or a study procedure.
- You will receive no compensation for participating in this research. However, **all survey participants will be entered into a raffle to win a free Apple Ipad.**
- All research data collected will be stored securely and confidentially as anonymous survey responses using Survey Monkey.
- Any information derived from this research project that personally identifies you will not be voluntarily released or disclosed without your separate consent, except as specifically required by law.

Appendix to: Emil S, Nagurney JM, Mok E, Prislin MD. Attitudes about and knowledge of health care policies and systems: a survey of medical students in Ontario and California. *CMAJ Open* 2014. DOI:10.9778/cmajo.20130094. Copyright © 2014 The Author(s) or their employer(s).

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- If you have any comments, concerns, or questions regarding the conduct of this research please contact the researchers listed at the bottom of this form.
- If you are unable to reach the researchers listed at the bottom of the form and have general questions, or you have concerns or complaints about the research, or questions about your rights as a research subject, please contact UCI's Office of Research Administration by phone, (949) 824-6662, by e-mail at IRB@rgs.uci.edu or at University Tower - 4199 Campus Drive, Suite 300, Irvine, CA 92697-7600.

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Section II: Demographic information

- I attend medical school in:**
 - California
 - Ontario
- I attend medical school at:**
 - Michael G. DeGroote School of Medicine, McMaster University
 - University of Ottawa
 - Queen's University
 - University of Toronto
 - Schulich School of Medicine, University of Western Ontario
 - University of California, Irvine
 - University of California, San Diego
 - University of California, San Francisco
 - UCLA David Geffen School of Medicine
 - University of California, Davis
 - Stanford University
 - Keck School of Medicine of USC
 - Loma Linda University
- Please enter your email address in the space below. (Students who complete the survey will be automatically entered into the Ipad raffle. Winners will be notified via email.)**
- Age**
 - 18-21
 - 22-25
 - 26-29
 - 30-33
 - ≥ 34
- Gender**

- a. Male b. Female
6. **Ethnicity**
- a. White (non-Hispanic)
- b. Black or African-American (non-Hispanic)
- c. Hispanic or Latino
- d. Asian or Pacific Islander
- e. American Indian, Alaska Native , First Nations, Métis, or Inuit
- f. Other
7. **Highest level of education achieved prior to medical school**
- a. No degree b. Bachelor's degree c. Master's degree d. PhD e. Other (e.g. MPH, MBA)
8. **Current Year in Medical School**
- a. 1 b.2 c.3 d.4
9. **Anticipated field**
- a. Primary care (family medicine, general pediatrics, general internal medicine)
- b. Non-primary care
- c. Undecided
10. **What will be your anticipated debt at the end of medical school (undergraduate and medical school combined)?**
- a. Less than \$50,000
- b. \$50,000 - \$99,999
- c. \$100,000 - \$150,000
- d. More than \$150,000
11. **Are any of your first or second degree relatives (parents, siblings, uncles, aunts, cousins, grandparents) physicians?**
- a. Yes b. No
12. **How would you characterize yourself politically?**
- a. Very conservative b. Conservative c. Moderate d. Liberal e. Very liberal
13. **Please indicate your citizenship.**
- a. United States
- b. Canada
- c. Dual (U.S. and Canada)
- d. Other

Section III: Future plans

14. Please answer the following questions according to this scale:
1.Strongly disagree, 2.Disagree, 3. Neither agree nor disagree, 4.Agree, 5.Strongly agree
- a. I plan to become involved in health care policy issues as a physician.
- b. I plan to take leadership in health care policy issues as a physician.
- c. I plan to support universal health care coverage as a physician.
- d. Health policy will have no effect on how I care for my patients.
- e. I don't expect to have any time to be active politically as a physician.
15. Are you currently an active member of an organization that addresses health care policy issues (e.g. AMA, CMA, AMSA, CaHPSA)?

- a. Yes
 - b. No
16. Do you currently hold a leadership role in an organization that addresses health care policy issues (e.g. AMA, CMA, AMSA, CaHPSA)?
- a. Yes
 - b. No

Section IV: Attitudes on health care policy

17. Please indicate whether you strongly agree, agree, disagree, or strongly disagree with each of the following statements.

1.Strongly agree 2. Agree 3. Neither agree nor disagree 4. Disagree 5. Strongly disagree.

- a. Access to health care is a fundamental human right.
- b. The government should **guarantee** health care access for all citizens.
- c. The government should **provide** health care access for all citizens, even if higher taxation is needed to generate sufficient revenue.
- d. The government should **regulate** the prices of health care services.
- e. Health care services would improve if the government had *no* involvement in health care.
- f. All citizens should have access to the **same standard** of medical care without regard to their financial means.
- g. All children should have access to the **same standard** of medical care without regard to their parents' financial means.

18. Please indicate whether you strongly agree, agree, disagree, or strongly disagree with each of the following statements.

1.Strongly disagree 2. Disagree 3. Neither agree nor disagree 4. Agree 5. Strongly agree.

- a. To constrain medical costs, physicians should accept a cut in pay.
- b. To constrain medical costs, insurance companies should lower their profit margin.
- c. To constrain medical costs, drug companies should lower their prices.
- d. To constrain medical costs, hospitals should decrease their operating costs.
- e. To constrain medical costs, hospitals should *not* be operated for profit.

19. For each of the outcomes below, please choose which of the following systems you think will most likely achieve the intended outcome.

- A. **Government-owned** public health care system, in which the government owns hospitals and other health care facilities and directly employs physicians
- B. **Government-financed** public health care system, in which the government pays private entities to deliver health care
- C. A **mixed private/public** system with a large role for the private sector, in which private insurance companies sell plans directly and the government provides insurance and a safety net for certain populations

- D. **Entirely private** system, in which private insurance companies sell plans directly to individuals and businesses and private health care facilities and providers provide care to patients, with no government subsidies.
 - E. No opinion
1. Access to care for everyone
 2. Providing care of the highest quality
 3. Appropriate delivery of health care services (i.e. avoidance of over-treatment or under-treatment)
 4. Preventing illness/disease
 5. Fostering technological innovation
 6. The least waiting time for treatments
 7. Freedom of choice of physician
 8. Adequate physician income
 9. The least paperwork/bureaucratic burden for physicians
 10. Least interference with physicians' decisions about patient care
 11. Fewest potential financial conflicts of interest for physicians
 12. In which system would you prefer to practice?
 13. In which system would you prefer to be a patient?

Section V: Knowledge of health care policy

20. Please answer the following questions about your knowledge of health care policy. (*For the purposes of this questionnaire, "your" health care system refers to the health care system of the country in which you attend medical school, regardless of your nationality. "Other" health care systems refer to systems in any other country.)

1. How would you rate your understanding of your* health care system **before** starting medical school?
a. Excellent b. Good c. Fair d. Poor
 2. How would you rate your understanding of your health care system **now**?
a. Excellent b. Good c. Fair d. Poor
 3. How would you rate your understanding of health care systems in other countries **before** starting medical school?
a. Excellent b. Good c. Fair d. Poor
 4. How would you rate your understanding of health care systems in other countries **now**?
a. Excellent b. Good c. Fair d. Poor
21. How would you rate the **quantity** of instruction on health care policy received in your medical school education?
a. Too much b. Adequate. c. Too little d. N/A
22. How would you rate the **quality** of instruction on health care policy received in your medical school education?
a. Excellent b. Good c. Fair d. Poor e. N/A

23. How would you characterize the instruction on health care policy received in medical school?
- Biased towards conservative policies
 - Fair
 - Biased towards liberal policies
 - Don't know
24. What is your **primary** source of information about *your* health care system? (Please choose one.)
- Newsmedia
 - Health care policy / medical journals
 - Medical school curriculum
 - Other formal studies (e.g. MPH, PhD)
 - Medical school faculty
 - Medical Organizations (e.g. AMA, CMA, AMSA, etc.)
 - Friends / family
 - Other -----
 - None
25. What is your **primary** source of information about *other* health care systems? (Please choose one.)
- Newsmedia
 - Health care policy / medical journals.
 - Medical school curriculum.
 - Other formal studies (e.g. MPH, PhD)
 - Medical school faculty
 - Medical Organizations (e.g. AMA, CMA, AMSA, etc .)
 - Friends/family
 - Other -----
 - None

For the following questions, please choose the single best answer.

26. The **United States Medicare** Program

- Is available to all citizens without private insurance.
- Covers most health care services of all citizens 65 and older through government funds obtained from tax revenues.
- Forces physicians to accept Medicare patients if they want to maintain their licenses.
- Was initiated by the Clinton administration in the early 1990's
- Don't know

27. The **United States Medicaid** Program

- Is completely operated by the federal government.
- Allows states to set different criteria for enrollment beyond a federally mandated floor.
- Is available to all citizens who do not wish to buy private insurance.
- Allows non US citizens and non-permanent residents to buy into the program by paying a premium.
- Don't know

28. A health maintenance organization [**HMO**] (please choose one)
- a. Insures a patient for all covered health services for a fixed monthly premium.
 - b. Does not require cash co-pays from enrolled patients.
 - c. Is always owned by physicians
 - d. Reimburses physicians separately for patients who are not HMO members.
 - e. Don't know
29. The **Patient Protection and Affordable Care Act** of 2010 [the new U.S. health reform law]
- a. Requires Americans to pay a penalty if they do not obtain public or private health insurance.
 - b. Regulates the price of commercial health insurance premiums
 - c. Limits the fees payable to physicians
 - d. Expands Medicare to cover the entire population
 - e. Don't know
30. The current **Canadian** health care system.
- a. Provides a government-financed health insurance plan to all citizens.
 - b. Reimburses all physicians a pre-determined salary for their work.
 - c. Dictates to the patient which physician can be seen for a particular condition.
 - d. Dictates to the physician the amount of health care services that must be provided in order to earn their salary.
 - e. Don't know
31. The **Canadian** health care system can be best characterized as:
- a. A single payer health care system.
 - b. A national health service where physicians receive salaries from the government.
 - c. Under the exclusive control of the federal government.
 - d. A system that prohibits any private insurance or privately administered health care services.
 - e. Don't know
32. Which of the following is NOT a feature of the **Canada Health Act**:
- a. Public administration
 - b. Universality
 - c. Portability
 - d. Coverage of health care services provided outside Canada
 - e. Don't know
33. Which of the following proposals was NOT included in the Canadian Medical Association's (CMA) 2010 recommendations for health care reform?
- a. Pay-for-performance funding incentives
 - b. The creation of a charter for patient-centered care
 - c. Increased privatization of health care
 - d. Efficient utilization of electronic health records
 - e. Don't know