



Foresight 50+ Omnibus Survey: Seniors Perceptions and Familiarity with Serious Illness and End-of-Life Care

Overview: On behalf of the John A. Hartford Foundation, McCabe Message Partners engaged NORC to deploy a survey exploring seniors' perceptions and familiarity with serious illness and end-of-life care, specifically palliative care, advance care planning, and hospice care.

Methodology: This survey was conducted from October 12-16, 2023, using NORC's Foresight 50+ probability-based panel, which is designed to represent US adults aged 50 or older. The panel included 1,038 interviews, with a margin of error of +/- 4.23 percentage points.

Sample Demographics:

Demographic Measure	All Respondents	Respondents aged 65+
Gender		
Male	486	225
Female	548	274
Educational Attainment		
No High School Diploma	88	41
High School Graduate or Equivalent	319	155
Some College or associate degree	267	125
Bachelor's Degree/Post Graduate Study	361	178
Race/Ethnicity		
White/Non-Hispanic	718	371
Black/Non-Hispanic	108	56
Hispanic	130	45
Other/2+, non-Hispanic	6	2
Household Income in the Past Year		
<\$30k	252	113
\$30k-<\$60k	266	174
\$60k-<\$100k	243	108
\$100k+	273	105

This document provides a summary of the panel's responses to all survey questions, along with a cross-tabulation analysis based on relevant demographic variables, including gender, education level, race and ethnicity, and household income.

The survey defined the terms palliative care, advance care planning, and hospice care as follows:

Palliative care: Palliative care is specialized medical care for people living with a serious illness. This type of care is focused on providing relief from the symptoms and stress of the illness. The goal is to improve quality of life for both the patient and the family. It is appropriate at any age and at any stage in a serious illness, and it can be provided along with curative treatment.



Advance care planning: Advance Care Planning helps adults at any age or stage of health understand and share their personal values, life goals, and preferences regarding future medical care. Advance Care Planning is not a single decision; it is a process that occurs over a lifetime as goals and values change.

Hospice care: Hospice is a program of care and support for terminally ill patients and their families. Hospice care changes the focus to comfort care for pain relief and symptom management instead of care to cure the patient's illness.

NET responses are a cumulative representation of multiple related answer categories, providing a consolidated percentage that illustrates a broader trend or overall sentiment among respondents towards a specific question.

* = significant at 95% confidence level. The figure is statistically significant, and there is only a 5% probability that the result was due to chance.

Engagement in Health Discussions

Among respondents aged 65 and older, 55% said that no healthcare professional had initiated a discussion about what matters to them in their healthcare within the past two years. This figure is slightly lower, at 54%, for all respondents aged 50 and above. This data suggests that there is a prevailing gap in personalized and engaged healthcare experiences for older adults.

Q1: In the past two years has a doctor or nurse or someone else at a health care facility started a discussion about what matters to you in your health care?

All Foresight 50+ respondents:

- 54% of respondents said that no healthcare professional had started a conversation about what matters to them in their healthcare in the last two years.
- 41% of respondents said that a healthcare professional had started a conversation about what matters to them in their healthcare in the last two years.
- 4% of respondents said they had not seen a healthcare provider in the last two years.
- *Black respondents (58%) were more likely than White (39%) and Hispanic (36%) respondents to say that a healthcare professional had started a conversation about what matters to them in their healthcare within the last two years.

Respondents 65+:

- 55% of respondents aged 65 and older said that no healthcare professional had started a conversation about what matters to them in their healthcare in the last two years.
- 40% of respondents aged 65 and older said that a healthcare professional had started a conversation about what matters to them in their healthcare in the last two years.
- 3% of respondents aged 65 and older said they had not seen a healthcare provider in the last two years.
- *White respondents aged 65 and older (61%) were more likely to say that no healthcare professional had started a conversation about what matters to them in their healthcare in the last two years, compared to respondents of other races and ethnicities within this age group (40%).
- *Respondents aged 65 and older with household incomes above \$30k were more likely (61%) than those with household incomes below \$30k (38%) to say that no healthcare professional had started a conversation about what matters to them in their healthcare in the last two years.

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Trust in the Health Care System

Both respondents aged 65 and older and all Foresight 50+ respondents have nuanced perspectives on trust in the healthcare system. A consistent 10% from both groups fully trust the system to provide care that resonates with their personal values and needs. In the group aged 65 and older, 53% maintain a considerable level of trust, while this figure is slightly lower at 49% among all Foresight 50+ respondents. Both data points indicate that a majority of respondents have a favorable inclination toward the system, despite not having complete trust.

Q2: How much do you trust the health care system to provide you with care that takes into account what matters to you?

All Foresight 50+ respondents:

- 82% of respondents said they trust (NET) the health care system to provide them with care that takes into account what matters to them.
 - 10% of respondents aged 65 and older said they completely trust the health care system to provide them with care that takes into account what matters to them.
 - 49% of respondents aged 65 and older said they mostly trust the health care system to provide them with care that takes into account what matters to them.
 - 23% of respondents aged 65 and older said they slightly trust the health care system to provide them with care that takes into account what matters to them.
- 17% of respondents said they distrust (NET) the health care system to provide them with care that takes into account what matters to them.
 - 9% of respondents said they slightly distrust the health care system to provide them with care that takes into account what matters to them.
 - 6% of respondents said they mostly distrust the health care system to provide them with care that takes into account what matters to them.
 - 2% of respondents said they completely distrust the health care system to provide them with care that takes into account what matters to them.

Respondents 65+:

- 82% of respondents aged 65 and older said they trust (NET) the health care system to provide them with care that takes into account what matters to them.
 - 10% of respondents aged 65 and older said they completely trust the health care system to provide them with care that takes into account what matters to them.
 - 53% of respondents aged 65 and older said they mostly trust the health care system to provide them with care that takes into account what matters to them.
 - 19% of respondents aged 65 and older said they slightly trust the health care system to provide them with care that takes into account what matters to them.

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- 16% of respondents aged 65 and older said they distrust (NET) the health care system to provide them with care that takes into account what matters to them.
 - 9% of respondents aged 65 and older said they slightly distrust the health care system to provide them with care that takes into account what matters to them.
 - 6% of respondents aged 65 and older said they mostly distrust the health care system to provide them with care that takes into account what matters to them.
 - 1% of respondents aged 65 and older said they completely distrust the health care system to provide them with care that takes into account what matters to them.
- *Respondents aged 65 and older with household incomes over \$100k (68%) were more likely to say they mostly trust the health care system to provide them with care that takes into account what matters to them, compared to respondents with lower household incomes within this age group (49%).

Importance of Personal Consideration in Healthcare Decisions

The survey illustrates a strong emphasis on personal considerations in healthcare decisions during serious illnesses. 65% of all survey respondents and 69% of those aged 65 and older believe it is very important that their values are a primary consideration in healthcare decisions in case of a severe illness.

Q3: If you had a serious illness, how important would it be that what matters to you is the primary consideration for decisions made about your care?

All Foresight 50+ respondents:

- 99% of respondents stated that in the event of a serious illness, it would be important (NET) to them that what matters to them is the primary consideration for decisions made about their care.
 - 65% of respondents stated that in the event of a serious illness, it would be very important to them that what matters to them is the primary consideration for decisions made about their care.
 - 30% of respondents stated that in the event of a serious illness, it would be important to them that what matters to them is the primary consideration for decisions made about their care.
 - 4% of respondents stated that in the event of a serious illness, it would be *slightly important* to them that what matters to them is the primary consideration for decisions made about their care.
- *Women (71%) were more likely than men (58%) to say that it would be very important to them that what matters to them is the primary consideration for decisions made about their care in the event of a serious illness.

Respondents 65+:

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- 98% of respondents aged 65 and older stated that in the event of a serious illness, it would be important (NET) to them that what matters to them is the primary consideration for decisions made about their care.
 - 69% of respondents aged 65 and older stated that in the event of a serious illness, it would be very important to them that what matters to them is the primary consideration for decisions made about their care.
 - 26% of respondents aged 65 and older stated that in the event of a serious illness, it would be important to them that what matters to them is the primary consideration for decisions made about their care.
 - 4% of respondents aged 65 and older stated that in the event of a serious illness, it would be slightly important to them that what matters to them is the primary consideration for decisions made about their care.

*White respondents aged 65 and older (73%) were more likely than respondents of other races and ethnicities (56%) to say that it would be very important to them that what matters to them is the primary consideration for decisions made about their care in the event of a serious illness.

Representation in Health Decisions

In scenarios where respondents might be incapacitated, 73% of those aged 65 and older, and 70% of all Foresight 50+ respondents felt it was very important that the decision-makers fully understand their health care values and wishes. Furthermore, 51% of respondents aged 65 and older and 47% of all Foresight 50+ respondents were confident that those representing them would be well-informed about their health care preferences.

Q4: Thinking about having a serious illness and not being able to make decisions for yourself, how important is it that the people making decisions for you understand what matters to you.

All Foresight 50+ respondents:

- 98% of respondents expressed that, when contemplating the prospect of a serious illness where they might be unable to make decisions for themselves, it is important (NET) that those making decisions on their behalf understand what matters to them.
 - 70% of respondents expressed that, when contemplating the prospect of a serious illness where they might be unable to make decisions for themselves, it is very important that those making decisions on their behalf understand what matters to them.
 - 25% of respondents expressed that, when contemplating the prospect of a serious illness where they might be unable to make decisions for themselves, it is important that those making decisions on their behalf understand what matters to them.
 - 3% of respondents expressed that, when contemplating the prospect of a serious illness where they might be unable to make decisions for themselves, it is slightly important that those making decisions on their behalf understand what matters to them.

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 *Women (75%) were more likely than men (65%) to say that, when contemplating the prospect of a serious illness where they might be unable to make decisions for themselves, it is very important that those making decisions on their behalf understand what matters to them.

Respondents 65+:

- 97% of participants aged 65 and older expressed that, when contemplating the prospect of a serious illness where they might be unable to make decisions for themselves, it is important (NET) that those making decisions on their behalf understand what matters to them.
 - 73% of participants aged 65 and older expressed that, when contemplating the prospect of a serious illness where they might be unable to make decisions for themselves, it is very important that those making decisions on their behalf understand what matters to them.
 - 22% of participants aged 65 and older expressed that, when contemplating the prospect of a serious illness where they might be unable to make decisions for themselves, it is important that those making decisions on their behalf understand what matters to them.
 - 3% of participants aged 65 and older expressed that, when contemplating the prospect of a serious illness where they might be unable to make decisions for themselves, it is slightly important that those making decisions on their behalf understand what matters to them.
- *Respondents aged 65 and older whose highest level of education attained is at least a bachelor's degree (79%) were more likely to say that when contemplating the prospect of a serious illness where they might be unable to make decisions for themselves, it is very important that those making decisions on their behalf understand what matters to them, compared to respondents with lower levels of education within this age group (69%).
- *White respondents aged 65 and older (77%) were more likely to say that when contemplating the prospect of a serious illness where they might be unable to make decisions for themselves, it is very important that those making decisions on their behalf understand what matters to them, compared to Hispanic respondents within this age group (57%).

Q5: If you unexpectedly become too sick to make your own health care decisions, how well do you believe the individuals who would be speaking on your behalf know what matters to you.

Overall (all Foresight 50+ respondents):

• 90% of respondents believe that if they suddenly became too ill to make health care decisions for themselves, the individuals who would be speaking on their behalf would know (NET) what matters to them in their health care.

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- 47% of participants aged 65 and older believe that if they suddenly became too ill to make health care decisions for themselves, the individuals who would be speaking on their behalf would completely know what matters to them in their health care.
- 43% of participants aged 65 and older believe that if they suddenly became too ill to make health care decisions for themselves, the individuals who would be.
- 9% of participants believe that if they suddenly became too ill to make health care decisions for themselves, the individuals who would be speaking on their behalf would not know (NET) what matters to them in their health care.
 - 8% of participants believe that if they suddenly became too ill to make health care decisions for themselves, the individuals who would be speaking on their behalf would not really know what matters to them in their health care.
 - 1% of participants believe that if they suddenly became too ill to make health care decisions for themselves, the individuals who would be speaking on their behalf would not know at all what matters to them in their health care.

Respondents 65+:

- 93% of participants aged 65 and older believe that if they suddenly became too ill to make health care decisions for themselves, the individuals who would be speaking on their behalf would know (NET) what matters to them in their health care.
 - 51% of participants aged 65 and older believe that if they suddenly became too ill to make health care decisions for themselves, the individuals who would be speaking on their behalf would completely know what matters to them in their health care.
 - 41% of participants aged 65 and older believe that if they suddenly became too ill to make health care decisions for themselves, the individuals who would be speaking on their behalf would mostly know what matters to them in their health care.
- 6% of participants aged 65 and older believe that if they suddenly became too ill to make health care decisions for themselves, the individuals who would be speaking on their behalf would not know (NET) what matters to them in their health care.
 - 4% of participants aged 65 and older believe that if they suddenly became too ill to make health care decisions for themselves, the individuals who would be speaking on their behalf would not really know what matters to them in their health care.
 - 1% of participants aged 65 and older believe that if they suddenly became too ill to make health care decisions for themselves, the individuals who would be speaking on their behalf would not know at all what matters to them in their health care.
- *White respondents aged 65 and older (55%) were more likely than respondents of other races and ethnicities within this age group (41%) to say that if they suddenly became too

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ill to make health care decisions for themselves, the individuals who would be speaking on their behalf would completely know what matters to them in their health care.

Importance of Specialized Care

Specialized care, which includes relief from symptoms and pain, holds significant importance among the respondents. 70% of all Foresight 50+ participants and 75% of those aged 65 and over, view the availability of such specialized care as very important in the case of a serious illness diagnosis.

Q6: If you were diagnosed with a serious illness, how important do you think it would be for your health care team to offer specialized health care that could improve your quality of life such as relief from pain and other symptoms?

All Foresight 50+ respondents:

- 99% of participants stated that if they were to be diagnosed with a serious illness, it would be important (NET) for their health care team to offer specialized care aimed at enhancing their quality of life, including alleviation of pain and other symptoms.
 - 70% of participants stated that if they were to be diagnosed with a serious illness, it would be very important for their health care team to offer specialized care aimed at enhancing their quality of life, including alleviation of pain and other symptoms.
 - 26% of participants stated that if they were to be diagnosed with a serious illness, it would be *important* for their health care team to offer specialized care aimed at enhancing their quality of life, including alleviation of pain and other symptoms.
 - 3% of participants stated that if they were to be diagnosed with a serious illness, it would be *slightly important* for their health care team to offer specialized care aimed at enhancing their quality of life, including alleviation of pain and other symptoms.
- *Women (76%) were more likely than men (62%) to say that specialized care aimed at enhancing their quality of life, including alleviation of pain and other symptoms, would be very important to them if they were diagnosed with a serious illness.

Respondents 65+:

- 99% of participants aged 65 and over, stated that if they were to be diagnosed with a serious illness, it would be important (NET) for their health care team to offer specialized care aimed at enhancing their quality of life, including alleviation of pain and other symptoms.
 - 75% of participants aged 65 and over, stated that if they were to be diagnosed with a serious illness, it would be very important for their health care team to offer specialized care aimed at enhancing their quality of life, including alleviation of pain and other symptoms.

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- 22% of participants aged 65 and over, stated that if they were to be diagnosed with a serious illness, it would be important for their health care team to offer specialized care aimed at enhancing their quality of life, including alleviation of pain and other symptoms.
- 2% of participants aged 65 and over, stated that if they were to be diagnosed with a serious illness, it would be slightly important for their health care team to offer specialized care aimed at enhancing their quality of life, including alleviation of pain and other symptoms.
- *Respondents aged 65 and over (75%) were more likely to say that if they were to be diagnosed with a serious illness, it would be very important for their health care team to offer specialized care aimed at enhancing their quality of life, including alleviation of pain and other symptoms, compared to all other respondents (65%)

Confidence in Accessing Specialized Care

Only 34% of Foresight 50+ respondents express complete confidence in their ability to access specialized care aimed at improving their quality of life during a serious illness. This confidence rises slightly to 37% among respondents aged 65 and above.

Q7: If you had a serious illness, how confident are you that you would know how to get specialized care that could improve your quality of life such as relief from pain and other symptoms?

All Foresight 50+ respondents:

- 95% of participants indicated that if they were diagnosed with a serious illness, they would be confident (NET) in their ability to seek specialized care aimed at enhancing their quality of life, including managing pain and other symptoms.
 - 34% of participants indicated that if they were diagnosed with a serious illness, they would be completely confident in their ability to seek specialized care aimed at enhancing their quality of life, including managing pain and other symptoms.
 - 48% of participants indicated that if they were diagnosed with a serious illness, they would be fairly confident in their ability to seek specialized care aimed at enhancing their quality of life, including managing pain and other symptoms.
 - 13% of participants indicated that if they were diagnosed with a serious illness, they would be slightly confident in their ability to seek specialized care aimed at enhancing their quality of life, including managing pain and other symptoms.

Respondents 65+:

• 96% of participants aged 65 and above indicated that if they were diagnosed with a serious illness, they would be confident (NET) in their ability to seek specialized care aimed at enhancing their quality of life, including managing pain and other symptoms.

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- 37% of participants aged 65 and above indicated that if they were diagnosed with a serious illness, they would be completely confident in their ability to seek specialized care aimed at enhancing their quality of life, including managing pain and other symptoms.
- 50% of participants aged 65 and above indicated that if they were diagnosed with a serious illness, they would be fairly confident in their ability to seek specialized care aimed at enhancing their quality of life, including managing pain and other symptoms.
- 8% of participants aged 65 and above indicated that if they were diagnosed with a serious illness, they would be slightly confident in their ability to seek specialized care aimed at enhancing their quality of life, including managing pain and other symptoms.
- *More than half of respondents aged 65 and older with a high school diploma or equivalent as their highest education level (52%) expressed complete confidence in seeking specialized care for a serious illness to improve their quality of life and manage symptoms, compared to only 36% of respondents with a bachelor's degree in this age group.

Q8: Has someone important to you been diagnosed with a serious illness? If so, Q9: Have they been offered specialized health care meant to improve their quality of life?

All Foresight 50+ respondents:

• 52% of participants mentioned that someone significant to them has been diagnosed with a serious illness. Of these individuals, 76% noted that the diagnosed person was offered specialized healthcare aimed at enhancing their quality of life.

Respondents 65+:

• 51% of participants aged 65 and older mentioned that someone significant to them has been diagnosed with a serious illness. Of these individuals, 82% noted that the diagnosed person was offered specialized healthcare aimed at enhancing their quality of life.

Familiarity with Terms

Hospice care is the most familiar term among all Foresight 50+ respondents and those aged 65 and above, with 83% and 85% of each group indicating moderate to high familiarity, respectively. Palliative care, on the other hand, is the least familiar term, with 43% and 46% of the broader 50+ category and those 65 and above expressing a moderate to high level of familiarity, respectively.

Q10: How familiar are you with the following terms?

Palliative Care

All Foresight 50+ respondents:

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- 43% of participants indicated that they were extremely to moderately familiar with the term "palliative care."
 - 21% of participants indicated that they were extremely familiar with the term "palliative care."
 - 21% of participants indicated that they were moderately familiar with the term "palliative care."
- 56% of participants indicated that they were slightly or not at all familiar with the term "palliative care."
 - 17% of participants indicated that they were slightly familiar with the term "palliative care."
 - 38% of participants indicated that they were not at all familiar with the term "palliative care."
- *Women (29%) were twice as likely as men (13%) to say they were extremely familiar with the term "palliative care."
- *Respondents with a high school diploma or equivalent as their highest \ education level (49%) were more likely to say that they were not at all familiar with the term "palliative care", compared to respondents with higher levels of education (31%).
- *Black respondents (51%) were more likely than white respondents (35%) to say they were not at all familiar with the term "palliative care."

Respondents 65+:

- 46% of participants aged 65 and above indicated that they were extremely to moderately familiar with the term "palliative care."
 - 23% of participants aged 65 and above indicated that they were extremely familiar with the term "palliative care."
 - 23% of participants aged 65 and above indicated that they were moderately familiar with the term "palliative care."
- 52% of participants aged 65 and above indicated that they were slightly or not at all familiar with the term "palliative care."
 - 16% of participants aged 65 and above indicated that they were slightly familiar with the term "palliative care."
 - 35% of participants aged 65 and above indicated that they were not at all familiar with the term "palliative care."
- *Women aged 65 and older (30%) were twice as likely as men (15%) in the same age group to say they were extremely familiar with the term "palliative care."

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- *Nearly half of men aged 65 and older (44%) said they were not at all familiar with the term "palliative care," compared to less than one-third of women in the same age group (28%).
- *Respondents aged 65 and older whose highest level of education attained is at least a bachelor's degree (35%) were more likely to say that were extremely familiar with the term "palliative care" compared to respondents with lower levels of education within this age group (16%)
- *White respondents aged 65 and older (26%) were more likely to be extremely familiar with the term "palliative care" than respondents of other races and ethnicities within this age group (14%).

Advance Care Planning

All Foresight 50+ respondents:

- 58% of participants indicated that they were extremely to moderately familiar with the term "advance care planning."
 - 26% of participants indicated that they were extremely familiar with the term "advance care planning."
 - 32% of participants indicated that they were moderately familiar with the term "advance care planning."
- 40% of participants indicated that they were slightly or not at all familiar with the term "advance care planning."
 - 22% of participants indicated that they were slightly familiar with the term "advance care planning."
 - 18% of participants indicated that they were not at all familiar with the term "advance care planning."
- *Women (31%) were more likely than men (20%) to say that they were extremely familiar with the term "advance care planning."
- *White respondents (29%) were more than twice as likely as Black respondents (10%) to say they were extremely familiar with the term "advance care planning."

Respondents 65+:

- 61% of participants aged 65 and above indicated that they were extremely to moderately familiar with the term "advance care planning."
 - 29% of participants aged 65 and above indicated that they were extremely familiar with the term "advance care planning."
 - 33% of participants aged 65 and above indicated that they were moderately familiar with the term "advance care planning."

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- 37% of participants aged 65 and above indicated that they were slightly or not at all familiar with the term "advance care planning."
 - 21% of participants aged 65 and above indicated that they were slightly familiar with the term "advance care planning."
 - 16% of participants aged 65 and above indicated that they were not at all familiar with the term "advance care planning."
- *Women aged 65 and older (35%) were nearly twice as likely as men in the same age group (21%) to say they were extremely familiar with the term "advance care planning."
- *Respondents aged 65 and older whose highest level of education attained is at least a bachelor's degree (42%) were more likely to say that were extremely familiar with the term "advance care planning" compared to respondents with lower levels of education within this age group (22%).

Hospice Care

All Foresight 50+ respondents:

- 83% of participants indicated that they were extremely to moderately familiar with the term "hospice care."
 - 46% of participants indicated that they were extremely familiar with the term "hospice care."
 - 37% of participants indicated that they were moderately familiar with the term "hospice care."
- 15% of participants indicated that they were slightly or not at all familiar with the term "hospice care."
 - 10% of participants indicated that they were slightly familiar with the term "hospice care."
 - 5% of participants indicated that they were not at all familiar with the term "hospice care."
- *Women (52%) were more likely than men (38%) to say they were extremely familiar with the term "hospice care."

Respondents 65+:

- 85% of participants aged 65 and above indicated that they were extremely to moderately familiar with the term "hospice care."
 - 45% of participants aged 65 and above indicated that they were extremely familiar with the term "hospice care."
 - 40% of participants aged 65 and above indicated that they were moderately familiar with the term "hospice care."

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- 14% of participants aged 65 and above indicated that they were slightly or not at all familiar with the term "hospice care."
 - 10% of participants aged 65 and above indicated that they were slightly familiar with the term "hospice care."
 - 3% of participants aged 65 and above indicated that they were not at all familiar with the term "hospice care."

Future Access to Services

Looking ahead, respondents convey a strong desire for access to different healthcare services. The majority of Foresight 50+ respondents (62%) consider access to hospice care to be very important, and this sentiment is slightly stronger among those aged 65 and older (67%). Similarly, 55% of all respondents and 58% of those aged 65 and older said that access to palliative care is also very important.

Q11: Thinking of the future how important is it for you to have access to the following?

Palliative Care

All Foresight 50+ respondents:

- 96% of individuals expressed that having access to palliative care in the future is important (NET) to them.
 - 55% of individuals expressed that having access to palliative care in the future is very important to them.
 - 33% of individuals expressed that having access to palliative care in the future is important to them.
 - 9% of individuals expressed that having access to palliative care in the future is slightly important to them.
- 1% of individuals expressed that having access to palliative care in the future is not important to them.
- *Women (66%) are significantly more likely than men (42%) to say that having access to palliative care in the future is very important to them.
- *White respondents (58%) were more likely than respondents of other races and ethnicities (47%) to say that having access to palliative care in the future is very important to them.

Respondents 65+:

• 96% of individuals aged 65 and over expressed that having access to palliative care in the future is important (NET) to them.

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- 58% of individuals aged 65 and over expressed that having access to palliative care in the future is very important to them.
- 31% of individuals aged 65 and over expressed that having access to palliative care in the future is important to them.
- 7% of individuals aged 65 and over expressed that having access to palliative care in the future is slightly important to them.
- 2% of individuals aged 65 and over expressed that having access to palliative care in the future is not important to them.
- *Women aged 65 and older (66%) are significantly more likely than men in the same age group (49%) to say that having access to palliative care in the future is very important to them.
- *Respondents aged 65 and older with at least some college education (68%) were more likely than those with lower levels of education within that age group (43%) to say that having access to palliative care in the future is very important to them.
- *Nearly three-quarters (73%) of respondents aged 65 and over with household incomes above \$60k said that having access to palliative care in the future is very important to them, compared to less than half (47%) of respondents with lower incomes in the same age group.

Advance Care Planning

All Foresight 50+ respondents:

- 97% of individuals expressed that having access to advance care planning in the future is important (NET) to them.
 - 50% of individuals expressed that having access to advance care planning in the future is very important to them.
 - 39% of individuals expressed that having access to advance care planning in the future is important to them.
 - 7% of individuals expressed that having access to advance care planning in the future is slightly important to them.
- 1% of individuals expressed that having access to advance care planning in the future is not important to them.
- *Women (61%) were significantly more likely than men (37%) to say that having access to advance care planning in the future is very important to them.

Hospice Care

All Foresight 50+ respondents:

NET responses are a cumulative representation of multiple related answer categories, providing a consolidated percentage that illustrates a broader trend or overall sentiment among respondents towards a specific question.

* = significant at 95% confidence level. The figure is statistically significant, and there is only a 5% probability that the result was due to chance.



- 96% of individuals expressed that having access to hospice care in the future is important (NET) to them.
 - 62% of individuals expressed that having access to hospice care in the future is very important to them.
 - 29% of individuals expressed that having access to hospice care in the future is important to them.
 - 5% of individuals expressed that having access to hospice care in the future is slightly important to them.
- 2% of individuals expressed that having access to hospice care in the future is not important to them.
- *Women (72%) were significantly more likely than men (51%) to say that having access to hospice care in the future is very important to them.

Respondents 65+:

- 96% of individuals aged 65 and over expressed that having access to hospice care in the future is important (NET) to them.
 - 67% of individuals aged 65 and over expressed that having access to hospice care in the future is very important to them.
 - 24% of individuals aged 65 and over expressed that having access to hospice care in the future is important to them.
 - 5% of individuals aged 65 and over expressed that having access to hospice care in the future is slightly important to them.
- 1% of individuals aged 65 and over expressed that having access to hospice care in the future is not important to them.
- * Women aged 65 and older (74%) are significantly more likely than men in the same age group (59%) to say that having access to hospice care in the future is very important to them.

*White respondents aged 65 and older (72%) were more likely than respondents of other races and ethnicities in the same age group (54%) to say that having access to hospice care in the future is very important to them.

NET responses are a cumulative representation of multiple related answer categories, providing a consolidated percentage that illustrates a broader trend or overall sentiment among respondents towards a specific question.

^{* =} significant at 95% confidence level. The figure is statistically significant, and there is only a 5% probability that the result was due to chance.

Percentages may not add up to 100 due to rounding or skipped questions.