



CPRN RCRPP

Asking Citizens What Matters for Quality of Life in Canada

**Results of CPRN's Public Dialogue Process
October 2000**

Quality of Life Indicators Project

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Foreword

While much activity is underway in Canada on quality of life indicators, until now there has been no initiative of a national scope that seeks input from citizens.

CPRN is seeking to fill that void. We have been working with a Steering Committee representing a broad cross-section of organizations interested in developing a prototype set of national indicators to track Canada's progress in quality of life. Our fundamental goal for the Quality of Life Indicators Project is to create a national set of indicators that reflects the range of issues that truly matter to Canadians. By helping to create a common language for dialogue across the public, private and voluntary sectors, the prototype will enable a more balanced discussion on public priorities across social, economic, environmental and other dimensions of quality of life.

The project reports include six discussion papers, each of which will be of interest to different audiences:

- This paper, *Asking Citizens What Matters for Quality of Life in Canada – Results of CPRN's Public Dialogue Process, October 2000*, includes the analysis of the findings from the citizen dialogue sessions. It is intended for a small audience, including researchers, academics and policy makers.
- *Indicators of Quality of Life in Canada – A Citizens' Prototype* includes the prototype set of national indicators and information on how it evolved. It is intended for a wide range of audiences, including researchers, policy makers, the media and members of the public.
- *Quality of Life: What Matters to Canadians – Lessons Learned* focuses on the project context, dialogue methodology, lessons learned and next steps. An internal document, this report is intended for distribution primarily among CPRN staff and consultants.
- An evaluation report of the Quality of Life Indicators Project will be of interest to CPRN staff, consultants and funders, community practitioners and others working in the area of public involvement and societal indicators. (Forthcoming in Spring 2001)
- A report card on national indicators will describe the testing of the prototype (see the *Next Steps* section of this report). The first report card will provide citizens, researchers and public policy leaders with a solid foundation for determining where Canada currently stands on quality of life. These audiences will also be able to assess the usefulness of the prototype and whether Canada should undertake a regular accounting of its quality of life. (Forthcoming in Summer 2001)
- A generic evaluation framework has been developed to guide the assessment of the Quality of Life Indicators Project and lay the foundation for other public involvement projects that may be undertaken by CPRN and others. (Forthcoming in Spring 2001)

Thanks go to the many people who made these citizen dialogues happen, in particular Joseph H. Michalski, Department of Sociology, Trent University. Joe was the Research Advisor for this project and he did the analysis of the findings from the public dialogue sessions, which you find in this report.

I also want to thank the many people who have been involved in the project, including Sandra Zagon, Project Manager, and her team of independent consultants and researchers, indicator experts, moderators and note-takers for the dialogue groups, and members of the Steering Committee, all of whom have made an invaluable contribution in shaping the project. Many thanks as well to the participants in the cross-Canada dialogue groups – their input is the basis for the prototype set of national quality of life indicators.

A special word of appreciation goes to our funders, who include The Institute for Research on Public Policy, The Atkinson Charitable Foundation, Canadian Pacific Charitable Foundation, the Treasury Board Secretariat, the Policy Research Initiative, Canadian Rural Partnership, Human Resources Development Canada, National Round Table on the Environment and on the Economy, Privy Council Office and NOVA Chemicals.

Judith Maxwell

Executive Summary

The results of a series of public dialogue discussions held across Canada reveal that Canadians agree that tracking the quality of life in Canada is a worthwhile endeavour and identify several common elements that they believe should be monitored. Nearly every group of participants addressed various aspects of health, education, the environment, social programs, political rights, personal well-being, safe communities, and the economy as important to the quality of life in Canada. These common themes cut across regions, social backgrounds, and various demographic characteristics of the populace. Indeed, there appears to be widespread agreement among Canadians that the general recipe for a healthy quality of life must include certain key ingredients, even though the recommended “amounts” vary to some degree.

The central purpose of the Canadian Policy Research Networks’ (CPRN) “Quality of Life Indicators Project” is to develop a prototype of national indicators to track Canada’s progress in quality of life through a citizen involvement process. To learn about the issues that citizens view as important to quality of life in Canada and what indicators should be developed to monitor the issues, forty dialogue discussions were conducted in nine provinces across Canada over a two-week period in October 2000. The recruitment process produced five different clusters of groups, including quasi-random samples of urban and rural participants and purposive samples consisting of urban and rural participants, “influencers,” hard-to-reach participants, and youth groups. The participants reviewed background materials on quality of life issues and indicators prior to the dialogue sessions, engaged in three-hour dialogue discussions facilitated by trained moderators, and completed questionnaires prior to and following their discussions.

The overall results suggest that there were a number of common national indicator priorities to monitor quality of life in Canada. The groups emphasized the importance of the following, regardless of the cluster: primary and secondary education, health care access, a healthy environment, clean air and/or water, social programs, responsible taxation, public safety or security, job security, employment opportunities, a living wage, time use or balance, civic participation, and children/youth programs.

Every group discussed political and democratic rights as important to the quality of life in Canada. As well, every group addressed various aspects of health, with most identifying health care access as a key area to be monitored. The majority of groups identified either physical or mental health as important as well. In terms of education, the participants suggested that access, quality, and funding levels should be monitored. The environment figured prominently in nearly every group’s list of priorities, both as an important contributor to quality of life and as an area for which indicators should be developed (e.g., clean air, water, and waste disposal). The participants further emphasized “social programs” as important to quality of life, which for many groups meant income maintenance supports or affordable housing for low-income or vulnerable populations. Nearly half the groups discussed children and/or youth programs as a key dimension. At the same time, the dialogue participants suggested that responsible taxation should be a priority.

The dialogue groups further stressed the importance of monitoring healthy, safe communities as a key indicator of quality of life. Similarly, civic participation represented another area that participants ranked highly in assessing quality of life in Canada. Moreover, most groups in various

ways considered the health of the economy to be important, particularly with respect to employment opportunities, job security, and decent wages or “living” wages.

Access, availability, personal security, and equity or fairness emerge as overarching or crosscutting themes that underlie much of the dialogues. Canadians understand that while there may be social and economic differences that distinguish some groups from others, these differences should not fundamentally threaten or undermine anyone’s ability to share in the many and varied resources available. Furthermore, many individuals across the majority of groups believed that quality of life should include a sense of personal security, which encompassed everything from safety to financial well-being. The participants expressed as well a strong belief in equity issues, meaning the degree to which some groups are more likely to benefit from existing arrangements to issues of equal treatment and respect for others.

At the individual level, most people expressed at least some satisfaction with a range of different quality of life dimensions, though those who were older tended to have more positive views or expressed higher levels of satisfaction on several issues. Regardless of age or other background characteristics, the majority of participants ranked health care, education, the environment, and social programs as priority areas requiring improvement. As discussed previously, these areas (and sub-themes identified within the broader discussions) were often targeted as key factors that participants believed should be monitored more systematically to help track quality of life in Canada on a regular basis. Participants often felt far less competent, however, in their capacity to suggest what the most helpful or relevant indicators might be; they were often comfortable to rely on other expert opinion in this regard.

The data were more limited in thinking about whom should be responsible for developing and reporting on the quality of life in Canada. The general view was that governments should work cooperatively with independent, non-profit organizations to support the development and ongoing monitoring of quality of life indicators. The participants recognized that funding might be necessary from governments and other sources to help sustain such an ambitious project, but believed further that independent reporting should be encouraged especially since government accountability might be incorporated as one of the dimensions monitored.

The participants, while not always optimistic that the process would yield tangible results, were nevertheless energized by their participation in the process. Many people learned about other views and often came away understanding others who perhaps held different views to be more thoughtful and engaging. Most important, there was a general consensus that developing a quality of life indicators prototype was feasible and desirable. Canadians expressed a preference to have a more uniform and comprehensive system for evaluating quality of life in Canada than what currently exists. While most continued to believe in Canada as offering a reasonably high quality of life, the participants voiced a number of concerns that should be addressed and monitored on an ongoing basis to establish priorities, to provide feedback, and assess changes in quality of life in the years ahead.

Introduction

In the January 1, 2001 edition of *Maclean's*, Allan Gregg discusses the latest findings from a year-end survey of the Canadian public to determine their opinions, concerns, and priorities for the public agenda. Whereas the top-of-mind concerns in the early 1990s were the economy, deficits, and government spending, the November 2000 polling results found that *social issues*, led by health care, dominated public responses to the question regarding “the most important problem facing the country.”

These results mirror in many respects the results of a series of public dialogue discussions sponsored by Canadian Policy Research Networks the preceding month. For example, the majority of the nearly 350 Canadians who participated, during October 2000, in discussions about the quality of life in Canada identified the following as priorities that “most need to be worked on or improved”: the health care system, education, social programs, and the environment. These common themes cut across regions, social backgrounds, and various demographic characteristics of the populace. Indeed, there appears to be widespread agreement among Canadians that the general recipe for a healthy quality of life must include certain key ingredients, even though the recommended “amounts” vary to some degree. These ingredients are discussed at length in the following report.

The general sense across the many groups was that quality of life should be monitored more systematically in Canada. Some of the participants were clearly disillusioned with specific issues or the quality of life in Canada more generally. Yet the dialogues tended to have a distinct moderating effect as well, or one in which the sentiments of others expressed helped to encourage more thoughtful reflection and mutual understanding. Hence, despite some persistent frustrations on the part of some participants, one has a sense of optimism from many of the groups. Most participants clearly expressed their enthusiasm for the dialogue process. Indeed, a majority of participants further appeared to believe in the value (or at least saw some merit) in developing a more systematic, comprehensive approach to tracking quality of life in Canada.

Quality of Life Indicators Project

Working in collaboration with a number of organizations, the Canadian Policy Research Networks (CPRN) is coordinating a “Quality of Life Indicators Project.” The central purpose of the project is to develop a prototype set of national indicators through a citizen involvement process to track Canada’s progress in quality of life.

To learn about the issues that citizens consider of particular importance to their quality of life, forty dialogue discussions were conducted in nine provinces across Canada over a two-week period in October 2000. The results of this research will be used to encourage further discussion and debate about Canada’s goals for the future and to measure our success in achieving them.

About this report

This report summarizes the main components of the dialogue results, including a detailed thematic analysis of the content of the dialogue groups' discussion and an analysis of responses to questionnaires completed by participants both before and after the dialogue groups. More specifically, the report includes a summary of participants' general views about:

- what constitutes quality of life in Canada
- priority issue areas related to quality of life
- appropriate indicators for measuring quality of life
- satisfaction with quality of life issues

I Approach to the Research

In October of 2000, CPRN coordinated the conduct of 40 dialogue groups on quality of life in Canada. Following is an overview of the research approach, including the location of the groups, the participant recruitment process, the support materials provided and the analysis of findings. A demographic overview of participants is also provided.

A. Location of groups and recruitment process

Forty dialogue discussions took place between October 11-26, 2000 in twenty-one different towns and cities from nine provinces (see Table 1). Twenty-eight groups were held in urban settings, while 12 took place in rural areas. The dialogue discussions included 34 English-language and six French-language groups. Environics recruited participants for half of the discussion groups using quasi-random sampling procedures.¹ CPRN used purposive sampling procedures (non-random techniques to select particular types of cases for specific purposes, such as capturing different stakeholder views) to recruit the participants for the other twenty groups. These groups included three that were comprised of high-school students, five with “hard-to-reach” citizens (including individuals with low incomes, with disabilities, or in precarious housing situations), seven involving participants who were defined as “influential” (decision-makers, heads of organizations, elected officials), and other groups located in rural locales. In total, 346 Canadians participated in the 40 public dialogue discussions, or 8.7 participants per group (excluding the moderators, recorders and the occasional observer). The groups usually had between 8-10 participants for the discussions. Only three groups had fewer than six and three others had more than ten participants.

B. About the participants

The composition of the groups included a nearly even gender split between males (51 percent) and females (49 percent). The participants ranged in age from 16 to 86 years, including roughly 10 percent youth and about seven percent of retirement age. More generally, the sample was skewed toward the older end of the age distribution in comparison with the general population, as nearly four in five participants were aged 30 and older. The average age was 43 years, with a median figure of 45. Slightly more than half of the participants reported being married or in common-law relationships, 31 percent had never married, 16 percent were divorced or separated, and the remaining participants were widowed.

For the most part, household sizes mirrored those of the general Canadian population, with an average size of 2.7. Roughly 21 percent lived alone, almost one-fourth lived as couples without

¹An Environics document summarizes their approach as follows: “In general, dialogue participants were contacted by telephone ('cold calling') or randomly selected from a database of people who have participated in past telephone or in-home surveys and have agreed to be contacted again if there were future research needs to be met, including participation in focus groups. However, people who had participated in a focus group or discussion group within the past year were excluded from the CPRN dialogue session” (Environics *Dialogue Recruitment Process*, n.d.).

children (including four same-sex couples), and some 38 percent reported living in nuclear families with two parents plus one or more children (whether grown or not). Another 8 percent included lone-parent families, while a variety of other household types comprised the remainder. Overall, three in five participants were living in household situations where no children were present.

Eighty-seven percent of the participants were born in Canada, while foreign-born participants hailed from nearly two dozen countries from many parts of the world. Just over 78 percent of the participants spoke English as their first language, while 13 percent reported French as their native tongue. No other language besides German (1.5 percent) topped the one percent mark.

With respect to education and work, the sample was skewed somewhat toward higher levels of educational attainment and higher-status jobs as a result of the several “influential” groups. Thus more than one in four participants had done some post-graduate work or earned a post-graduate degree. Seven in 10 participants had at least some college or university experience. The majority of those with less than a high school diploma came from the three youth groups (although 7 percent of adults in the sample had not graduated from high school).

Among the full sample, 41 percent reported working in the paid labour market full-time, 17 percent were working part-time, seven percent described themselves as working students, and another three percent were self-employed. About six percent reported their work status as unemployed. Among the nearly one quarter of those who were *not* currently attached to the labour market, many were retired (nine percent) or full-time students (eight percent), while others reported being “at home mainly” (five percent), or defined themselves as ill or disabled (three percent).

Finally, 55 percent of the dialogue participants owned their own homes, 31 percent were renters, 12 percent (mainly high school students) lived somewhere for free, and two percent had other living arrangements. In looking at adults only, 61 percent were homeowners and 34 percent were renters. More than one in five (22 percent) were paying more than 30 percent of their total household income to cover their housing costs, with another one in ten paying about 30 percent and seven percent “not sure.” Hence 61 percent were paying less than 30 percent for their housing costs.

Table 1: Public Dialogue Locations and Group Descriptions

PROVINCE	CITY/TOWN	GROUP	LOCALE	SIZE	LANGUAGE	DATE
Alberta	Edmonton	Random	Urban	8	English	October 11
	Edmonton	Influencers*	Urban	10	English	October 12
	Edmonton	Random	Urban	10	English	October 12
	Peace River	Purposive	Rural	9	English	October 26
British Columbia	Nelson	Purposive	Rural	10	English	October 26
Manitoba	Brandon	Random	Rural	10	English	October 16
	Carberry	Random	Rural	9	English	October 19
	Winnipeg	Random	Urban	8	English	October 16
	Winnipeg	Random	Urban	3	French	October 17
	Winnipeg	Hard-to-reach*	Urban	10	English	October 18
	Winnipeg	Random	Urban	5	English	October 19
New Brunswick	Woodstock	Youth*	Rural	12	English	October 19
	Fredericton	Purposive	Urban	10	English	October 25
Newfoundland	St. John's	Influencers*	Urban	13	English	October 12
	Clarenville	Random	Rural	10	English	October 16
	St. John's	Hard-to-reach*	Urban	7	English	October 18
	St. John's	Random	Urban	9	English	October 18
Nova Scotia	Sydney	Random	Urban	8	English	October 12
	Sydney	Hard-to-reach*	Urban	10	English	October 18
	Port Hawkesbury	Purposive	Rural	9	English	October 17
	Halifax	Influencers*	Urban	7	English	October 26
Ontario	Almonte	Random	Rural	9	English	October 18
	Ottawa	Random	Urban	6	French	October 17
	Ottawa	Random	Urban	6	English	October 19
	Ottawa	Influencers*	Urban	9	English	October 20
	Ottawa	Random	Urban	7	English	October 23
	Ottawa	Influencers*	Urban	10	French	October 23
	Ottawa	Hard-to-reach*	Urban	9	English	October 25
	Ottawa	Influencers*	Urban	11	English	October 25
	St. Mary's	Youth*	Rural	10	English	October 25
	Toronto	Random	Urban	8	English	October 11
	Toronto	Influencers*	Urban	9	English	October 17
	Toronto	Random	Urban	8	English	October 18
	Toronto	Random	Urban	8	English	October 19
	Toronto	Hard-to-reach*	Urban	8	English	October 24
Quebec	Joliette	Random	Rural	5	French	October 17
	Trois Rivières	Youth*	Rural	10	French	October 26
	Montreal	Random	Urban	8	English	October 11
	Montreal	Random	Urban	8	French	October 19
Saskatchewan	Outlook	Purposive	Rural	10	English	October 25
Total: 9 Provinces	21 Cities/Towns	40 Groups	12 Rural	n = 346	6 French	Oct 11-26

Source: Quality of Life Indicators Project Team

* denotes purposive sample

C. The Dialogue Process

Prior to their participation, most of the participants received CPRN's Quality of Life Indicators Project information package, which contained a *Participant Handbook* describing the basic organization of the sessions and providing some background material designed to stimulate thought and discussion about various aspects of quality of life. Other background materials included a set of indicator cards, which provided participants with a broad sampling of some of the issue areas and indicators previously identified as relating to quality of life.

Professionally trained moderators facilitated each of the sessions. Lasting approximately three hours, the sessions commenced with a review of the background information, a project overview, introductions and instructions from the moderator. Participants were also asked to complete pre-dialogue questionnaires on various aspects of quality of life (which they then filled out again in modified form at the end of each session). The actual dialogue discussions were broken down into four main parts: 1) building collective portraits of quality of life; 2) setting priorities for national quality of life indicators by having individuals vote for their top five priorities and then the groups choosing one from the most frequently mentioned to explore more fully; 3) establishing responsibility for reporting on quality of life; and 4) reviewing the session and planning for follow-up activities. In the first two parts of the dialogue sessions, moderators used the quality of life indicator cards as an impetus for discussion and as a tool for achieving session objectives.

Independent recorders used laptop computers in most instances to capture the content of the dialogue discussions. To further ensure the accuracy of the recording procedures, the discussions were tape-recorded.

D. Analyzing the Findings

The content of the dialogue sessions was analyzed inductively based on participants' written and verbal input. The researchers coded the input from the session transcripts and the cards that each group generated to summarize key elements of their collective portraits. Where the themes overlapped with those used in the open-ended questionnaire, identical codes were used. The analyses of the transcripts, however, produced many new and more complex ideas that extended beyond the initial set of codes. As well, the identical codes were used to code the themes participants voted for as among their five priorities for developing quality of life indicators. Once the codes were applied to each transcript and the corresponding indicator priority cards, the data were then subjected to a systematic thematic analysis in a descriptive fashion to determine how often themes were discussed, as well as to capture the context within which the themes were discussed.

The pre- and post-dialogue questionnaires were coded using standard data coding, entry, and cleaning procedures in conjunction with a statistical software package. The demographic information and the scales used to rank various dimensions of quality of life were coded numerically for each participant, thereby permitting a range of different descriptive and multivariate analyses to examine the data for possible trends and patterns. As noted above, the open-ended codes mirrored those that were later used for the qualitative analysis of the transcripts. Three sets of

questions were coded in this fashion: those that asked participants to rank the five most important factors contributing to the quality of life in Canada, the five most important factors contributing to quality of life in their personal lives, and the five priority areas that they believed needed improvement.

It should be noted that, because of time limitations for the dialogue sessions, the issue of who should assume responsibility for reporting on quality of life received far less discussion. The analysis, which again relied upon the typed transcripts, therefore yielded relatively sparse information. Moreover, a discussion of the effectiveness of the dialogue process itself was considered to be outside the scope of this paper. (An independent project evaluation will be undertaken and should address the question of the effectiveness of the dialogue process.)

II Dialogue Group Discussion Results

The 40 groups provided enormously rich and varied discussions of quality of life issues in Canada. While each group received the same background materials, the participants were free to pursue whatever issues they considered to be worthy of discussion or to create whatever “collective portrait” of quality of life that they preferred. The multitude of themes that emerged encompassed literally hundreds of specific ideas about what contributes to the quality of life. The discussions were intended to be as free-flowing as possible, with each participant able to weigh in with his or her own particular perspective to help build the collective portraits. Consequently, no two portraits were identical. Yet despite the latitude granted to the groups, a number of common themes emerged across a majority of the discussion groups.

These discussions form the basis of the detailed analysis in the following section. The analysis attempts to provide a summary of the collective portraits developed and the priorities that participants selected for national indicators, as well as some of the reasoning that underlies the different choices. It also discusses four over-arching or cross-cutting themes that participants identified, summarizes findings related to various group clusters and presents participants’ suggestions for specific, measurable national indicators.

A. Collective portraits and priority themes

Each of the dialogue discussions followed the same general format, with a trained moderator leading participants through the main topic areas. The participants first discussed freely the factors that they believed contributed to quality of life, clustered these factors into groups (or themes), and then selected up to five factors each that they believed should be the priorities for a prototype of national indicators to monitor quality of life in Canada.

The vast majority of the themes captured on the cards were coded into 17 thematic categories as summarized in the accompanying table (entitled Table 2: Total groups discussing selected quality of life issues and prevalence of sub-themes across 40 groups). The end result of the process was a classification scheme with 17 major categories, each of which contained several sub-themes that captured various quality of life dimensions. The current section describes the extent to which the public dialogue groups discussed the many different themes, why these were considered important, and the priorities for measuring quality of life chosen by the participants themselves.

A further explanation will help clarify how to interpret the results summarized in Table 2. The second column identifies the 17 major themes generated from the analysis of the participant questionnaires. The third column, labelled “groups,” reports the total number of groups that identified at least one or more issues related to that particular theme in developing their collective portraits and the cards generated from those discussions. In other words, if a group discussed education as part of their collective portrait (and all but one group did), then that group typically produced a card corresponding to the discussion and received credit for having discussed education – regardless of the aspects of education on which the group focused.

The fourth column tabulates the total number of votes that participants across all groups registered on their cards related to that particular theme, i.e., when choosing the five factors that they believed

to be national priorities for establishing quality of life indicators. In the case of education, for example, a total of 39 groups discussed aspects of the theme in building their collective portraits of quality of life. While education includes several possible sub-themes (e.g., accessibility, quality, primary/secondary, post-secondary, lifelong learning, funding, literacy, teaching), participants across all groups voted for some aspect of education as a priority area for developing national indicators in 177 cases. The figure does not represent literally 177 different participants since an individual could have voted for more than one sub-theme within the general category of education. The evidence suggests, though, that in most cases the participants only cast one vote per major theme area. In short, roughly half of the participants across all 40 public dialogue groups selected some aspect of education as a national priority for monitoring the quality of life in Canada.

The final five columns then establish the sub-themes most often highlighted across the dialogue group discussions. The numbers in parentheses reflect the total number of groups that developed a card dealing with each particular sub-theme. Continuing with the example of education, the chart reveals that 22 groups emphasized accessibility or universality of public education as an important issue for measuring quality of life. A total of 17 groups expressed concerns about the quality of the education system. Another 14 groups discussed primary and secondary schools, while 12 groups developed cards specifically for post-secondary education. Finally, 11 groups talked about lifelong learning or continuing education as a pertinent quality of life issue. To varying degrees, then, the participants highlighted several dimensions of education that they believed should be monitored to provide an accurate description of the quality of life in Canada.²

²The reader should be aware that the actual discussions of issues and the language used by the participants did not always clearly differentiate between what were often perceived to be “social problems,” the need to improve certain conditions, and the importance of monitoring these issues to assess quality of life.

Table 2: Total Groups Discussing Selected Quality of Life Issues and Prevalence of Sub-Themes across 40 Groups

	THEMATI C AREAS	GROU PS	TOTAL # VOTES	SUB-THEME NUMBER 1	SUB-THEME NUMBER 2	SUB-THEME NUMBER 3	SUB-THEME NUMBER 4	SUB-THEME NUMBER 5
1	Political Rights/ General Values	40	206	Civic involvement (21)	Civil or human rights (16)	Autonomy (11)	Democracy (10)	Freedom (8)
2	Health	39	206	Accessibility (24)	Physical health (17)	Mental health (13)	Health prevention and promotion (13)	Universal system (13)
3	Education	39	177	Accessibility and/or universality (22)	Quality (17)	Primary/secondary schools (14)	Post-secondary education (12)	Lifelong learning (11)
4	Environment	38	189	Clean, healthy (35)	Water (24)	Toxic waste (11)	Waste management (7)	Renewable natural resources (5)
5	Social Programs/ Conditions	38	173	General support programs (19)	Basic needs (15)	Housing affordability (15)	Wealth distribution (14)	Daycare (10)
6	Personal Well- Being	36	102	Personal well-being in general (18)	Time use and balance (16)	Leisure and recreation (12)	Food/diet (7)	Self-respect or dignity (7)
7	Legal or Justice System	35	96	Safe communities/ public safety (28)	Crime rate (10)	Security (9)	Policing (7)	Justice system (5)
8	Economy	34	110	Employment (17)	Living wages (17)	Economic growth (13)	Small business support (9)	Cost of living (6)
9	Work	31	67	Job security (12)	Wages and benefits (10)	Employment oppor- tunities (9)	Meaningful work or job satisfaction (7)	Training and upgrading (7)
10	Community	31	44	Healthy communities (10)	Spirituality (10)	Programs and resources (8)	Volunteer opportunities (7)	Civil society (4)
11	Seniors and Children	30	64	Child and/or youth programs (19)	Eldercare (6)	Healthy child development (5)	Time/attention for children (5)	Access to health care in retirement (4)
12	Government	29	99	Taxes/fiscal policies (14)	Honesty or public trust (12)	Accountability and efficiency (7)	Quality and leadership (5)	Balanced business Policy (5)
13	Family, Friends, and Connections	25	39	Family well-being (11)	Intimate connections (6)	Reduced social isolation (5)	Family economic security (4)	Family coping (4)
14	Information (Media)	23	29	Public education (10)	Technology and computer access (6)	Research and information (6)	Media access or in- dependent media (6)	Media accuracy (4)
15	Infrastructure and Transport	23	12	Infrastructure (16)	Affordable transpor- tation (5)	Public transit (3)	Paths and trails (1)	
16	Diversity and Multiculturalism	19	17	Cultural diversity (13)	Cultural sharing and exchanges (5)	Obligations to Native peoples (3)	Regional differences (2)	Immigration policies (1)
17	Cultural Pursuits	10	11	Cultural activities (6)	Funding or support for the arts (5)			

Table note: "Total votes" refers to the number of participants (out of 346) who voted for some facet of a theme in identifying their priorities. The numbers in parentheses after each sub-theme refer to the total number of groups (out of 40) that discussed that particular sub-theme

In general, nearly every group addressed various aspects of political rights, education, health, the environment, social programs, personal well-being, safe communities, and the economy as important to the quality of life in Canada.³ The details of these discussions are presented over the next several pages, organized for the most part by the aforementioned themes and related sub-themes. Some summary statistics describing the prevalence of certain themes across groups are occasionally discussed. Bearing in mind that each participant had a fixed number of votes to cast, the degree to which sub-themes consistently received support provides a strong indication of their perceived importance as key factors affecting the quality of life and the preference to measure these dimensions. The heart of the analysis, however, stems from the participants themselves by way of their comments. The following discussion thus emphasizes some of the more salient comments and reasoning that flesh out participants' thinking on a number of issues.

1. Political Rights and General Values

Table 2 indicates that every group discussed political rights and other general values or principles believed to be important to the quality of life in Canada. Indeed, the moderators sometimes literally asked questions such as the following: "What are the values underlying the choice you made?"

Hence the groups engaged in discussions that inevitably focused in part on the value bases upon which the participants constructed their views of quality of life in Canada. Most groups discussed the importance of human or civil rights, democracy, autonomy or choice, and freedom as core elements.

Most groups discussed the importance of human or civil rights, democracy, autonomy or choice, and freedom as core elements of quality of life.

A number of groups, for example, identified civil or human rights as a foundation for a healthy society. Some groups made specific references to the Charter of Rights and Freedoms, but most discussed basic human rights in a common-sense or in an almost "taken-for-granted" perspective. In speaking about the issue, participants usually regarded Canada in a positive light with respect to protecting and respecting human rights. The participants sometimes expressed their appreciation and a certain pride in Canada's human rights commitment, as in the case of the following comment in Halifax: "(Regarding) human rights, I think of the great Canadian tradition of tolerance initially, and now acceptance and celebration of diversity in all ways."

An Ottawa participant expressly stated, for example, that "Democracy is an issue of quality of life. If the government is corrupted, it does affect your quality of life." More than half of the groups focused on basic human rights, or "civil rights and the rights to act freely" as vital to the quality of life in Canada and around the world. Sometimes the discussion of rights quickly expanded with the momentum of the full group's participation. One group engaged in the following exchange:⁴

³In fact, the table captures a total of 1641 of a theoretical limit of 1730 votes (346 participants with five votes each), or 95 percent of the possible votes cast for national priorities. The remaining five percent includes mainly a diverse range of categories or sub-themes that received votes, but did not crack the top five for a particular factor.

⁴In order to protect the anonymity of the participants, the text identifies participants only by generic letters and without reference to their gender, or only as a "participant" within a particular dialogue group. The specific locales are not always identified either, particularly where there are concerns that certain comments might in fact hint at who the actual speakers are or might in any way threaten the confidentiality and anonymity of those participating in the discussions.

In Toronto:

Participant A: Liberty – I remember my grandfather talking about things that you couldn't do on a Sunday in the "old days."

Participant B: Freedom of choice – speech, your body, food, control.

Participant C: Rights – civil rights and the rights to act freely.

Participant D: Legal rights.

Participants in a Manitoba group combined a discussion of rights with notions of personal freedom:

In Brandon:

Participant A: Well there is something that I put on my sheet that I forgot about: personal freedoms. We haven't really touched on freedom of religion, the democratic system.

Moderator: Make it more specific, make it more - package it a little bit more - how does personal freedom impact on the quality of life?

Participant A: The rights of the individual to ... I don't know...

Participant B: To smoke.

Participant A: Well, yeah, to smoke. I'm not going to support that individual right although I do it and I know that I shouldn't 'cos I know it's very bad but it's conscious decision I make based upon the addiction.

Moderator: How does it affect quality of life - how does it impinge?

Participant A: Well if I want to be a Buddhist, I can go ahead and be a Buddhist. It is not as easy as being an RC around here, but there are other places in the world where you don't have the freedom to make that choice.

There were two concerns, however, that permeated some of the discussions at various points. One concern centered on the notion that human rights might be compromised in situations where individuals or families lacked the basic necessities to be able to express their political or other rights. In some dialogue groups, the participants linked having basic needs met to the issue of fundamental human rights.

A second concern for some was that of the relative balance between the rights of the individual and those of the community, particularly in a multicultural context. Some participants thought that an erosion of individual rights in some instances jeopardized individual freedom, while others believed that individual rights appeared to supercede the public interest (especially in regard to the justice system).

Finally, a majority of the groups identified civic involvement or democratic participation as a cornerstone to a healthier quality of life. The content of the dialogue discussions, however, suggested that participants were concerned about a perceived growing apathy among the citizenry. More than half of the groups stressed civic involvement and democratic participation as important to quality of life in Canada. As one participant expressed in a Winnipeg dialogue group, "since we live in a democratic system and vote our representatives in, then, in a sense, we have a

responsibility to say to these representatives what our priorities are.” Furthermore, some groups considered the idea of expanding the democratic process, or ensuring maximum participation in the political and civic spheres in general as important to quality of life.

In summary, the dialogue discussions routinely surfaced values important to the participants in their discussions of quality of life. While many struggled with striking the proper balance between individual and collective rights, the participants shared in common a sense of the importance of protecting human rights, democratic participation, and personal liberties or freedom. By the same token, the groups discussed a number of other values as important to quality of life as well, including the following (which arose in at least 15 percent of all groups): equality of opportunity, respect for or acceptance of individuals, compassion or a caring attitude toward others, a just society, and “family values.” Some of the value statements associated with these concepts figure more prominently in subsequent discussions of other quality of life themes.

2. Health

A second dominant theme included health, which was discussed in every dialogue group and for which cards were developed in 39 of 40 groups. The issue of health ranged from the level of personal or physical health to views about the health care system. As one St. John’s participant stated,

“when you are sick, that is more important to you than if you lost your job; without your health, you don’t have anything else.” Several participants in dialogue discussions across Canada offered similar comments. In some cases, though, the issue of health received relatively sparse treatment as participants accepted the primacy of health as a quality of life issue and chose to delve into some of the other issues in greater depth. For instance, the one group that explicitly did *not* select a specific aspect of health as one of their cards in setting priorities nevertheless raised health-related issues (and used the term “health”) more than one dozen times during the course of their discussion. One participant interjected the following into the discussion: “I was thinking about health. Thank God I’m healthy because I have a husband who’s not. If someone is sick, there’s a repercussion in the community.”

Nearly half of the dialogue groups explicitly developed cards setting physical health as a priority to be monitored in any quality of life reporting system.

In general, the dialogue discussions provided powerful testimony as to the central importance and value that Canadians continue to place upon their health and the health care system in relation to quality of life. At the personal level, many comments tended to equate any compromises in health with compromises to the quality of life. In fact, nearly half of the dialogue groups explicitly developed cards setting physical health as a priority to be monitored in any quality of life reporting system.

At the health care system level, the overarching theme was that universal health care should be maintained. While fewer than 20 percent of the groups actually used the term “two-tier” system, nearly everyone reacted negatively to the suggestion. Some participants, such as the following comment from an Ottawa dialogue group, expressed the opinion that the health care system had already moved too far along a path toward a two-tiered system:

You know what access to health care (means) – we like to believe we have a myth here that we have universal health care that everybody is treated the same. Last night in New York a hockey player for Montreal tore his knee up. This morning he got an MRI in a Montreal hospital. I don't know if anybody here had to wait for an MRI. You don't get 'em the next day – you're healed before you get in – why did this guy get in? Money... In Alberta there was a big stink caused about their two-tiered medical system. You know what? We have that now, but we just don't want to admit it.

The participants viewed the universality of the system as a distinguishing feature of the Canadian system, particularly in comparison with the United States. Thus the near consensus was that the universal health care system should be maintained. Consider the following exchange.

In Winnipeg:

Participant A: Universal health care has always been important for Canadians. (We have been) creeping along to a two-tier system of healthcare. Healthcare is an issue that has taken a beating the last couple of years.

Moderator: It just so happens that a couple of days ago I was watching an American commercial. There was a political ad and part of the platform was: "Do you really want the Canadian style of health care system?" It was about a 3-minute ad and it was knocking our healthcare system. I am curious to ask what Canadians are saying about our system of healthcare and how it relates to quality of life.

Participant B: Well, we don't want the American system. I guess there needs to be more services for northern Manitoba. I think, somehow, we were brought up and it is possible (to have) a universal system. But being alive is a miracle in these conditions. Met the kid down the street and he fell 35 feet, but he survived and walked. He got excellent care, but had to come down here (to Winnipeg).

Participant C: We have to bring it down south.

Participant B: It doesn't seem right when you think of universal healthcare: why isn't it better? And also, for me, Trudeau gave us the dream that will not die. Just listening to that part from the early 70's and now in the year 2000, and I think those expectations (and) the dreaming... It is still possible to provide for all people.

Far from the idea of fundamentally altering or otherwise dismantling the system, the dialogue discussants preferred to search for solutions to ongoing problems within the existing health care system. In fact, 70 percent of the dialogue groups developed priority cards that specifically emphasized universality and/or accessibility of the health care system. The challenge of maintaining such a universal system, however, was twofold in the eyes of many. On the one hand, some participants expressed concerns about the fiscal solvency of the system and the pressures driving up health care costs. On the other hand, others expressed reservations about inequities in the degree of accessibility to the health care system.

In the first instance, the general consensus was that there simply needed to be more funding for health care. Several participants at various points in the discussions suggested that the services were inadequate to cover the demands. Some talked about waiting lists that were believed to be far too commonplace. As one Ottawa participant commented, "the quality of health care is very high, but the waiting period is very long." In these contexts there were some discussions that entertained

the notion of limited forms of “privatization,” “user fees,” or the availability of other health care options. The majority of the participants, though, clearly viewed any discussion of privatization as a threat to the universality of the public system.

In some cases the participants discussed accountability within the health care system at all levels. A few groups further talked about personal responsibility in making use of the system appropriately. High school participants from Woodstock, New Brunswick suggested that people abuse the public system “because it’s free. Emergency is full of people going for the common cold.” The comment prompted the response that “that’s why they should make people pay.” Or, in the words of an Ottawa participant, “a minimum user fee would discourage abuses of the health care system.” One Edmonton participant, who suggested that the health care system should be scaled back to some degree, expressed considerable concern about those who abuse the system:

I don’t want to pay for people that abuse the system. That’s my biggest beef. People that abuse the system. When I was there, for six days and six nights, I saw four of the same people come in bleeding, with a cough, needing a warm place to sleep. See, that to me, that’s abuse. I won’t sit back and be calm.

The more pressing issue for many, however, was that of health care accessibility across Canada. In fact, some 60 percent of the public dialogue groups that developed priority cards acknowledged health care accessibility (to professionals, facilities, etc.) as central to the quality of life in Canada. If one includes as well those groups that identified “universality” or “maintaining a universal system” as implicitly talking about access, then nearly three-quarters of all groups developed the sub-theme of health care access. For example, the participants from somewhat more remote regions of the country often raised the issue, much as in the aforementioned case of northern Manitoba. A second example comes from the following participant from Sydney, Nova Scotia: “(We need) accessible health care. We have specialists on the island, but only one in a lot of areas. There are long waits for specialists and you’re rushed when you get in.”

Common concerns across a variety of groups were the wait lists for certain procedures or the access to more timely interventions.

A common concern across a variety of groups was the wait lists for certain procedures or the access to more timely interventions. Some participants viewed health care access as an equity issue, as in the following comments from an Ottawa participant: “(In my view) equality of opportunity extends into health – the opportunity to recreate, exercise, but also to receive reasonable health treatment when we do get sick. (There are) a lot of equity issues around health.” Still others lamented the costs associated with certain health-related services, such as dental care, which were believed to be reserved more for the wealthy or the employed with benefits. One participant, however, observed that “I am an immigrant and Canadians don’t know how lucky they are (to have) the free health system.”

The participants in one-third of the dialogue groups further discussed the significance of mental health as essential to quality of life. The issue typically arose in the context of more general

discussions of health, wherein a participant might remind the group to remember the importance of mental health. Some groups mentioned factors such as work-related stress that might threaten mental health. Where the groups discussed mental health in any detail, the common quality of life issue identified was access to mental health services. Some participants mentioned the difficulty in accessing mental health services due to inadequate funding of such services, while others simply considered mental health services to be inaccessible because of the costs. Thus the common sub-theme was that there was a need, in the words of one Peace River participant, for expanded “access to public, physical and mental health care.”

One in three groups stressed as well the importance of health promotion and prevention as relevant to maintaining a high quality of life. The participants in St. John’s and in other dialogue groups spoke on several occasions about the *reactive* nature of the health care system, rather than emphasizing the prevention and wellness. The dialogue participants captured the essence of the issues identified in the following manner:

In Fredericton:

Participant A: I think one of the things that we’re trying to get government to shift their thinking about is being proactive in health promotion and problem prevention. The promotion aspect is reflected in the desire to start with the very young. Acknowledging the more we start with that end, the less we are going to spend in correcting mistakes.

Participant B: The more preventative measures we put in, the less remedial help we have to give.

Participant C: Health promotion is very much the thinking now, rather than a cure for a disease.

Still there were concerns, such as in Peace River, Alberta, that funding for health care continued to be concentrated in the traditional disease model: “We’re getting into health services delivery, (but) I’m talking health promotion, (or) the number of dollars in a percent of health budgets spent on health promotion. Right now we probably spend 90 or 95 percent of our health dollars on hospitals and doctors and we don’t spend on health promotion. As people become more aware that our lifestyles impact on whether or not we get sick, then they begin to be able to make choices.” A participant in the group agreed by stating that “when you have public health care you should have public health promotion underneath it.”

Finally, some groups identified other health-related sub-themes such as concerns about the quality of health care, which a few participants argued was in decline mainly as a result of funding cuts. Three groups further discussed a perceived lack of compassion or a caring attitude among some health care professionals. Another 15 percent of the groups stressed the importance of individuals assuming more responsibility for their own health, such as through regular exercise and healthier diets. Still another 10 percent of the groups emphasized the importance of alternative medicine or believed that there should be more funding for alternatives such as chiropractic and naturopathy.

In closing, health issues were identified as priorities for quality of life indicators more than any other thematic area. The general sense from the dialogue discussions groups was that health care accessibility should be monitored, including measures of the universal nature of the system and the capacity of the system to accommodate the diverse populations seeking health services across Canada. Most groups discussed the importance of developing or using standardized measures of

physical and mental health, while others stressed the importance of health prevention and promotion.

3. Education

More than half of all dialogue groups devoted at least some of their time discussing accessibility of a free, universal system of education. While there were concerns about the education system in Canada, nearly everyone seemed to agree at some level that, in the words of one Montreal participant, the “quality of education equals the quality of life.” One Halifax participant argued that education might be viewed as “the basis for civil society,” to which another responded that “education is essential for a democratic political system.” In both Halifax and Joliette, participants argued that education provides a critical linkage to health and the economy. One Joliette participant stated that “éducation est priorité numéro un – c’est une roue qui tourne sans fin, tout passe par là – la qualité du logement, tout – l’éducation pour moi c’est le facteur clé, déterminant de la qualité de vie.” Others from Ottawa equated education with empowerment and as an essential means for helping individuals to realize their basic rights. Consider the following example from one group of Francophones, who viewed accessible education as vitally important, as well as access to information in general and the relevance to democratic societies:

Suggestions for improving the education system included strategies such as rewarding or valuing teachers more, more latitude for teachers to exercise their creative capacities, smaller class sizes, and more parental involvement.

Participant A: éducation – acquisition continue du savoir – et enseignement primaire et secondaire

Participant B: la question de l’éducation, l’accès à l’information

Participant C: pour avoir une société démocratique, il faut que les gens aient l’esprit critique, etc.

Many participants were concerned specifically about the quality of primary and secondary education, with some voicing concerns about funding or program cuts. In addition, participants in several dialogue groups felt that public education needed improvements. The suggestions for improvements included strategies such as rewarding or valuing teachers more, more latitude for teachers to exercise their creative capacities, smaller class sizes, and more parental involvement.

From Brandon, Manitoba, one parent talked about the current situation in the following terms: “I worry about my kids in school, and having quality education. Having enough teachers for them like if there was more help for kids that were struggling... The classroom sizes are too big, the kids are stressed, (and it) makes their mothers stressed.”

Indeed, as with the health care system, dialogue participants for the most part emphasized the importance of maintaining the universality of the education system and, where possible, enhancing accessibility even further. In fact, nearly half of the dialogue groups discussed not only the public schools system, but considered *post-secondary* education at some point as well. One dozen developed priority cards for that particular sub-theme. At issue for post-secondary schooling was *access* or *affordability* rather than *quality*. Some talked about “less fortunate people (not having) the same opportunities.” In Nova Scotia, one participant viewed higher education as “in trouble... because the cost of education is going up and up. I mean education financed by their parent for a child who wants to go. When they graduate, student loans are huge. They are larger than mortgage payments. The debt ratio is out the window.” In short, a common view was that post-secondary education was not feasible for many Canadians, which thus has further ramifications with respect to job opportunities, income disparities, and the quality of life in general. The following extended discussion from a Nova Scotia group captures many of the more salient ideas that emerged around post-secondary schooling in particular:

In Sydney:

Participant A: Affordable access to post secondary education, everyone doesn't have equal access...

Participant B: If there were a term of post-secondary education for all, so that everyone would be expected to take it, that would create equality. Even when it's affordable and there are opportunities, when a person grows up in certain social situations, they often can't finish their first round of education, so why would they do more?

Participant C: I think it should be if people want to go they should have the chance, you can't force people to go, but the opportunity should be there.

Participant D: Education is being called a rich-man's luxury. Boy does it burn my butt to hear that.

Participant E: If you're taking a course here or in Halifax, Ontario or BC, the course should cost the same. For example: in a pharmacy technician course, some had to provide their equipment and pay more than others, in other places, but they got the same certificate.

Participant F: If you put the emphasis on education just for the job market, there's a lot of frustration. A good education to me is self-awareness, how you live your life when you don't have a job. Education is for yourself, and once you have it, you have it for life. (This is) separate from education for the marketplace.

Participant G: I agree with what people are saying: Education is something that gives people options and the ability to see options. But if people are paying less for courses elsewhere, those people end up competing for jobs here, so people in one area are actually subsidizing others to compete with them for the same jobs. Effective economic development should include equality of access to education. A better-educated population is more attractive to people who are establishing businesses.

Participant F: Access to education and broad education leads to a stronger and cleaner environment.

Finally, nearly 30 percent of the dialogue groups discussed the issue of lifelong learning or continuing education as important to the quality of life in Canada. In Ottawa, one participant established priorities as consisting of “education, post-secondary education and lifelong learning,” suggesting that there should be “equal access to Internet, free education, including a certification.” The most common refrain was the need to ensure access, particularly in regard to adjusting to changes in the economy. Thus in Winnipeg one participant identified “access to lifelong learning (as important because of a) changing economy. Canadians have to accept that and understand and go with the flow.” Another participant in Sydney stated that “Everyone is going to continue with lifelong learning from now on. The days of doing one thing for 50 years are gone.” Indeed, in Edmonton the discussion of possible linkages between themes resulted in the following conclusion from one participant: “I’d take post-secondary education and lifelong learning and put them with employment. A lot of people could be in a job for 25 or 30 years and be affected by cutbacks. All you’ve done is train in one area and you can’t do anything else.”

Apart from the employment issue, some viewed lifelong learning as intrinsically valuable to citizens and the broader quality of life in society as a whole. For example, a high school student from Woodstock believed in “lifelong learning” because “it’s always important to further your education as much as possible, to know as much as you can.” Another student responded that “you can never stop living and learning.” Another participant from Edmonton summed up the issue accordingly: “Lifelong learning. I’m valuing access to it. It’s an indicator of the health of a country when its people continue to change, learn, and grow.” In Ottawa, one participant viewed as a priority “learning at all levels. We need society, government, organisations, and people that learn. A society that can’t learn is dead and for Canada to thrive and survive, it has to learn as a society, government, etc.” Finally, in Halifax a discussant supported lifelong learning by suggesting that “I think the only way we can improve the quality of our life is to learn from mistakes of those who’ve gone before.” Another participant responded accordingly:

I think we have to think about education in a very broad sense, the same way we’ve been thinking about health. Because we’re talking about quality of life, and I think we now know education has to be something we engage in our whole lives and I think we can. I would be concerned if the indicators were only about the number of young people who go on to higher learning or something. Like I think there really does have to be (lifelong learning) because no one is really staying in one job their whole life.

In summary, most groups expressed the view that public education at the primary and secondary levels should be part of the quality of life indicators prototype. The groups generally emphasized accessibility, quality and funding as issues to be monitored, with concerns regarding access expressed more often in regard to post-secondary education. A final sub-theme involved the growing significance of life-long learning, which many participants regarded as essential in light of a changing economy.

4. Environment

Nearly every group discussed the environment, with most supporting the idea of maintaining a clean, healthy environment as a national indicator priority. More than any other single issue, the vast majority of group members discussed the environment as an indispensable feature of, or nearly

synonymous with, the notion of “quality of life.” Nearly 90 percent of the groups developed priority cards directly citing a clean environment as essential to a quality of life indicators prototype. Most groups developed additional cards in support of specific aspects of the environment, such as water quality, air quality, toxic waste, waste management, responsible stewardship of natural resources, and access to the outdoors.

The emphasis on clean water received the most widespread discussion across dialogue groups. In fact, 60 percent of the groups developed priority cards or had members casting votes specifically in favour of clean water as a national priority for a quality of life indicator system in Canada.

Although the timing of the Walkerton tragedy in Ontario may have influenced the responses to some degree, many groups from around the country discussed their own water problems and concerns. For example, a Nova Scotia participant stated that “right now there is a problem (with water) right across Canada, and we have that problem in our own area.” One dialogue group framed the environmental issues as a mosaic of interrelated issues, as the following extended quotes illustrate:

Nearly 90 percent of the groups developed priority cards directly citing a clean environment as essential to a quality of life indicators prototype.

In New Brunswick:

Participant A: We can't live in an environment that's dirty, unbreatheable, no natural resources... It makes for a planet that you're not really living in.

Participant B: Extinction.

Participant C: Expenses and health care.

Moderator: How might this be measured?

Participant D: Air quality, water quality, sustainability of our natural resources. Will we have a tree left in New Brunswick 25 years from now, or clean water? If we cut all the trees down there won't be a lake; it'll just be a mud-hole. That's the easiest part of all to measure.

Moderator: Some might say the environment can look after itself.

Participant E: If you take the people away!

Moderator: (The) consequences of doing all extreme things for environment will harm economic health?

Participant F: Let them deal with the consequences of Walkerton. It affects all of us. We have to boil water over in Fredericton; gas lines going in all over the place. That's a wake up call – people died.

Some groups discussed the related issues of sustainable development, managing renewable resources more effectively, or environmental stewardship in general. Some of the issues cited included the loss of habitat for wildlife, clearcutting and overfishing practices that overuse renewable resources, acid rain and water pollution resulting from toxic wastes and run-off of chemicals in farmers' fields.

Some participants identified tradeoffs involved between a healthy environment and support for business, such as the following comment from Nova Scotia: “(It’s) unfortunate that businesses create toxic waste, but we also need business.” Several participants in Almonte, Ontario discussed the problem in terms of the failure of industry to police themselves and lax enforcement of environmental regulations, as one participant suggested that “industry has a role. They have to govern themselves with the environment. No one is enforcing the law that could force them to take their responsibilities. They need to be held accountable and there should be incentives.” Another participant responded that the problem was a lack of enforcement of environmental standards: “There is no policing. We have the best legislation in the world but it’s not enforced.” By the same token, there were a number of voices calling for more individuals to accept more personal responsibility, such as through carpooling or reducing their commuting. The urban-based participants often discussed a plethora of interconnected environmental concerns, such as the following group:

In Toronto:

- Participant A: I live close to High Park. I’m only about a mile from Lake Ontario. It’s a beautiful area, but most of the time, you cannot go swimming. You have this wonderful resource, but you cannot use it.
- Participant B: Recently, with the passing of the Adam’s Mine contract, I’d say the garbage is a big environmental aspect. It’s connected to consumption.
- Participant C: Consumption of food and the creation of waste...
- Participant B: The pollution can get into the water – it’s all interconnected.
- Participant D: The natural environments are not being respected in the city as well. I used to live in the suburbs, and now I live downtown. There’s too much concrete and you can walk and never see the sun. I think it would be nicer if the legacy of 2000 was more trees, and not the moose [note: several decorative moose were on display for several months to promote tourism and civic pride].
- Participant E: I’d like to disagree – you live in a city with more trees than anywhere in North America. We haven’t put up air pollution yet. Well, I think that we have already burned a hole in the ozone layer. I think that this is why the seasons are now so strange – and it’s affecting the other environmental factors like the trees. My chestnut tree produced so few nuts this year. The tree is totally confused and turned brown at the edges in early July. For the first time ever, they have seen water at the polar ice cap. I think that global warming is here.
- Participant B: There are more vehicles on the road right now because of the cutbacks to public transportation. I see just one person in a car; that doesn’t make sense. People should use their cars more intelligently. I have to breathe the fumes when I ride my bike. Those drivers are ridiculous. It’s status – and you see the commercials, etc. People need to think more creatively about transportation.
- Participant A: (There are) issues of personal choice. Government could do something about it, but it bugs me when I see people jump into their car to drive half a block to pick up milk – laziness.
- Participant F: Accessibility of bike trails is another issue – you cannot easily access the trails. I’d like to get out to the trails more, but it’s difficult to get to them.

Others focused on toxic waste or waste management in general as high priorities. Often local issues dominated discussions of waste disposal, though most participants stressed the need to consider waste management in the context of broader tradeoffs involving healthy living habits, consumption patterns, and recycling practices. While some participants believed that compromises should be developed to balance the needs for economic growth with environmental protection, others were more polarized around the issue and more often in the direction of maintaining or even enhancing the environment. A Fredericton participant summarized the view accordingly: “I think we have too strong a focus on quality of life being financial... We have to look at it as being something much greater than whether or not you have a big paycheque or fancy car. I wanted to put this in, it’s a Cree Indian Prophecy: *Only after the last tree has been cut down, only after the last river has been poisoned, only after the last fish has been caught, only then will you find that money cannot be eaten.*”

Environmental issues stimulated considerable discussion, with a near consensus that a quality of life indicators prototype must include specific measures of a clean, healthy environment. In particular, participants emphasized the importance of monitoring specific aspects of the environment such as air and water quality, toxic waste disposal and waste management or recycling practices in general. Still others stressed the need to examine the extent to which renewable resources are emphasized.

5. Social Programs/Conditions

Nearly every group selected or developed cards pertaining to social programs or conditions, which were generally considered essential to the quality of life in Canada. The specific programs discussed varied somewhat, though many groups included a variety of income maintenance supports to cover the costs of the basic necessities for vulnerable populations. For example, a Francophone in an Ottawa discussion offered the following observation: “Minimum vital – il faut un minimum vital pour permettre aux Canadiens de vivre comme des humains. Il faut un minimum pour payer le logement, les vêtements, la nourriture – à cause du climat, c’est probablement plus important encore d’avoir un minimum vital.”

The general sense for many of the groups was that there should be social support systems adequate to respond to and meet basic human needs.

In a few groups, however, the participants raised concerns about such programs or about those who might abuse the system. Hence not everyone endorsed an expanded or more comprehensive system of social programs. The issue of personal responsibility surfaced occasionally as some participants expressed their reservations about extant income supports. As one Edmonton participant stated:

I don’t know if I agree with social programs for different needs. I think that what we’ve gotten a lot of, is government will look after us. We’re responsible for ourselves. What about the person who is a diabetic and won’t take their medicine? What about the smoker who won’t stop smoking, or the overweight person who won’t lose weight? Your health, your ability to get a job, to work – we all have circumstances in our lives we are responsible

for. I am a firm believer in supporting people, but I don't believe in support (for those who do not assume) personal responsibility for your health, education, etc.

Participants in one Alberta group emphasized the importance of having expectations of or additional requirements for social welfare recipients:

In Peace River:

Participant A: Food banks are wonderful, but they're a band-aid. (We) need programs to draw the people to work with them so that they can become responsible.

Participant B: Make work projects with welfare (because of the) possibility of dependency if there's nothing attached.

Participant C: Some essential element of being independent...

Participant B: Level of responsibility; some families can't help themselves.

Participant D: Decrease that pyramid that we see happening. Mom and Dad got that free cheque, so that I might as well be on it. It's attitude. (We should) enhance the attitude all across the country because we do live in one of the better countries of the world.

Participant B: Link a certain level of expectation around a welfare program so that you have employment skills program. If you get a welfare cheque, you have to seek an employment counselor. Sitting down to assist that individual. The underlying factor is motivation and attitude. If people are being coached. You have no choice; need to work towards independence.

Participant A: The key to fostering the self esteem (is) helping people to succeed. The more they succeed, the more self-confidence that they build.

For the most part, though, the discussions did not simply dwell on perceived problems with social assistance systems or work incentives for welfare recipients. Instead, the participants emphasized the importance of income support programs to ensure that basic needs were met among the general population as a quality of life issue. A St. John's participant summarized her view of employment in relation to income supports accordingly:

On a national level, employment is important as to quality of life. If my employment ends tomorrow, then there are measures like (employment insurance) to fall back on that can help until I can get back to work. If I get sick, I don't have to worry about being turned away because I do not have Blue Cross, etc. Maybe government will not take care of me the way I think they should, but I will not end up on the street. A lot of people fall through the cracks, however there are a lot of social programs available. Your life is relative to your quality of life. Newfoundland has a far better quality of life than some other places such as the United States.

The general sense for many of the groups was that there should be social support systems adequate to respond to and meet basic human needs. While relatively few participants advocated a guaranteed income supplement as the strategy of choice, the reality for a great many of the lower-income participants was that of economic tradeoffs that sometimes presented rather stark options. In some discussions, then, participants entertained the notion of a guaranteed annual income as a means of ensuring a higher quality of life across the population:

I would like to see a guaranteed annual income supplement for every citizen to ensure a better quality of life. The idea is that government gives a minimum annual income to everyone. If you make more money, then you return the rest to the government. It is a fairness issue. Because it would affect everyone, the citizens would have more power over the decision-makers on this program. It would save money to the system and would be less paperwork for government, because it would be only one system (Ottawa participant).

Roughly half the groups identified programs in support of children and youths as a national priority. The notion of support, however, varied across the group discussions. Some were concerned about the availability of youth programs or other opportunities for children to participate in after school hours. Still others voiced the opinion that children should be better supported financially and emotionally, or that some parents required additional assistance

Many discussion groups identified availability, affordability, and quality of daycare or childcare programs as a priority.

to learn how to support their children more effectively. Other participants believed that children should be supported to stay in school or to maximize their potential. Finally, some groups equated the issues of child protection and safety with support for children. A few groups discussed the importance of healthy child development as important to the quality of life in Canada, while a similar number argued that children needed more time and attention.⁵

Consistent with the aforementioned perspectives, many discussion groups identified another social program issue or priority as the availability, affordability, and quality of daycare or childcare programs. At least some participants in dialogue groups held in each province trumpeted the notion that access to affordable, quality daycare would be a strong support both for families and employers who might have a larger pool from which to hire. In the extreme, two groups from Toronto and Nelson argued that a national daycare program or “universal child care access” would be one of the most important “investments” that Canadians could make. Most of those who discussed the issue stated that the access issue had to be addressed, while some mentioned “quality” as well.

The issue of daycare was raised typically by women and commonly among hard-to-reach groups. The basic notion, as expressed by one Toronto participant, was that “childcare is important – we need to have access to daycare for women.” In only one situation did an individual challenge such logic. When one participant lamented the presence of latch-key children, another responded that “they shouldn’t have children if they cannot afford it.” A somewhat more common response was the notion that unpaid caregiving should be recognized more fully in conjunction with supports for daycare. There were some concerns, for example, that “You’re penalized for (staying home). It’s tough sometimes. We’re a one-income family” (Edmonton). Some participants commented quite simply that “a stay-at-home mother deserves a paycheque.” In a second Edmonton group, one participant summarized the position in the following manner:

⁵Seniors did not receive much discussion in these dialogue groups, although a small number of groups talked about certain long-term and health care options on behalf of the elderly.

(I like) having moms able to be there for their children. Having the work that they're doing have a value in society... If they're going to subsidize daycare, why can't moms be given a subsidy to stay home? If funding is available – \$20,000 a year – for subsidized daycare, we can validate that the mother staying home does that too. By law, if you are not working, you are not entitled to Canada Pension. If you stay home, outside the work force, to me, that is a vital role that you have.

On occasion, the child tax benefit received some recognition as helpful. In addition to such financial supports, however, the opinion surfaced too that there were benefits to having social programs targeting parents. As one participant noted, “Social programs are nice for stay-at-home parents to meet members of your community. (They can help with) not being isolated, to have contact with your neighbours.” An even more common response was that of providing parenting resources and skills development programs, particularly to assist low-income or younger parents. Finally, the issues of social housing and/or the distribution of wealth received considerable discussion (more than half of the groups in total) as well, but these issues will be addressed more fully under the sub-section on the economy and employment.

In short, while there were exceptions at the individual level, most groups suggested that measures of social programs should be included in the quality of life prototype. Many discussed the importance of income maintenance or support programs, particularly for those who were considered to be dependents. The groups in general recommended that more specific factors be monitored, such as meeting basic needs, income supports for low-income families or those with particular dependencies, housing affordability and daycare options. More than one-third of the groups discussed these matters in the context of a perceived inequity or growing inequality in the distribution of wealth in Canadian society.

6. Personal Well-being

At the more personal level, nearly half of the groups offered at least some direct support in favour of achieving personal well-being as a national indicator priority, while an equal number of groups discussed specifically time usage and the struggle to achieve balance in their lives. The struggle to balance work and domestic responsibilities clearly weighed on the minds of many participants. A Montreal participant discussed the importance of “un sentiment d'équilibre entre le travail et la vie familiale dans le quotidien; sinon ça crée des problèmes.” An Ottawa participant explained that “people are more stressed out these days. People are working 24-7 (24 hours a day, seven days a week) with phone, fax, email, cell phone, etc. People are often rushed when they get home at 5:00PM. It's non-stop work. (There's) a need to reduce stress and time pressure.”

The struggle to balance work and domestic responsibilities clearly weighed on the minds of many participants.

Others suggested that the failure to achieve a healthy balance has undermined the quality of many relationships. A Woodstock teenager, for example, talked about how “most people are so busy with work, or with just different responsibilities that they have that they don't take time to enjoy other people, family, and friends. We all have friends that we care about, but we don't give them the time

that we should.” One Edmonton participant suggested that the time crunch fundamentally undermined individuals’ sensibilities about how to relate, resulting in more fragmented and generally unhealthy lifestyles:

People don’t realize the importance of the value of being available, to be there to talk and listen and not being so harassed by time constraints... We try to put too much into a day. That’s a shift that needs to be made. You don’t have to be active and rushed all the time. Quietness is exceedingly valuable.

The primary culprit creating the time crunch for many, however, was the challenge of work responsibilities and the demands that often extend beyond a “normal” working day. In Outlook, Saskatchewan, one participant commented on “people working harder and longer hours to make a buck, (with) fewer hours at home with families,” while another talked about the pressures associated with “getting ahead in (one’s) career, moving up the ladder.” Some clearly resented the excessive demands of some employers, as one Toronto resident complained: “Employers expect 55-70 hours (per week) and expect you to travel away from home and family, etc. They are extracting value from you – and from your family and community.”

In Ottawa:

Participant A: Well work is important, but I always want to spend time with family. But it doesn’t always work that way because the pay cheque has to come first sometimes... have to work to make a living too.

Participant B: Canadians are working more, when you look at the statistics. People are putting in more hours per week and per year. That is considered by some an indicator of success.

Participant A: I don’t know if succeeding is putting in longer hours or not.

Participant C: It seems difficult that you have to work longer and harder to make ends meet, and to sacrifice your family and social life.

Participant A: If you want to keep your job you have to work the longer hours whether you want to or not.

Participant C: I look at my father who works 16-hour days, seven days a week. His nerves are shot; he can’t do anything. When I was growing up, I hardly saw him. It is a family unit and it is personal health. There is stress and other problems that come from that.

Families and friends were certainly considered to be integral dimensions of quality of life, though relatively few groups engaged in extensive discussions without reference to the interconnectedness with other issues. The participants often viewed the family in particular as a key potential support to provide a sense of security, stability, morality, and self-esteem. At the far end of the continuum, an Edmonton participant described the family as a “gauge as to our quality of life in this country.” One participant in Almonte, Ontario argued further that “the quality of the relationships you have makes your life valuable or not. If you have a good circle of friends and family, things can happen but life still continues.” A French-speaking youth participant suggested that “after a tough day, you want your family life.”

Indeed, many considered healthy families or family well-being as more than simply material conditions or income. One participant suggested that Canadians should “value kids, not the dollars,

(that one) can have a healthy family if not driven by material things, (or that one) can have a healthy family no matter what the financial situation.”

Another issue discussed in relation to personal well-being was the sense of being in control of one's life. As one Newfoundlander commented, “Quality of life is having a feeling of control. Having finances to find your own job. Even if you don't have money, (it's) being able to control various aspects of (your) life.” A participant from another St. John's group agreed that “it's about having choices of what we want to do rather than being victims. Being masters of our fate because I think that's very important.”

Another individual linked health to the sense of control or security: “If you don't feel secure with your own health care and your own health, that increases stress.”

Another issue discussed in relation to personal well-being was the sense of being in control of one's life.

Nearly one in three groups suggested leisure and recreation should be a national priority for a quality of life indicators prototype. Once again, the issue of access figured in some discussions, while others linked recreation more directly to health issues. One Toronto participant spoke of the limited time frames for accessing recreational facilities by noting that “even though you have the time slot for free, it usually is not at a convenient time for the people who have the worse jobs.” Another participant elaborated by expressing dismay at:

how little government support there is (for sports and recreation). There's no free access to a gym. Here if you want to join a club, you have to pay so much. There is a contradiction here. Private clubs don't want the government to provide access for free, so they block that – then people are definitely not fit and healthy. I was always fit and when I came here, (but) I found myself unable to afford a health club. Fitness is a privilege here. Even the free services at the community center are extremely limited. The reason is that the private sector wants to sell the services.

especially in regard to a broad concept of personal security. In several discussions, the participants linked personal well-being to family well-being, or the degree to which For the most part, indicators of personal well-being were considered to be essential, informal supports were available in their lives. The groups believed that other indicators should be developed related to time use, the ability to establish balance in one's life, diet or nutrition, and leisure and recreation opportunities.

7. Community

The majority of the groups explicitly talked about the notion of a “healthy community” in relation to quality of life issues. At least one in four groups explicitly talked about the notion of a “healthy community” in relation to quality of life issues. The nature of what constitutes a healthy community, however, was not universally defined or accepted. Two of the dominant sub-themes, however, linked healthy communities to the notions of: 1) safety within the community or public safety in general; and 2) a sense of social cohesion, mutuality, or connectivity to others at the neighbourhood or local level.

In Toronto:

Participant A: Community needs to be defined – it’s a pet peeve of mine. What I’m trying to get at is that there are many kinds of communities. It means different things to different people. The communities within which we live is what I would call community for this discussion.

Participant B: I think that for me, it is where neighbours talk to each other.

Participant C: And care for one another...

Participant D: There are different cultures and ages on my street. Many have little boys and they go from one house to outside, and on the street they are constantly admonished. There is nowhere for them to go without having people complain. They shouldn’t be out late at night, but even in the afternoon.

Participant A: It’s difficult today for kids on the street – there are many kids not allowed to play outside. Safety is the key issue. I see things that the average person doesn’t see when they come and go to work.

Participant E: Safety is beyond just that safety. You will have more businesses in the safe neighbourhood, which will make it a nicer place to be, safer, more convenient for people. I live in a nice Polish community close to High Park, with so much diversity and little shops. I don’t have to go to the supermarket and you feel so much better. You don’t have to get frozen food.

Participant B: And you support small businesses.

Participant E: It helps foster the sense of community.

Participant A: And you talk to the neighbours.

Participant D: All the kids in my area cannot go to the parks. You need them close to home so that the mothers can keep track and watch the kids. Parks have problems with drug dealers and policing.

The sub-theme that generated considerable discussion regarding communities revolved around the notions of social cohesion and the degree of connectivity. As one Toronto participant reasoned:

The community has to have strong institutions as well. We took these things for granted for a long time, but as many are dismantled, you see holes in your community that leads to a number of anxieties – loss of the sense of neighbourhood strength and resources, people connecting together... But it’s more than that. It’s a need for the institutions. For me personally, it’s a peace of mind. I like that my kids can walk to school, choose a ballet course in the area, can choose from two parks to walk to and play hockey, or whatever. I

have daughters and I like the idea that they can move about freely in a secure and safe neighbourhood where there are still a lot of eyes taking care of them. I want all neighbourhoods to have that same sense, not just wealthy ones... that's why you have to invest in community institutions.

Thus the participants in roughly one in five dialogue groups discussed the importance of community centres and opportunities for children, occasionally linking these issues to healthy child development and lower crime. Some reasoned further that more community resources were necessary because “with parents working, the kids are out there on the streets faster. Because people work longer hours, and odd shifts, then the kids are left with one parent or are alone a lot.”

Beyond the focus on children, some participants spoke of the importance of “connectedness,” friendship, and volunteer opportunities as central features of healthy communities. For some, such as this Toronto participant, the notion of community included the church: “Church attendance is an important indicator of bonds – one place where you do hear good news... they are pro social justice, etc. and you can volunteer and get involved in church groups, etc.” In Woodstock, one of the teen participants stated that “participation in the community... especially for Woodstock, can be improved... People don't get together and do things as a group, aren't really well knit.” As one Winnipeg participant stated, “some places, like West Broadway, are trying to build a community again with (their) renewal and restoring of the neighbourhood. People need to learn how to be in a neighbourhood. People don't know how to be a good neighbour anymore.”

Two of the dominant sub-themes linked healthy communities to the notions of: safety within the community or public safety in general; and a sense of social cohesion, mutuality, or connectivity to others at the neighbourhood or local level.

Hence the general view was that healthy communities consisted of relatively stable sets of relationship, where individuals had a shared sense of cohesion, where resources were sufficient to provide learning and recreational opportunities, and where people experienced a sense of security. A Winnipeg participant summarized the view as follows: “I think quality of life is enhanced by living in small scale residential neighborhoods, in the one I live in you know the people at the store, the coffee shop, the bar, it's a real neighbourhood, a community - this is a quality of life you don't find in the suburbs where you have to head to a strip mall and you don't know people.”

Although seniors, newcomers, and many other demographic groups were not often the focal point of the quality of life discussions, participants often identified linkages between certain areas and the plight of particular groups (e.g., health care in retirement for seniors). Many of these linkages occurred in the context of discussing healthy communities, which often included statements about the importance of looking after one or more particular groups such as children. Interestingly, three different dialogue groups from small-town locations or the Atlantic provinces specifically quoted

the idea that “it takes a village to raise a child,” while several other dialogues (including those from large urban areas) conveyed the same idea but with different language. In Peace River, two participants talked about parents not having adequate skills or support from the community to help with children and concluded that “we as a community have a responsibility to help them in any way we can.”

In Fredericton:

Participant A: Years ago, I walked to school about two miles every day. When one of us issued a bad word (or) if we bullied, a parent would come out of the home and you were chastised on the spot and when you got home your mother was already told about it. There’s something in values today that it’s not considered anybody’s business. If I was walking down the street and there were two teenagers, and they were bullying each other, and I dared step up and say anything, chances are they’d both turn on me and I’d become the victim. It was ordinary, it was “the” thing to do, because the community values were for everyone. We all took an active, participating role to see that those values were adhered to. It didn’t become “You can’t tell me. You’re not my mother” or that you didn’t have any right to speak.

Moderator: So, community cohesiveness?

Participant B: I was trying to capture the transmission of values. What we believe is acceptable is clearly articulated and we all own it.

Participant A: I’m not sure that phrase would do it. When you’re here, it’s understood what’s meant, but if you put it in a document... It has to be broadened a bit so that values become everyone’s concern – in plain English.

Participant C: Community responsibility.

Participant D: Like I have the right to tell that child what they’re doing is wrong.

Participant E: A lot of Native communities follow the phrase “It takes a whole village to raise a child.”

Participant A: That’s what we’re doing but we’ve lost it, and we need clichés to get back to it.

Some groups engaged in discussions around volunteer activities. Many participants talked about the level of volunteerism and civic engagement at the community level, as well as the satisfaction of working within a community, volunteer, or faith-based organizations. Some discussed too the importance of or the extent to which communities recognized those involved in volunteer activities. One Winnipeg participant stressed the importance of “participation (in) the community like volunteerism and involvement in religious activities... like satisfying volunteer work; doing something that makes me feel like I’m contributing to the betterment of society and doing good for me too.” Other groups recommended that there should be an increase in subsidies or other support for voluntary or charitable organizations as a possible indicator of quality of life.

Thus, participants viewed healthy communities as essential to a prototype system designed to monitor quality of life in Canada. The two most important dimensions appeared to be public safety within communities and the underlying sense of community or social cohesion. Another sub-theme involved measuring the levels of resources available in communities, particularly with respect to supporting dependent or vulnerable groups. Still others emphasized the importance of monitoring volunteer activities and charitable organizations active within communities.

8. Economy and Employment

Most groups addressed the economy and paid work at some point. In their deliberations about the economy as a whole, nearly half of the groups emphasized the importance of keeping unemployment rates down or a preference for Canada to approach full employment. Other groups talked about creating or sustaining a healthy, growing economy as relevant to the quality of life or in providing the requisite employment opportunities to help maintain a certain quality of life. At the more personal level as well, several groups stressed the importance of employment opportunities as important in their lives and an issue to be monitored.

Participants often acknowledged a healthy economy as important to quality of life. Their rationales often embodied subtle differences in philosophies, but a common thread involved the notion that a healthy economy served as the fuel necessary to operate the broader engine of government and society at large. One Ottawa participant summarized as follows:

Obviously, the economic side of the quality of life is important – to recognize the importance of the business community as well as the public sector and community non profit sector. A healthy business environment is one where people have the opportunity to achieve their potential – ties in to education (the tools), economic opportunity, the ability to take your knowledge and skills and have a better income for yourself, your family and ultimately for your community, through taxation.

The participants in the Ottawa group continued to associate terms such as “sustainable,” “predictable,” “generating employment,” and “diversified” with the concept of a “healthy economy.” These sentiments were echoed as well in a Carberry discussion, where participants used the language of a “healthy and sustainable economy” as well. In addition, nearly one in four groups recognized the importance of providing support for small business as important to quality of life. Those participants who discussed the issue generally viewed a healthy business community as vital to providing jobs, security, and contributing to the overall community in a variety of different ways.

Economic security was another key issue raised, which included sub-themes such as job security, employment opportunities, and rates of compensation or concerns about the minimum wage.

In fact, economic security was another key issue raised, which included sub-themes such as job security, employment opportunities, and rates of compensation or concerns about the minimum wage. The job security issue factored in as a prominent source of discussion in one-third of the groups. The general view was that, in combination with a rapidly changing labour market, job security was less of a certainty than previously as a result of a dwindling supply of standard work opportunities. For many participants, job security in the “new economy” no longer means permanent, full-time work. For example, one Sydney, Nova Scotia participant described the situation as follows: “Large companies around here are hiring part-time. You don’t get any benefits, dental care. And you only get minimum wage. People have to work at 3 or 4 jobs to make a living.” Moreover, some linked job security to improved productivity, as in the case of a

Winnipeg participant: If (workers) know they have security, they perform better in their job, have more pride, and know they are doing something important for themselves and their family.

With respect to compensation rates or the issue of minimum wage, a number of participants expressed sentiments similar to these of a Sydney, Nova Scotia participant: “(We need a) living wage beyond basic needs. Minimum wage should be up. You have to take two or three jobs to support your family these days. Emergencies, Christmas, birthdays. There’s no extra money when you need it.” The same sentiments were echoed in several different discussions, from Ottawa (“minimum living wage can’t keep a family going”) to Brandon, Manitoba:

In Brandon:

Participant A: (There are) poor job opportunities...

Participant B: That is certainly the case in some areas, but (there’s a) lack of people to work in restaurants, computer programmers; you can’t find enough of them. The areas in the middle are having trouble. But we are reading in the paper about the help wanted index. You can see there are jobs out there, but there is an area in the middle. I don’t blame people.

Participant C: It would be pretty hard to support a family working in McDonalds. That is where affordable education makes a big difference.

Participant A: That is why I think it is different now. My father did not have to work at McDonalds to pay for school.

The issue of housing affordability and the availability of low-income housing received attention in more than one-third of the groups, with some consideration of the issue of homelessness. The predominant view was that an imbalance between available income and housing options negatively impacted quality of life. The fact that many individuals had relatively low incomes, combined with tight housing markets, meant that housing affordability was a problem. In Winnipeg, Toronto, Montreal, and elsewhere in the country, participants discussed housing as linked to perceptions of a reasonable cost of living or the degree to which the ability to satisfy basic needs might be compromised by excessive housing costs. One participant in Joliette, for example, talked about the need for “logement adéquat et salubre et qui est en proportion du salaire de la personne qui l’habite – on dit que le logement ça devrait être seulement entre et 25-30% de ton revenu – et puis on ne parle pas seulement du loyer. Si tu dois payer des centaines de dollars pour chauffer, c’est pas mieux.” In St. John’s, one participant identified a need for “decent housing and lower rent (because one would then have) more money to spend on your child and yourself. (Yet for some) over 50 percent of income goes to rent.”

Several dialogue groups focused on what participants variously described as adequate or affordable housing, especially for low-income of households living in poverty. Some individuals, such as in Toronto, linked the “lack of affordable housing” to “cutbacks to subsidized housing,” as well as the absence or delays in building a larger supply of public housing. In some cases, participants suggested that the waiting periods for subsidized housing were creating hardships for low-income households. One Toronto participant stated “I was almost homeless once and it is the scariest feeling knowing that you may have no where to sleep and the prices are going up – it is the first right and a very basic need.”

The participants in nearly half the groups discussed a general concern about the distribution of wealth or the perception of an unhealthy growth in the “rich-poor gap” in the country. Roughly one-third of the groups then actually developed thematic cards as a measure of the importance of the issue. The typical comments expressed a certain degree of incredulity in regard to the distribution of wealth, as from this participant in the Joliette dialogue:

– répartition des richesses – je considère que tous les humains ont des besoins minimums. Je ne vois pas pourquoi les quatre plus grandes fortunes ont l'équivalent d'un revenu décent pour 600 millions de personnes. C'est inacceptable – qu'est-ce qu'ils font avec tout cet argent là? Ils peuvent être généreux, oui, mais c'est quand même disproportionné.

Beyond their expressions of disbelief, a number of participants perceived the gap to be growing, which some believed to have ripple effect across the entire society. An Ottawa participant suggested that “there needs to be, as well, a concern about the spread of that wealth, the distribution. For example, in Brazil (or some parts of the US for that matter), even though you have good income you may not be able to walk down the street at night because of the enormous disparity, you're not safe. We should not lose sight of that.” In a different Ottawa group, a participant identified fairness or equity issues in stating a preference to decrease the gap between the rich and poor in Canadian society. Yet another participant framed the following response: “What is important is to maintain a sense of social cohesion – how much is due to disparity in income and to deprivation at the bottom end – you don't want to see people being trapped, unable to improve their lives.”

Moreover, some participants linked income disparities more directly to the quality of life in society. One Toronto participant, for example, discussed the issue in relation to women in general and by acknowledging the role of government in particular: “(I'm concerned about) the lack of child support and lack of control over the distribution of wealth and support for single and divorced mothers. This affects the quality of life for the children and their families. The government doesn't manage the distribution of wealth well to mothers who are single and/or are not getting proper child support.” The following comment by an Edmonton participant aptly captures the prevailing sentiment: “I would agree with security of employment, but call it security of income. Rich are getting richer and poor are getting poorer. It's been proven that where there is a greater gap between rich and poor, people are generally less healthy. Even people who are in the higher incomes are less healthy in societies with wide income gaps.”

In short, the groups stressed that the quality of life prototype should include measures of the economy and work arrangements. From the perspective of these dialogue participants, the specific indicators should be built around issues such as unemployment, job opportunities, economic growth, levels of compensation and job security. Other issues identified included supports for small business, opportunities for meaningful work or job satisfaction and the availability of training and upgrading to adapt to a changing economy.

9. Government

The government in general received a fair amount of attention, with the most prominent issue being that of fair, equitable, and effective fiscal policies. Some participants simply preferred lower taxes, but many appeared willing to support existing tax rates if they perceived the government to be trustworthy or honest, efficient, and accountable to the taxpayer. Unfortunately, the general sense was that government needed to be more efficient or wiser in their use of tax dollars, that governmental waste should be reduced, and that public institutions needed to be more responsive. Hence there were recommendations by some either for tax reductions or a revamping of fiscal policies. As one Ottawa participant stated, “(we need) responsible government: things won’t change too much depending on who has the power. But political stability is important.” Some participants defended the government, however, in suggesting that certain systems served the public as a whole reasonably well, such as the following exchange suggests:

The general sense was that government needed to be more efficient or wiser in their use of tax dollars, that governmental waste should be reduced, and that public institutions needed to be more responsive.

In Winnipeg:

Participant A: Everyone harps on government and government in general. They have a really tough job, (they) look to future: do they choose to put money into healthcare or infrastructure, so people can get to work? I don’t envy the job. Granted, some governments are better than others, but it is a hard job and everyone harps on them.

Participant B: The only thing that is not hard for the government is taking taxes.

Participant A: But the tax money always comes back in one form or another. It may not always be a good form, but it does come back.

Certain Ottawa groups had the most extensive discussions of the role of government and the concept of “governance.” Some expressed concerns about the quality of the government leadership in particular, while a comparable number stressed the importance of having a more balanced and equitable approach to policies in support of businesses. The other concept that resonated among selected groups was the notion of stewardship, as captured in the following discussion:

In Ottawa:

Participant A: In Canada, quality of life has a lot to do with quality of government. It has a lot to do with how governments understand their stewardship of the public trust. To be blunt, I personally feel that the government of Ontario does not have a clear sense of public interest and stewardship of public trust and the quality of life in Ontario has suffered as a result. For example, in Saskatchewan, the governments have had this sense of public stewardship and that is why it is a good place to live, notwithstanding the fact that it is not as rich as other places.

Participant B: I agree. For me, stewardship is about the cross-levels of governments – a shared framework – a way of working together. Canada is more than what individual governments do; it is about a shared framework, shared vocabulary and trusting each other that they can act in the public interest.

- Participant C: No matter how much we think governments should do, if we're talking about how to grow and quality of life, whatever governments do, they must do well.
- Participant D: Good public policy is fundamentally important. For example, bad public policy decisions can create havoc for example, with the environment. If you ignore the value of good science in your assessment, you can be in trouble.
- Participant E: Another dimension: a government that has a sense of stewardship and broader public interest instead of a government that sways back and forth and is willing to take risks to see that part of the mandate realised. So sometimes it is a risk-taking government.
- Participant A: With vision and some foresight...
- Participant B: It's about shifting societal behavior, such as smoking – you need sufficient support for your policy. You can have the best policy but people have to be persuaded. How far ahead of society can/should you be?
- Participant E: When there is some sense of a public decision, even if I don't like it, I will comply.
- Participant C: Respect for the rule of law is important.

Governments were viewed as integral to the quality of life in Canada, or at least in helping to maintain important systems of protection and service delivery. Some participants held out a certain degree of optimism that governments could provide vision and leadership, though many were less sanguine in their assessments. A St. John's participant held the following viewpoint:

Having choices in our lives. The worst thing about being poor is that you don't have any. And I want to put up one that is very fundamental to being a Canadian. It is a fundamental value on which our country was founded. Peace, order, and good government. In contrast to life, liberty, and happiness south has lead to a totally different world, you know. And to me it's also my patriotic one.

In conclusion, the dialogue participants stressed a variety of overarching themes and sub-themes that should be captured in any proposed quality of life indicator prototype. The current section has delved into these themes in some detail. At the same time, there were two dominant cross-cutting themes that linked several of the specific issues together. The next section of the report examines these cross-cutting themes in brief before turning to the question of whether and to what extent certain groups expressed any different or distinct priorities relative to other groups.

B. Dominant or cross-cutting themes

Another way to analyze the dialogue discussions involves constructing overarching or cross-cutting themes in addition to the basic substantive themes. A detailed exploration of the transcripts yielded four such overarching themes: 1) accessibility; 2) personal security or control; 3) availability; and 4) equity or fairness.

1. Accessibility

Virtually every group used the term “access” repeatedly in discussing particular issues relevant to quality of life, although the particular contexts varied. The vast majority discussed access at least ten times in relation to various issues, or often in regard to two or more different sub-themes.

The clear majority of groups viewed access to health care as a core quality of life issue. A common refrain was the need for the “availability to equal access to good health services.” Nearly every participant who commented on the issue supported the notion of affordable, accessible health care or lamented the fact that health care was not necessarily

accessible. In a Sydney dialogue session, the moderator attempted to clarify by asking “So, if you have good physical health, that’s an indicator?” The participant responded, “Yeah, if that’s failing, (then) you have to have good access to health care, which in our area we don’t.” Thus the tenor of the health care access debate generally reflected a belief in the importance of maintaining the universality of the health care system.

Quite simply, quality of life for many participants in large part meant access to a reasonable or fair share of resources and opportunities in Canada, cutting across virtually every sphere imaginable.

Many participants used the concept of access in linking healthy environments to quality of life. An “influencer” from Halifax, for instance, argued that “We need access to clean water and clean air and adequate food to make our brains develop and those things are more important than access to an emergency department...”

Access also cut across discussions of education, in particular in regard to post-secondary educational opportunities. For some discussants, access was relevant to discussions of social programs, daycare options, and legal aid among other issues. Others discussed housing as another specific context where access issues were relevant, such as participants in Winnipeg: “access to any housing - add *accessible* to safe and affordable housing.” Still others discussed access to decent jobs or wages, to a fairer share of the wealth or income in Canada, to community resources, or to recreation and transportation. The occasional participant discussed access in terms of regional disparities as well. Some discussions focused to some degree on access based on immigration or cultural status, particularly in regard to the labour market. Finally, access for some participants meant access to the media or government, or to avenues of influence or persuasion.

Quite simply, quality of life for many participants in large part meant access to a reasonable or fair share of resources and opportunities in Canada, cutting across virtually every sphere imaginable. Yet the general sense was that access was not typically considered to be an automatic right or privilege bestowed upon everyone regardless of their circumstances, although many considered the protection of civil and human rights to be directly linked to issues of access and quality of life. Rather the participants stressed the importance of democratic participation and civic involvement as necessary to ensuring access. Many participants argued that Canadians had to assume a certain degree of personal responsibility in creating a healthier quality of life.

2. Personal security/control

The issues of safety, security and control cut across several areas, including discussions linking families and communities, social programs, education, civic involvement, and employment opportunities. At the very least, safety and security meant lower crime rates and a general sense that one lived in a low-risk neighbourhood. A dialogue discussant in Ottawa offered the following assessment connecting crime rates, the community, and the sense of security: “Moi,

je parle du taux de criminalité – le sentiment d’être en sécurité dans nos communautés. Moi à Ottawa je me sens très en sécurité. Il y a un sentiment de sécurité mais ça dépend de quelle communauté tu fais partie.”

Many of the participants recognized the limitations of attempting to isolate one aspect of a complex set of interrelated issues, and dealt with several issues simultaneously in relation to safety and security.

The evidence suggested that many of the participants recognized the limitations of attempting to isolate one aspect of a complex set of interrelated issues, and dealt with several issues simultaneously in relation to safety and security. For example, social programs such as drop-in centres were discussed as important social network resources that might help to lower crime rates and contribute to a broader sense of safety and security in neighbourhoods. To complement these suggestions, participants stressed the need to use schools more effectively as important bases for community resources and support.

Some participants discussed security as meaning lower crime rates, or a greater sense of personal safety in the community. In a few groups, participants mentioned the need for more police officers or a more responsive justice system as related to quality of life indirectly through the security issue. Others meandered across a range of security issues, including the prevalence of drugs and drug dealing, before moving directly to issues of personal security. Some participants acknowledged the role of government in helping to monitor the level of safety and security in society. One Winnipeg discussant offered the following comment: “We expect government to protect us, we expect it. We haven’t mentioned it, but we expect it when we talk about safety, and personal safety we expect to be protected from bad meat, bad milk, bad water, bad drugs, you can go on. Our government is charged with protecting us.”

The groups identified several interesting elements of work life, community, and families and friends, suggesting the need for a sense of stability and compatibility among these various elements. Stated another way, the dialogue participants viewed stability as a cornerstone to a healthy family, work, and community life.

3. Availability

A third cross-cutting theme involved the notion of availability. The concept overlaps to a degree with the access theme, but with a slightly different nuance. The notion of "access" focuses more on the citizens and their ability to make use of available resources, or those factors that would impede or make it difficult for them to use existing resources. The notion of "availability" focuses more on the "system", meaning literally whether or not a resource, program or service is "available". If there's no recreational summer program being offered, then it's simply not available.

In many instances, participants were commenting on the existence (the presence or absence) of some facet that might affect quality of life. The absence of some condition, such as low-cost housing, meant that quality of life might be adversely affected. In fact, five groups discussed specifically the relative lack of subsidized or low-cost housing as having a negative effect on quality of life in their communities and thus as something for which an indicator should be developed.

The most common availability issues, however, were health care and education. The availability of health care facilities in some regions or other limits for delivering health care were stressed by a number of groups. One Winnipeg group endorsed the position that Canada should have "universal, available, accessible healthcare for all, including persons with disabilities." In a couple of groups, participants lamented the lack of available long-term or respite care. Other participants discussed specifically the limited availability of emergency or other hospital services, while still others believed that alternative medicines should be available.

As with the health care system, those who commented on the issue unanimously agreed that educational opportunities should be equally available to everyone. On the other hand, some participants noted that not every service could be available in different locales. A Newfoundland resident, for example, discussed how she had to relocate to St. John's for certain types of services, which meant too that she incurred living expenses she had not encountered previously.

In some discussions, the participants raised the issues of the availability of different types of welfare programs. The presence of supports for children, such as breakfast programs, generated more enthusiastic discussion and reflection by those who dealt with the issue. At least three groups talked about the availability of a basic minimum, or simply adequate food, as essential to quality of life. There were a few comments too suggesting that available funding for the non-profits sector was declining even as demands were increasing.

4. Equity/Fairness

Most groups dealt with equity or fairness issues as yet another facet underlying quality of life issues. As one Nova Scotian stated, "(It's) that sense of fairness. There's something about Canada's quality of life that has to do with fairness." In developing a quality of life prototype, the participants stressed the need to tap into equity issues in several spheres. The two most commonly identified included discussions of the tax system and the distribution of wealth in Canadian society.

Where participants dealt with the tax system, the general view was that taxes should be reduced and the more specific comments often centred around the fairness of the system for particular groups in society. Some believed that single-income families were bearing a disproportionate share of the tax burden, while others discussed inequities in tax issues surround child care deductions. Another

group suggested that the relatively higher tax rates were driving professionals out of the country. Still others voiced opinions about businesses paying their fair share of taxes, though one group talked about the need for tax relief for small businesses in particular. In short, several groups concluded that a quality of life indicator should involve assessing the fairness of the taxation system.

An equally common theme was the notion that the distribution of wealth involved a fairness dimension affecting quality of life in Canada. Nearly one in four groups discussed the growing gap between the rich and the poor in the country as a fairness or equity issue, especially in terms of affecting access to resources, opportunities, and well-being in general. For instance, one Toronto participant felt that “the government doesn’t manage the distribution of wealth well to mothers who are single and/or are not getting proper child support.” In other cases, the participants viewed the greater balance in income or wealth distribution as a precondition for a healthier economy. Two groups specifically identified the cost of living as a fairness issue that should be addressed. The idea of a guaranteed annual income occasionally surfaced, with the view that such a system would be fairer, would empower citizens in the decision-making process, and would save the system money by streamlining or eliminating many existing programs.

Finally, the issue of fairness also cropped up in reference to several specific groups. For example, the participants in four dialogue discussions identified the treatment of Aboriginal groups as an important quality of life dimension. Several groups discussed gender issues such as pay equity as something that should be monitored as well. Two groups suggested that the youth in Canada experienced unfair treatment in the world of paid labour and by the police. Indeed, the more general theme was that people everywhere should be treated fairly and with respect.

C. Group cluster similarities and differences

The differences observed across groups in their views on quality of life can be explained in part by noting the composition of different types of groups or “group clusters,” which included: 17 quasi-random groups of citizens from urban settings, nine quasi-random groups in rural settings, seven groups of influencers, five hard-to-reach groups, and three youth groups. In comparing the priorities that the group clusters advocated, the evidence suggests both a pattern of convergence around several core themes *and* some important differences. Table 3 summarizes the similarities and differences observed across group clusters, where the same themes appearing in one or more clusters are identified within the same boxes and on the same line. In order to be included in the table, at least one-third of the groups within a cluster discussed the particular theme. Those themes that are identified regularly across at least four of the five clusters are identified in **bold-faced text**. The *italicized text* indicates that a substantial majority of the groups within a particular cluster (generally about two-thirds) viewed the issue as especially important.

For example, while each of the five group clusters identified primary and secondary education as important to some extent, only the urban cluster tended to stress education quality as a key theme. The influencers highlighted lifelong learning more often than the other clusters. Although the urban groups, influencers, and hard-to-reach clusters each stressed education access, the issue was a highly prevalent theme among only the hard-to-reach.

Table 3: Quality of Life Priorities Identified by Different Group Clusters

(Note: **bold** type indicates priorities identified by all five clusters; *italicized text* indicates that a substantial majority of the groups within a particular cluster (generally about two-thirds) viewed the issue as especially important)

URBAN	RURAL	INFLUENCERS	HARD-TO-REACH	YOUTH
Education access Education quality Primary/secondary	Primary/secondary	Education access Post-secondary Primary/secondary Lifelong learning	<i>Education access</i> Primary/secondary	Primary/secondary
Physical health Health care system Health care access	<i>Health care access</i> Health promotion	Physical health <i>Health care access</i>	Health care access Mental health Alternative health	<i>Health care access</i> <i>Mental health</i>
Taxation Public trust	Taxation	Quality governance Public trust	Taxation	Taxation
Crime rate <i>Public safety/security</i>	Crime rate <i>Public safety/security</i>	<i>Public safety/security</i>	Policing <i>Public safety/security</i>	Legal/justice system Public safety/security
Healthy environment Toxic waste <i>Clean air/water</i>	Healthy environment <i>Clean air/water</i>	<i>Healthy environment</i> <i>Clean air/water</i>	Healthy environment Environ protection <i>Clean air/water</i>	Healthy environment <i>Clean air/water</i>
Job security Employment Living wage	Job security Employment Economic growth Benefits/compensation Agriculture Small business Living wage	Meaningful work Job security <i>Economic growth</i> Living wage Business responsibility	Job security Training/upgrading Employment Economic growth Cost of living <i>Living wage</i>	Meaningful work Job security Employment Fair wages/min wage Youth discrimination Employment Cost of living Small business Living wage
Affordable Housing <i>Social programs</i> Basic needs	Affordable housing Social programs Poverty rates Wealth distribution Childcare/daycare Quality food	<i>Basic needs</i> <i>Wealth distribution</i> Family supports Women's issues/equity	<i>Affordable housing</i> Social programs <i>Basic needs</i> Poverty rates <i>Childcare/daycare</i> Handicap access Women's issues/equity Dental care Quality food	Social programs Wealth distribution
Time use/balance Personal well-being	Time use/balance <i>Personal well-being</i>	<i>Time use/balance</i>	Time use/balance Personal well-being Reduce stress	Time use/balance
Civic participation Community resources Healthy communities	Civic participation Democracy Cultural diversity	<i>Civic participation</i> <i>Democracy</i> Healthy communities Civil society <i>Cultural diversity</i>	Animal rights Civic participation Attitudes to disabled Community resources	<i>Equal treatment</i> Civic participation Democracy Cultural diversity
Children programs	Children programs	Children programs Child development	Children programs	<i>Children programs</i> <i>Respect youth</i> Child development

There were several common national indicator priorities to monitor quality of life across the five group clusters. Regardless of the cluster, the groups for the most part emphasized the importance of the following: primary and secondary education, health care access, a healthy environment, clean air and/or water, responsible taxation, public safety or security, job security, employment opportunities, a living wage, social programs, time use or balance, civic participation, and children/youth programs. Stated differently, at least one-third of the dialogue groups within the different group clusters focused their attention on each of the above as important factors contributing to the quality of life in Canada. In the aggregate, these issues call attention to a set of general elements that appears to be widely shared across a broad spectrum of Canadians. The different clusters clearly identified and valued certain key elements that may prove useful in framing a core set of quality of life indicators. Some of the differences, however, should be noted across clusters as well.

Regardless of the cluster, the groups for the most part emphasized the importance of the following: primary and secondary education, health care access, a healthy environment, clean air and/or water, responsible taxation, public safety or security, job security, employment opportunities, a living wage, social programs, time use or balance, civic participation, and children/youth programs.

For example, every group cluster held discussions about health care access or universality, including the majority of groups within the rural, influencer, and youth clusters.

On the other hand, the hard-to-reach cluster groups were more inclined to extend health care discussions to the importance of mental health and alternative health care options. Two of the three youth groups discussed the importance of having indicators for mental health as well. Both the urban and the influencer clusters were more likely to identify physical health as a national priority.

With respect to government and the justice or legal systems, relatively few issues appeared to be particularly salient across the five clusters. The one issue that stood out, however, was the importance of safety and security, whether discussed in terms of the general public, communities, or at the personal level. Both urban and rural clusters alike talked about the crime rate as an important quality of life indicator. Moreover, several groups within each of the clusters expressed concerns about taxation levels or equitable fiscal policies, with the exception of the influencers. The latter cluster was more likely to talk about quality governance, while both this cluster and the urban cluster viewed the public trust as a priority quality of life issue.

With respect to the economy and employment, the groups within the rural cluster more often stressed the need to have quality of life indicators pertaining to agriculture, support for small business, and improved benefits or compensation. The hard-to-reach groups were more inclined to recommend training or upgrading and the cost of living as national indicator priorities. The youth groups focused more on fair wages, an improved minimum wage, the cost of living, youth discrimination, meaningful work, and support for small business. The influential groups preferred to discuss the importance of developing quality of life indicators to monitor meaningful work and corporate responsibility more than the groups from the other four clusters.

Each of the clusters valued social programs and supports, although the specific recommendations for what should be monitored varied. The hard-to-reach cluster prioritized several such issues far more often than the other four clusters. The groups within this cluster were especially likely to trumpet the importance of affordable housing, a more comprehensive childcare system, and ensuring that the basic needs of Canadians are met. Similarly, many of the rural groups discussed affordable housing, social programs, poverty rates, availability of childcare, and quality food. Both clusters further expressed concerns about the growing gap in the distribution of wealth in Canada.

The groups within the “hard-to-reach” cluster were especially likely to stress the importance of affordable housing, a more comprehensive childcare system, and ensuring that the basic needs of Canadians are met.

The influencers were concerned about basic needs and wealth distribution, with some emphasis on family supports and women’s issues, which generally meant indicators of gender equality. The urban groups stressed the importance of developing quality of life indicators to monitor social programs, affordable housing, and basic needs. The youth groups only touched briefly on social programs and wealth distribution, focusing their attention elsewhere in the dialogue discussions.

Each cluster discussed time use or balance as a priority, as well as the importance of civic participation and programs for children and youth. The majority of the influencer groups discussed these as priorities for developing national quality of life indicators. Several influential groups emphasized further the importance of democracy, cultural diversity, healthy communities, civil society, and healthy child development. The youth groups were especially concerned about monitoring issues such as equal treatment, programs for children and youth, respectful attitudes toward youth, cultural diversity, and healthy child development. The hard-to-reach groups preferred indicators to monitor personal well-being, reduced stress, animal rights, community resources, and attitudes toward the disabled. A clear majority of rural groups talked about personal well-being as a national indicator priority, while several discussed democracy and cultural diversity as well. The urban groups also frequently discussed personal well-being, with some additional emphasis on community resources and the idea of healthy communities in general.

The youth groups were especially concerned about monitoring issues such as equal treatment, programs for children and youth, respectful attitudes toward youth, cultural diversity, and healthy child development.

D. National indicators

The dialogue groups for the most part were quite effective in developing collective portraits of quality of life rooted in what participants valued and their preferences. Prompted by the background materials, the questionnaires, and through the efforts of the trained moderators, the individuals participated in the process and contributed to varying degrees in painting the collective portraits. Moreover, the groups were comfortable in selecting the priority themes for national quality of life in Canada. Many of the groups, however, were clearly less comfortable or competent in identifying specific indicators that might measure the priorities selected from the collective portraits. In the first place, the groups expended considerable time and energy on pre-dialogue questionnaires, developing collective portraits, and selecting priority areas for national indicators. One can appreciate the difficulty in maintaining the same level of focus in shifting to discussions of linkages and what information should be gathered to report on quality of life issues in Canada.

The groups typically used either the language of “social problems” to describe areas that they would like to see reported on, or spoke in terms of measures that might be used to report on positive changes in the quality of life enjoyed by Canadians.

Thus the data describing potential measures are far less consistent or of comparable detail to the collective portraits. To use an analogy, imagine a process of public consultation regarding automobile production. The public dialogue group participants were excellent in expressing their consumer preferences. The participants identified important features of their vehicles, as well as the rationales for their preferences. But while most people knew what they wanted in their cars, far fewer were able to engage in the technical tasks of how to design the automobiles.

The dialogue participants nonetheless generated some useful information, as the indicators selected paralleled closely the national priorities selected and the particular themes that groups focused on. The analysis, therefore, necessarily requires a more purely qualitative approach, wherein examples are provided under the different themes identified for further discussion. The groups typically used either the language of “social problems” to describe areas that they would like to see reported on, or spoke in terms of measures that might be used to report on positive changes in the quality of life enjoyed by Canadians. Several examples are provided in Table 4, based on the thematic framework developed previously.

Table 4: Potential Indicators for Quality of Life Issues in Canada, Identified by Participants

	THEME	INDICATORS
1	Health care system	<ul style="list-style-type: none"> • illness rates/higher health rates • access (e.g., health care facilities and professionals) • natural/alternative health care interventions • coverage (e.g., drugs, dental care) • life expectancy rates
2	Education	<ul style="list-style-type: none"> • high school completion rates • accessibility and affordability of post-secondary education • public education funding levels • teacher-student ratios • school violence rates
3	Environment	<ul style="list-style-type: none"> • recycling levels • ozone layer restoration and/or acid rain levels • local sustainability indicators • neighbourhood cleanliness • access to green space • protection of green space
4	Social programs	<ul style="list-style-type: none"> • supports for single parents • employment training programs • housing accessibility and affordability • daycare accessibility and affordability • social assistance rates
5	Economy	<ul style="list-style-type: none"> • employment rate/unemployment rate • income above living wage • economic growth rates • GDP less credit card debt • Small business supports and investment
6	Government	<ul style="list-style-type: none"> • voting participation rates • equitable taxation rates • access to government legislators • levels of public trust in government (accountability) • government waste or inefficiency • measures of responsiveness
7	Legal/justice system	<ul style="list-style-type: none"> • crime rate • recidivism rate • law enforcement of major crimes • proportion of female police officers • proportion of inmates serving full prison sentences
8	General values	<ul style="list-style-type: none"> • civic involvement or democratic participation • personal responsibility • equality of opportunity • extent of long-term planning • racist or discriminatory attitudes
9	Personal well-being	<ul style="list-style-type: none"> • financial security

		<ul style="list-style-type: none"> • stress levels • availability of leisure time • self-esteem or self-satisfaction measures • drug/alcohol abuse rates
10	Work	<ul style="list-style-type: none"> • job stability (length of time on the job) • length of average working hours • job satisfaction levels • worker absenteeism rates • benefits for non-standard employees
11	Community and religion	<ul style="list-style-type: none"> • volunteer participation rates • church membership • poverty and homelessness rates • social cohesion (e.g., interaction rates with neighbours) • degree of segregation or cultural isolation
12	Seniors and children	<ul style="list-style-type: none"> • youth suicide rates • elderly suicide rates • rates of child support payments or default rates • child poverty rates • degree of economic security in retirement
13	Families and friends	<ul style="list-style-type: none"> • healthy child development indicators • time spent with family and friends • domestic violence rates • access to family support programs (e.g., parenting programs) • balance between work and domestic life
14	Information/media	<ul style="list-style-type: none"> • access to Statistics Canada reports • access to information sources • library investments • monitoring inaccurate or misleading information
15	Infrastructure/transit	<ul style="list-style-type: none"> • investment in infrastructure • funding for public transportation • proportion of population using public transit
16	Cultural pursuits	<ul style="list-style-type: none"> • parks and recreation investments • funding for the arts and music programs • participation rates in cultural events
17	Diversity/multiculturalism	<ul style="list-style-type: none"> • numbers of cultural festivals or exchanges • rate of settlement of Native land claims and legal issues • immigrant access to participation in society and economy
18	Quality of life in general	<ul style="list-style-type: none"> • social audit • common set of indicators • indicators specific to particular regions

The results suggest that the dialogue participants viewed several areas as particularly important to report on with respect to quality of life in Canada. There was no shortage of suggestions with respect to measures of the health care system, education, the environment, social programs, the economy, government, and work. Several of the specific indicators highlighted various rates to be monitored on a regular basis (e.g., life expectancy, high school completion, GDP less credit card debt, social assistance, and crime). Other measures focus more on investments or commitment of resources in particular areas, such as health coverage (e.g., drugs or dental care), public education funding, access to green spaces, supports for single parents, and investment in small businesses.

The groups identified several interesting measures of work life, community, and families and friends. The general sense was that these various measures should tap into a more general sense of stability and compatibility among these various spheres. Stated another way, the dialogue participants viewed stability as a cornerstone to a healthy family, work, and community life. Their preferences were to monitor such things as job stability and satisfaction, quality time with family and friends, the degree of balance between work and domestic life, volunteer participation rates, and the degree of social cohesion or isolation within communities.

Far fewer suggestions were forthcoming in the spheres on information, infrastructure, cultural pursuits, and multiculturalism. These issues received far less discussion in general once the groups selected the two or three areas that they preferred to explore in greater depth. Thus when the groups shifted their focus to developing potential indicators, these issues were only rarely afforded any discussion time. Hence the indicators selected in part reflect earlier comments where participants raised some of the issues in talking about quality of life issues in Canada, such as the importance of libraries, investing in the infrastructure, funding for arts and music, and settlement of Native land claims and related legal issues.

The most difficult area with which participants struggled concerned how to monitor progress in the area of human rights.

The most difficult area with which participants struggled concerned how to monitor progress in the area of human rights. One Toronto discussant, for example, stated the following: “I’d have trouble quantifying some of these, but it’s the whole question around respect, human rights, etc. I’d like an indicator that tells me (whether) people in our society are feeling respected and how that is being measured.” More generally, some participants were concerned that subjective aspects of quality of life were inherently difficult to measure: “Feelings are so hard to quantify. We talked earlier about the crime rate and the crime rate statistically had gone down, (but) most people will tell you that it has gotten worse. There has to be a more qualitative way to measure this” (Sydney, Nova Scotia). The implication from these comments suggests that purely “objective” or quantitative indicators may not satisfy the general public in terms of the deeper issues or their sensibilities regarding quality of life in Canada. Surveys may be a necessary supplement to tap into the broader issues that matter to Canadians and to compare the subjective perceptions of quality of life over time. At the same time, the following cautionary comments should be considered as well:

In Edmonton:

- Participant A: Everyone has a vested interest in the quality of life. Instead of shying away from people who have biases, we get them to explain what their biases are.
- Participant B: Special interest groups will drive the discussion to get the statistics that interest them. They drive the society.
- Participant C: We measure what we value. The concern is that once measured, you begin to translate it into a certain behaviour. They start out with good intentions and end up institutionalized. I don't know who can define it at the individual level. I have to have tolerance, because some people will choose something that I'm uncomfortable with. We should be very, very cautious about doing these discussions. We tend to want to institutionalize solutions, not qualities and value. Let's not be too quick to categorize people, and get at the numbers.
- Participant D: If, by chance, the government could receive input and compare notes, and have the government accountable, then (that would be good). Unless they support the issues of homelessness, etc, we can't achieve a lot.
- Participant E: A single mother told me that the inner city is the safest place. They care about you. We don't hide behind big houses. If something happens to me, someone will care. In suburbia, they won't.
- Participant F: All surveys can be swayed. Very basic, simple questions must be asked.

III Individual Questionnaire Responses

Nearly all of the public dialogue participants completed questionnaires prior to and following the discussions to assess their individual views of quality of life in Canada. In addition to providing a demographic overview of the participants, the questionnaires helped to establish a baseline in regard to participants' views of quality of life upon entering into the dialogue discussions. While no one expected that the dialogue discussions would produce fundamental shifts in the core beliefs that individuals had about quality of life issues, the questionnaires helped to provide additional contextual information to help evaluate different responses. These results are reported on in the current section.

A. Views on quality of life in Canada

Nearly all of the public dialogue participants completed questionnaires prior to and following the discussions to assess their individual views of quality of life in Canada. Among the full sample, one in four believed that the quality of life in Canada had improved in the last five years, while about 36 percent suggested that things had not really changed (Figure 1). Just under 40 percent felt that the quality of life for Canadians in general had declined in the last five years. These figures are slightly more pessimistic than Ekos' 1998 national poll data, which found that only 34 percent believed that the quality of life in Canada had declined *compared to residents of other countries* (Mendelsohn, 2000). The differences in question wording may help in part to account for the discrepancy.

In contrast, the participants generally expressed more favourable views about recent changes in their own quality of life. While still about one in four suggested that their overall quality of life had improved in the past six months, a much higher percentage (59 percent) agreed that their quality of life had "stayed the same." Only 16 percent reported a decline in the past six months. Those who reported a recent decline in their quality of life were more likely than others in the sample to also report a somewhat lower level of overall health, to be working part-time or unemployed, to be separated or divorced, and to be renting their accommodations.

B. Satisfaction with quality of life issues

Prior to their participation, the dialogue members were asked a series of 18 questions about the degree to which they were satisfied or dissatisfied with their lives and the quality of life in the country. The full results are summarized in Table 5. The participants expressed the highest degree of satisfaction with their family, friends, health, and work or main activity, as five in six reported being at least somewhat satisfied with their lives as a whole. In addition, approximately three-fourths were satisfied in general with their standard of living and the schools in their area.

The highest levels of dissatisfaction (between 40-50 percent) were registered in response to public or government services in Canada, followed by the quality of the environment in Canada, and the current level of stress that they were experiencing in their lives. Furthermore, more than one in three participants were at least somewhat *dissatisfied* with their finances, their free time, and the balance between their jobs or main activities and their family or home life. Finally, some three in ten participants were either somewhat or very dissatisfied with the quality of life in their province or in their community.

Separate analyses revealed that there were no significant differences between men and women on most of the issues examined, with the exception that women expressed higher dissatisfaction with the quality of the environment in Canada. Women generally tallied a few percentage points behind men in most categories in terms of their overall satisfaction, but the differences were not large enough to be of statistical significance.

A more compelling factor, however, was the age of the participant. Those who were 55 years of age and older tended to express significantly higher levels of satisfaction with several of the specific dimensions measured. For example, there seemed to be a direct correlation between age and overall satisfaction with one's job or main activity. Those who were older expressed the highest levels of satisfaction with their lives as a whole, with the level of stress in their lives, and with the quality of life in their communities. In many instances there were curvilinear or U-shaped relationships: the levels of satisfaction tended to be higher among the younger

Participants expressed the highest degree of satisfaction with their family, friends, health, and work, while they were most dissatisfied with public/government services, quality of the environment, their current level of stress and their finances.

participants (under 25 years of age), declined as participants lived through their primary family and career development years, and then increased as participants entered their fifties and retirement years. The pattern held for such issues as satisfaction with the amount of free time at their disposal, the balance in their lives, standards of living, job security, public or government services, and even the quality of life in one's province. In summation, the highest levels of satisfaction across virtually every dimension were registered among those aged 55 and older.

Table 5: Percent of Participants Satisfied with Various Dimensions of Quality of Life, Pre-Dialogue Assessments (n = 336)

OVERALL SATISFACTION WITH...	VERY SATISFIED	SOMEWHAT SATISFIED	SOMEWHAT DISSATISFIED	VERY DISSATISFIED
Your health	35	48	14	3
Your job or main activity	37	45	12	6
Your finances	18	43	26	13
Your free time	21	43	29	7
Your standard of living	30	47	17	6
Your job security	39	32	16	13
Schools in your area	24	50	18	8
Your friends	58	34	6	2
Your family	63	25	9	3
Your housing	51	37	8	4
Quality of the environment in Canada	11	47	34	8
Public or government services in Canada	4	49	38	9
Balance in your life	17	50	25	8
Your current level of stress	12	46	30	12
Your life as a whole	31	52	15	2
Quality of life in Canada as a whole	16	61	22	1
Quality of life in your province	13	54	27	6
Quality of life in your community	21	52	23	4

C. Factors contributing to quality of life

Another set of questions dealt with participants' assessments of what factors they considered to be more or less important in contributing to the overall quality of life in Canada as a whole. The participants ranked 22 factors using 7-point scales, where "1" indicated "not important" to a maximum of "7," which indicated "extremely important." The rankings were done prior to and following the public dialogue discussions, which thus presented an interesting opportunity to compare whether the dialogues had an immediate impact on individual assessments. The full results with mean importance scores (standard deviations appear in parentheses) are presented in Table 6.

Participants consistently rated several core factors well above an average value of six on the 7-point scale both pre- and post-dialogue, including health programs, a clean environment and the education system.

The participants consistently rated several core factors well above an average value of six on the 7-point scale both pre- and post-dialogue, including health programs, a clean environment, and the education system. These dimensions appeared to have broader appeal (and less variation, as measured by the smaller standard deviations) than any other specific issues as universally important factors that contribute to the quality of life in Canada. Several other factors enjoyed widespread recognition as important quality of life issues, including secure employment, low poverty and unemployment rates, low crime rates, and social programs.

A second tier of factors garnered somewhat more muted average levels of support, or between 5.5 and 6.0 on the scales provided. The issues spanned everything from the relative importance of non-profit and voluntary organizations to parks and recreational facilities. In contrast, the public dialogue participants expressed much less enthusiasm for several specific factors, such as lower corporate tax rates, religious organizations, the media, arts and music programs, and private companies. Moreover, even lower personal income tax rates were not deemed quite as important when framed in the context of the overall quality of life in Canada, ranking 17th in importance out of 22 possible contributing factors. The overall rankings of different factors contributing to quality of life did not change appreciably in comparing the pre-dialogue and post-dialogue scores.

Table 6: Importance of Factors Contributing to Quality of Life in Canada (n = 342)

FACTORS CONTRIBUTING TO QUALITY OF LIFE IN CANADA	PRE-DIALOGUE MEAN SCORES (S.D.)	POST-DIALOGUE MEAN SCORES (S.D.)
Clean environment	6.44 (.83)	6.37 (.85)
Health programs	6.41 (.94)	6.42 (.87)
Schools/colleges/universities	6.38 (.92)	6.34 (.87)
Low poverty rates	6.27 (.99)	6.06 (1.10)
Secure employment	6.22 (1.03)	6.19 (1.00)
Low crime rates	6.14 (1.05)	5.94 (1.07)
Low unemployment rate	6.06 (1.05)	5.99 (1.09)
Social programs	6.02 (1.17)	6.01 (1.03)
Economic growth	5.85 (1.22)	5.80 (1.21)
Parks and recreational facilities	5.75 (1.15)	5.58 (1.20)
Housing programs	5.73 (1.26)	5.71 (1.25)
Non-profit and voluntary organizations	5.70 (1.24)	5.67 (1.32)
Childcare or daycare programs	5.67 (1.39)	5.64 (1.26)
Welfare programs	5.65 (1.34)	5.74 (1.19)
Governments	5.62 (1.27)	5.65 (1.25)
Cultural diversity	5.55 (1.35)	5.32 (1.43)
Lower personal income tax rates	5.27 (1.71)	5.10 (1.75)
Arts and music programs	5.18 (1.41)	5.02 (1.50)
Private companies	5.07 (1.25)	4.82 (1.35)
The media	4.79 (1.38)	4.69 (1.50)
Religious organizations	4.42 (1.69)	4.33 (1.68)
Lower corporate tax rates	4.20 (1.93)	4.24 (1.92)

In completing the questionnaires, the participants responded as well to selected open-ended questions, such as the following: “In thinking about quality of life issues, what are the five most important items or factors that you think contribute to a better quality of life in Canada as a whole? And what are the five most important factors that you think contribute to your personal quality of life? (You may list *anything* that you think is important in *any* order.)” Most participants answered these questions both before and after the dialogue discussions. In addition, some 95 percent of the participants further responded to the following question at the conclusion of the sessions: “Imagine that you have a limited, fixed amount of funding or resources to work on quality of life issues. What would be your five biggest priorities? In other words, what are the five areas relating to quality of life in Canada that you think most need to be worked on or improved?” The responses to these open-ended questions, organized by major themes, are summarized in Table 7.

Table 7: Percent of Participants Identifying Highest Priorities for Improvement, Factors Contributing to Quality of Life in Canada, and Factors Contributing to Personal Quality of Life (Pre- and Post-Dialogue)

#	FACTOR	NEED TO IMPROVE	CANADA (AFTER)	CANADA (BEFORE)	PERSONAL (AFTER)	PERSONAL (BEFORE)
1	Health Care	73	71	72	67	61
2	Education	62	43	50	40	32
3	Environment	59	60	58	42	43
4	Social Programs	58	46	51	30	27
5	Economy	35	45	52	12	13
6	Government	26	28	29	13	17
7	Legal/Justice System	20	28	26	25	21
8	General Values	19	36	26	34	25
9	Personal Well-being	10	9	5	38	41
10	Work	9	13	18	38	47
11	Community/Religion	9	12	10	21	17
12	Seniors and Children	8	6	6	5	5
13	Family and Friends	5	8	5	37	38
14	Information/Media	5	3	2	5	5
15	Infrastructure/Transit	5	3	1	3	2
16	Cultural Pursuits	4	4	4	7	12
17	Diversity/Multicultural	3	6	9	4	6
18	Quality of Life Generally	1	1	1	0	1

The five most important factors contributing to the quality of life in Canada, as measured by the percentage of participants who identified the general theme in some fashion or another, were as follows: the health care system, education, the environment, social programs, and the economy. These five items appeared on participant lists with greater regularity than any others. In fact, two-thirds of the participants selected at least three of these five as important factors affecting the quality of life in Canada. In identifying “the five areas relating to quality of life in Canada that you think most need to be worked on or improved,” the results reflected similarly consistent priorities as well. Nearly one in three participants (31 percent) selected *four* of the above five factors as areas that needed improvement. Roughly two-thirds identified at least three of the five factors in varying combinations.

Health care – no other issue received as much attention as a contributing factor to quality of life either for Canada as a whole or in terms of factors affecting one’s personal quality of life – and no other area was ranked as highly in terms of an area in need of improvement.

More than any other specific theme, the participants mentioned health and the health care system as important to their quality of life in response to the open-ended survey questions. Roughly 70 percent identified that theme, with the majority simply citing the health care system in general. Others wrote about more specific aspects of the system, such as the importance of maintaining universality or the quality of the health care system. No other issue received as much attention as a contributing factor to quality of life either for Canada as a whole or in terms of factors affecting one’s personal quality of life – and no other area was ranked as highly in terms of an area in need of improvement.

After health care, the issues of education (62 percent), the environment (59 percent), social programs (58 percent), and the economy (35 percent) rounded out the top five priority areas that the participants thought needed to be worked on or improved. Within these more general categories, the participants identified a variety of sub-themes. For example, while most participants talked about the education system or schools in general, a few highlighted in particular the importance of access, the affordability of higher education, the quality of schools, and lifelong learning. Almost three in five participants described the environment as an area requiring work to improve the quality of life in Canada. Most identified the importance of a “clean” environment, while nearly 10 percent framed the issue more directly in terms of air quality and water pollution. Still others discussed waste disposal and toxic waste management as areas that needed to be improved.

As with education and the environment, a majority (58 percent) of participants cited social programs as a priority to be worked on or improved. The sub-themes, however, were even more varied. For example, more than one in five discussed social programs in general and a comparable proportion discussed housing as an issue requiring attention. Nearly one in ten participants emphasized housing affordability as an important priority, while just over five percent identified reducing the poverty rate as a priority. Similar percentages listed the following as among their five biggest priorities: providing an adequate standard of living for everyone, ensuring that an adequate safety net continues to exist or a guaranteed income, expanding the availability or accessibility of childcare programs, and family support programs.

Finally, although roughly half of the participants listed some aspect of the economy as important to the quality of life in Canada, the figure drops to 35 percent who identified the economy as a priority area to be worked on or improved. Indeed, pre- and post-dialogue results showed a decline from 25 to 19 percent of participants who considered a healthy or growing economy to be among the five most important factors affecting the quality of life. The specific issue that received the most attention as a “priority” was employment, as 21 percent ranked the need for more employment opportunities or a lower unemployment rate in their top five choices. Another eight percent identified the need to have a healthy or growing economy as an area for improvement.

The results presented in Table 7 further highlight the fact that those areas that participants considered to be important contributors to quality of life were not always the same as those that were ranked highest as areas in need of improvement. For example, higher proportions of participants considered the economy, the legal or justice systems, general values, and work as important factors contributing to quality of life in Canada as a whole. Moreover, several issues ranked as among the five most important factors contributing to *personal* quality of life were mentioned far less often in thinking about Canada as a whole or as areas in need of improvement. The top five factors ranked as most important to quality of life at the personal level included health care, the environment, work, personal well-being (including lifestyle issues), and family and friends. The latter factors of work, personal well-being, and family and friends were only infrequently cited as contributing to quality of life in Canada as a whole or as priority areas in need of improvement.

Finally, many participants discussed the importance of a variety of different general values as important to quality of life, especially in the aftermath of the dialogues. The value statements most often mentioned included such issues as responsible parenting, honesty or integrity, a just or equitable society, the need to balance work and family life, unity or nationalism, and equality of opportunity. The one value statement most often suggested, however, was the importance of personal freedoms, which more than ten percent of the participants mentioned. Smaller numbers identified democratic participation or civil activism, as well as human rights protection (and compliance with the UN Charter, for example) as important to the quality of life in Canada. Only the issue of democratic participation or civic engagement received significant numbers of mentions as a priority area to be improved. Conversely, only one participant identified personal freedoms as an area that required significant improvement.

Several categories received relatively few responses, meaning that these were identified by less than ten percent of the participants overall. Seniors and children, not to mention family and friends, were rarely identified as crucial categories to define quality of life in Canada or as areas in need of improvement. By the same token, other broad age groupings or specific family relationships rarely received mention (e.g., parents). Information systems or the media, the infrastructure, transportation

Seniors and children, not to mention family and friends, were rarely identified as crucial categories to define quality of life in Canada or as areas in need of improvement. Likewise, information systems or the media, the infrastructure, transportation systems, cultural pursuits, and diversity or multiculturalism appeared infrequently as factors contributing to quality of life or among the priority areas for improvement.

systems, cultural pursuits, and diversity or multiculturalism appeared only infrequently as factors contributing to quality of life in Canada or among the priority areas for improvement that participants expressed.

In summary, the questionnaires offer a succinct snapshot not only of participants' demographic characteristics, but also a glimpse into how these Canadians view various aspects of quality of life. The questionnaires tapped into participants' general satisfaction with quality of life in Canada and their ideas about the factors contributing to quality of life, and identified areas that they felt should be worked on or improved. In most cases, the evidence revealed that their views about which factors contributed most to quality of life did not change, either in terms of those receiving the highest rankings across participants or the level of support for specific issues. In technical terms, there were no statistically significant differences in average rankings for the factors examined.

The open-ended questions regarding which five factors participants considered to be most important to quality of life in Canada and personal quality of life displayed a high degree of consistency as well, although the dialogue groups also displayed some interesting shifts in priorities following the discussions. Most important, a significantly higher percentage of participants identified political rights or other general values as important factors contributing to quality of life after the discussions as compared with their responses before the discussions. Participants were somewhat less likely to stress the education factor as an important contributor for Canada as a whole, but more likely to cite education as important to their quality of life personally. The pre-dialogue questionnaire results further indicated that participants regarded economy and work as important to quality of life; these factors were cited less often in the post-dialogue questionnaires as one of the five most important factors affecting quality of life in Canada. Finally, health care, the legal or justice system, and community/religion factors were all somewhat more likely to be cited as important to one's personal quality of life following the discussions.

Hence, the deliberative process associated with the dialogue discussions arguably had an impact on what issues tended to resonate more with participants following their participation. The most distinctive pattern was the extent to which participants' values became more openly recognized and acknowledged. Their qualitative feedback, however, provided the strongest indication that the dialogue groups influenced their thinking. While few experienced any fundamental transformation in their thinking, a great many participants wrote that the dialogue experience was positive for a variety of reasons. Indeed, many stated that they had more of an understanding of and respect for different perspectives on the issues.

IV Conclusion

The public dialogues yielded considerable information about what matters to Canadians across the country in terms of quality of life. While the discussions were broad in scope and addressed a variety of different issues, there seemed to be a number of common threads. Most dialogues emphasized access and personal security and control as key overarching or cross-cutting themes that underlie much of their discussions. Canadians understand that while there may be social and economic differences that distinguish some groups from others, these differences should not fundamentally threaten or undermine anyone's ability to share in the many and varied resources available. Furthermore, many individuals across the majority of groups believed that quality of life should include a sense of personal security and control, which encompassed everything from safety to financial well-being.

The thematic analysis further revealed that there was considerable overlap in terms of dominant themes discussed and the extent to which certain areas were judged to be priorities for developing national quality of life indicators. These included, for example, issues such as access to health care and quality education, maintaining a healthy environment with clean air and water, public safety and security, job security, employment opportunities, a living wage, responsible taxation, social programs for income maintenance and to ensure basic needs are met, programs for children and youth, control over time use or balance, and civic participation. The common ground reached in these areas defied any attempts to link the results to specific groups, demographic characteristics, or other factors measured in the current study.

By the same token, clearly some group clusters were more likely to highlight certain areas as prominent themes to be included owing at least in part to the direct impact that these issues have in their lives. As examples, single mothers more often discussed childcare or daycare options, a group comprised in part of physically disabled persons talked about handicap access, those in rural locales emphasized agriculture, and youth groups more often discussed respect for youth than members of other group clusters.

At the individual level, most people expressed at least some satisfaction with a range of different quality of life dimensions, though those who were older tended to have more positive views or expressed higher levels of satisfaction on several issues. Regardless of age or other background characteristics, the majority of participants ranked health care, education, the environment, and social programs as priority areas requiring improvement. As discussed previously, these areas (and sub-themes identified within the broader discussions) were often targeted as key factors that participants believed should be monitored more systematically to help gauge quality of life in Canada on a regular basis. Participants often felt far less competent, however, in their capacity to suggest what the most helpful or relevant indicators might be; they were often comfortable to rely on other expert opinion in this regard.

The dialogue findings were more limited in thinking about who should be responsible for developing and reporting on the quality of life in Canada. The general view was that governments should work cooperatively with independent, non-profit organizations to support the development and ongoing monitoring of quality of life indicators. The participants recognized that funding might be necessary from the government and other sources to help sustain such an ambitious project, but believed further that independent reporting should be encouraged especially since government accountability might be incorporated as one of the dimensions monitored.

The participants, while not always optimistic that the process would yield tangible results, were nevertheless on the whole energized by their participation in the process. The general sense was that many people learned about other views and often came away understanding others who perhaps held different views to be more thoughtful and engaging. Most of those participants who completed open-ended dialogue feedback questions offered positive comments. Most important, there was a general consensus that developing a quality of life indicators prototype was feasible and desirable. These Canadians in general expressed a preference to have a more uniform and comprehensive system for evaluating quality of life in Canada than what currently exists. While most continued to believe in Canada as offering a reasonably high quality of life, the participants voiced as well a number of concerns that should be addressed and monitored on an ongoing basis both to provide feedback, to establish priorities, and to assess changes in quality of life in the years ahead.

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