



State of Health Care

2026 Report

Alberta Medical Association

Table of Contents

Who We Are	3
Executive Summary	4
Key Findings	5
Methodology	6
Health Care System Usage	7
Satisfaction	9
Primary Care	10
Walk-in Clinics	14
Emergency Care	17
Urgent Care	20
Specialty Care	23
Questions	31

Who We Are

The AMA and Informed Reform

The Alberta Medical Association (AMA) is the unified voice of physicians in Alberta, representing over 15,000 doctors, residents and medical students across the province. We are dedicated to advocating for quality health care, supporting physicians in their roles as care providers and system leaders and promoting the well-being of all Albertans.

For generations, Alberta's physicians have been the trusted stewards of medical care. Their expertise, education and decision-making skills are essential for delivering the quality care that patients rely on.

This report is part of our commitment to informed reform of the health care system and our interest in evidence-based policy and decision making.

Founded on the principles of collaboration, advocacy and service, the AMA works to ensure that physicians can deliver the best possible care to their patients. The association engages with government, health agencies and the public to address the evolving challenges in Alberta's health care system—advocating for effective policy, sustainable funding and the preservation of the doctor-patient relationship.

Through research, education and policy leadership, the AMA strives to strengthen the health care system, safeguard clinical autonomy and support innovation in the delivery of patient care. In times of uncertainty and change, the AMA's commitment remains clear: to put patients first and work alongside all partners to build a stronger, more resilient health care system for Alberta.



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Executive Summary

In 2026, Albertans still speak positively about the care they receive and the people who provide it. However, they are increasingly viewing their personal care experiences separately from their confidence in the overall health system — and that gap has grown over the past year. Wait times are the defining challenge of Alberta’s health care system in 2026. Whether Albertans are trying to book an appointment with a family doctor, access a specialist, or seek emergency care, delays shape their experience at every turn. This is not a new problem, but the data shows it is getting worse. Concern about specialist wait times in particular has grown steadily and shows no sign of plateauing.

There are genuine strengths worth acknowledging. Albertans continue to speak highly of their care providers. Family doctors, specialists and front-line health care workers are consistently rated as dedicated, skilled and compassionate. When Albertans receive care, they are largely satisfied with it. That trust in providers is a meaningful foundation, and it matters.

Trust in providers is not the same as confidence in the system. Albertans are increasingly drawing a distinction between the quality of care they receive and the system’s ability to deliver that care in a timely, accessible and coordinated way. The data shows that confidence in the health system is going down, which is something we need to watch closely as the system continues to face pressure. A majority of Albertans perceive the system as having declined over the past five years, a sentiment that is reflected across several of the service areas examined in this report.

Mental health and pediatric mental health stand out as areas of particular concern. Families seeking support for children face long waits, high out-of-pocket costs, and a fragmented system that is difficult to navigate. For many families, the path to support remains long, costly and difficult to navigate.

The picture this report paints is not one of a broken system, but of a system facing significant and growing pressure. The people who work within it are doing their best under difficult circumstances. The question that emerges from this data is whether the system is being resourced and structured to meet the demands being placed on it, and what it will take to close that gap.

“Alberta has some of the best doctors and nurses in the world. That is not the question. The question is whether every Albertan can actually reach them when it matters.”

— **Alberta patient**

Key Findings

- 1 High Usage:** 90% of Albertans used the health care system in the past year, with family physicians, medical labs and diagnostics being the most common uses. This figure is consistent with last year's findings, reflecting the essential and widespread role the health care system plays in the daily lives of Albertans.
- 2 Satisfaction Declining:** 70% of Albertans are satisfied with their most recent health care experience, a decline of five percentage points from 75% in 2025. Satisfaction remains highest among those with a family doctor and correlates directly with timely access to care.
- 3 Primary Care Access:** 16% of adult Albertans do not have a family doctor. 7% are actively seeking one and 4% use walk-in clinics as their primary care option, reflecting an ongoing gap in primary care access.
- 4 Timeliness and Waits:** Only 53% of those with a family doctor can usually get an appointment when needed. Waiting room times in walk-in clinics and emergency departments continue to be frequently rated as poor, remaining one of the most consistent and pressing concerns year-over-year.
- 5 Quality of Care:** Family doctors continue to receive strong ratings, with 81% of Albertans describing their last visit as very good or excellent. Walk-in clinics and urgent care centres also receive positive care quality ratings despite ongoing concerns about wait times and access.
- 6 Emergency and Urgent Care Pressures:** 30% of Albertans visited an emergency department in the past year, up nominally from 27% in 2025. Waiting room times remain the dominant complaint, with the most emergency department users rating wait times as poor.
- 7 Specialist Waits:** 47% of Albertans saw a specialist in the past year, up slightly from 44% in 2025. Wait times for specialist appointments continue to be rated poorly by a significant majority of patients.
- 8 Mental Health and Addictions:** Mental health and addiction services continue to be the lowest-rated areas of the health care system. Access, wait times and affordability are the most commonly cited barriers, with the majority of Albertans rating these services as inadequate for meeting current demand.
- 9 Pediatric Mental Health:** 40% of parents with children at home report their child has a mental health or developmental condition. Of those, only 42% say their child is currently receiving the support they need, pointing to a significant and growing unmet need among Alberta's younger patients.



Methodology

This report is based on research conducted by ThinkHQ Public Affairs and insights from the AMA's PatientsFirst.ca community.

ThinkHQ Public Affairs used an online survey of adult Albertans. The survey was fielded from May 12 to May 19, 2026, with a sample size of 1,100. A random stratified sample of panelists was invited to complete the survey from panel partners. The data were weighted to reflect the gender, age and regional composition of Alberta's population according to Statistics Canada. The margin of error for a comparable probability-based random sample of this size is +/- 2.9 percentage points, 19 times out of 20. It is important to note that the accuracy of results may decrease for sub-samples within the data due to smaller sample sizes.

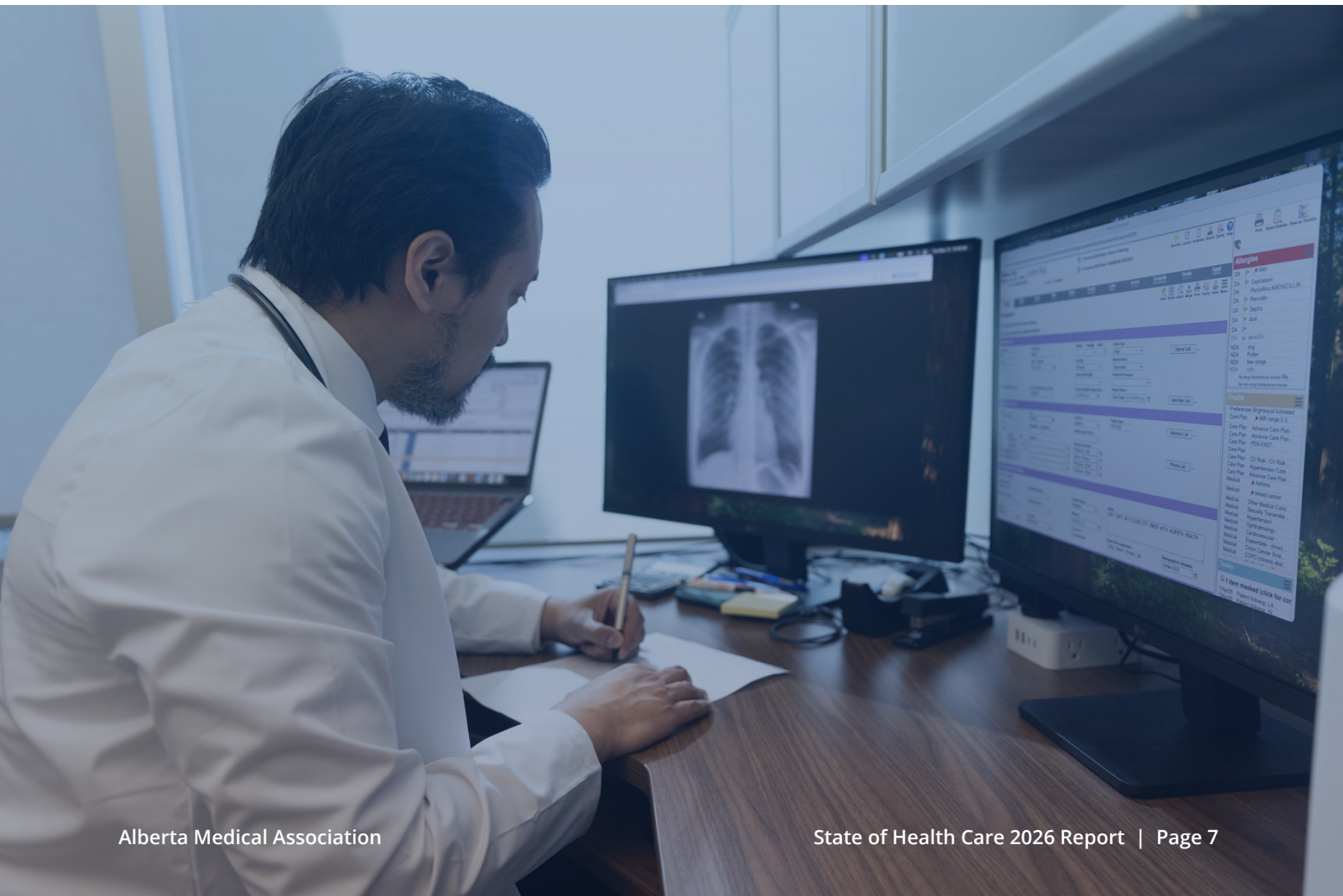
Quotations were received from the AMA's PatientsFirst.ca community.

PatientsFirst.ca is a community of Albertans interested in the future of health care in the province. Its purpose is to gather and amplify patient voices, share experiences and collect feedback that informs the AMA's advocacy about the health care system. This is a self-selecting sample of people who chose to participate. We do not claim that insights drawn from the PatientsFirst.ca community are statistically generalizable to the entire population, but they are important to understand since they are drawn from Albertans who have directly engaged with the health care system. Our intent is to compile experiences from a wide variety of Albertans in order to shine a light on the challenges we all face.

Health Care System Usage

Albertans continued to engage with the health care system at high rates in 2026, with 90% of adults accessing some form of health care service in the past year. Usage was highest among women (95%) compared to men (85%), a gap that likely reflects well-documented differences in health-seeking behaviour as well as the role many women play as primary caregivers for children and aging family members. Older Albertans also reported higher rates of access, with those aged 55 and older accessing care at a rate of 93%, compared to 89% among those aged 35 to 54 and 87% among those aged 18 to 34. This pattern is consistent with the greater prevalence of chronic conditions and ongoing health management needs among older populations.

Across all regions, age groups and backgrounds, the data reflects a population that is not only actively relying on the system, but one whose demands on it are likely to grow as Alberta's population ages.



The most commonly used services are:

Family Doctors

82%

82% of Albertans visited a family doctor in the past year, a slight decrease from 85% in 2025 (-3%). This remains the most frequently accessed point of care.

Medical Laboratories

76%

76% accessed lab services, up from 74% in 2025 (+2%), reflecting the continued importance of diagnostics in ongoing care and monitoring.

Diagnostic Clinics

57%

57% used diagnostic imaging or similar services, up from 55% in 2025 (+2%).

Specialists

47%

47% saw a non-family medicine specialist physician, up from 44% in 2025 (+3%), highlighting the growing demand for specialized medical expertise.

Emergency Departments

30%

30% of Albertans visited an emergency room in a hospital, up from 27% in 2025 (+3%), indicating continued and growing reliance on acute care services for urgent health concerns.

Walk-in Clinics

28%

28% of Albertans used a walk-in clinic, down slightly from 30% in 2025 (-2%), remaining an important resource for those experiencing barriers to timely primary care.

Hospital Services

18%

18% had an out-patient hospital procedure, up from 15% in 2025 (+3%) and 10% had an overnight hospital stay, consistent with 2025 findings.

Urgent Care Centres

12%

12% sought care at urgent care facilities, up from 11% in 2025 (+1%), which continue to bridge the gap between primary and emergency care.

Nurse Practitioners

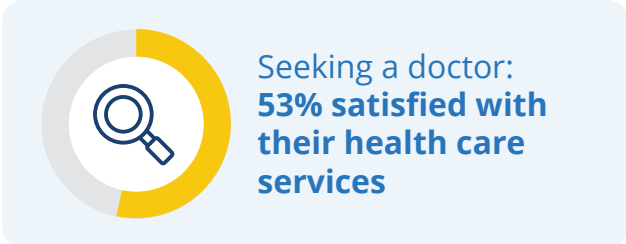
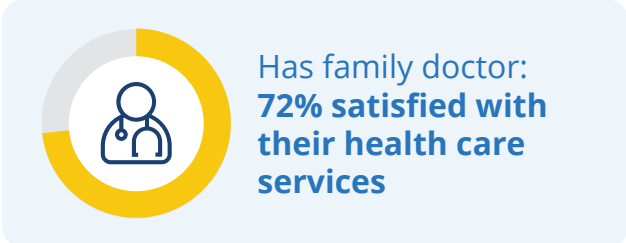
9%

9% received primary care services from a nurse practitioner, up from 8% in 2025 (+1%).

Satisfaction

Satisfaction with delivery of care in Alberta’s health care system, while still positive overall, is showing signs of strain. In 2026, 70% of Albertans reported being satisfied with the quality of service received during their most recent health care experience, down from 75% in 2025 (-5%). This includes 25% who were “very satisfied” and 45% who were “somewhat satisfied.” The decline, while modest, is consistent with broader trends in how Albertans are experiencing and perceiving the system.

Satisfaction has tracked relatively closely across survey waves, recorded at 75% in June 2025, 73% in July 2024 and 77% in December 2023. The 2026 figure is the lowest recorded across all waves, and that trajectory is worth watching closely.



Impact of Having a Family Doctor

Access to a regular family doctor remains one of the strongest predictors of satisfaction with the health care system. Albertans with a regular family physician report satisfaction at 72%, down from 77% in 2025 (-5%). For those still searching for a family doctor, that figure drops sharply to 53%, down from 62% in 2025 (-9%). The gap between these two groups has widened compared to last year, and it tells a story about what continuity of care means in practice.

Effect of Timely Access

Beyond simply having a family doctor, being able to see one when needed makes a significant difference. Albertans who report good access to their physician report satisfaction at 81%, compared to just 42% among those who describe their access as poor. As wait times and availability continue to be the dominant concerns across the system, this gap is likely to grow.

Demographic Differences

Satisfaction tends to rise with age. Albertans aged 55 and older report the highest satisfaction at 78%, while those aged 18 to 34 report 66% and those aged 35 to 54 report 65%, both down from 70% and 71% respectively in 2025 (-4% and -6%). Younger Albertans, who are more likely to be without a regular family doctor and face greater barriers to timely access, are feeling the effects of system pressures most acutely.

While the majority of Albertans continue to report positive experiences, the data points clearly in one direction. Satisfaction is strongly linked to access, and as access becomes more difficult to secure, satisfaction declines.

Primary Care

Progress in primary care access is slow, but it is moving in the right direction.

In 2026, 16% of adult Albertans do not currently have a regular family doctor, a modest improvement from 18% in 2025 (-2%). Of those without a doctor, 7% are actively searching for a family physician but have not been able to secure one, down from 10% in 2025 (-3%), while 4% continue to rely on walk-in clinics as their primary source of care, consistent with last year. These are small but meaningful gains. However, the picture is not uniformly positive. Among those looking for a family doctor, 29% report that there are no doctors in their area accepting new patients, up from 23% in 2025 (+6%), suggesting that geographic availability of family physicians remains a challenge, and one that appears to have grown over the past year.

The introduction of the Primary Care Physician Compensation Model (PCPCM) in 2024 was a significant step toward addressing the structural conditions that have made it difficult to attract and retain family physicians in Alberta. By blending traditional fee-for-service billing with payments based on time, patient complexity and after-hours care, the PCPCM is designed to make family medicine more financially sustainable and to give physicians the flexibility to spend more time with their patients. With over 1,200 family physicians already enrolled or in the process of enrolling as of June 2026, the model is beginning to take hold. The improvement in the number of Albertans without a family doctor, while still early, may reflect the initial impact of these efforts. The full effect of the model is expected to develop further as enrolment grows and the changes take hold across the province.

7%

actively seeking
a family doctor
without success

4%

use walk-in clinics
for primary care

29%

of those looking for a
family doctor say there
are no doctors taking
patients where they live



PRIMARY CARE

Timeliness of Appointments



Having a family doctor and being able to see one when needed are two different things, and the gap between them remains a defining frustration for Albertans. 53% of those with a family doctor can usually get an appointment when they need it, consistent with 54% in 2025 (-1%), indicating that while the situation has not worsened meaningfully, barriers to prompt care persist for a substantial portion of the population. 30% describe their access as only “fairly good,” and 16% rate their access as “poor” or “very poor,” a modest improvement from 17% in 2025 (-1%). The data also tells a generational story: Albertans aged 55 and older report the best access (59%), while those aged 35 to 54 report the greatest difficulty (47%), particularly those with children at home (46%), who face the compounding pressures of managing their own health alongside that of their families.

53%

say they can usually
get an appointment
when they need it

30%

describe their
access as only
“fairly good”

16%

rate their access
as “poor” or
“very poor”

Quality of Care from Family Doctors



When Albertans do get in to see their family doctor, they are overwhelmingly positive about the experience. 81% rated the quality of their last visit as “very good” or “excellent,” consistent with 83% in 2025 (-2%), reflecting the enduring strength of the doctor-patient relationship even under difficult conditions. Among those with good access to their physician, that figure climbs to 91%. Even among those with poor access, 53% still rate the quality of care they receive positively, a testament to the dedication of family physicians who are working under significant pressure.

81%

of Albertans who saw a family doctor in the past year rated the quality of their last experience as “very good” or “excellent.”

91%

of patients who are able to see their family doctor when needed rate their care highly



PRIMARY CARE

Behind the Numbers

In 2026, 16% of adult Albertans do not currently have a regular family doctor, a modest improvement from 18% in 2025 (-1%). Of those without a doctor, 7% are actively searching for a family physician but have not been able to secure one, down from 10% in 2025 (-3%), while 4% continue to rely on walk-in clinics as their primary source of care, consistent with last year. These are small but meaningful gains. However, the picture is not uniformly positive. Among those looking for a family doctor, 29% report that there are no doctors in their area accepting new patients, up from 23% in 2025 (+6%), suggesting that geographic availability of family physicians remains a challenge, and one that appears to have grown over the past year.



PatientsFirst Spotlight

In 2026, we asked our PatientsFirst.ca community about their experience with primary care last year. Among those without a family doctor, respondents cited a range of reasons, including no clinics accepting new patients, physicians leaving the area, clinic closures and difficulty finding a doctor they felt comfortable with. These responses reflect the variety of ways Albertans find themselves without consistent primary care. Even among those who do have a family doctor, timely access remains a common concern, with fewer than one in five respondents describing their access as excellent. Where the data is more encouraging is in quality of care. Those who were able to see their family doctor rated their experience positively, with ratings of 4 or 5 out of 5 representing the majority across all groups surveyed. This pattern suggests that access, rather than quality of care, is the more pressing challenge within Alberta's primary care system.

“It took 5 years to find a physician — and that’s because every time we found one, they quit to move to BC.”

— Alberta patient

Walk-in Clinics

The role of walk-in clinics in Alberta's health care landscape is evolving.

In 2026, 28% of Albertans reported using a walk-in clinic in the past year, down slightly from 30% in 2025 (-2%). More notably, the share of Albertans relying on walk-ins exclusively has declined from 27% in 2025 to 21% in 2026 (-6%), a shift that may reflect the early effects of efforts to strengthen primary care access across the province. While this is an encouraging trend, walk-in clinics continue to play an important role in meeting demand that the broader system has not yet fully absorbed. Together these two themes capture the core tension of the walk-in clinic experience: too many patients, too little time.

Who Uses Walk-in Clinics and Why?

For most Albertans, a visit to a walk-in clinic is not a first choice. In 2026, 78% of walk-in clinic users report turning to them only when they cannot see their family doctor quickly enough, up significantly from 70% in 2025 (+8%). This figure suggests that as family doctor access remains constrained, more Albertans are turning to walk-in clinics as an intermediate option rather than out of preference or convenience.

78% report they turn to walk-in clinics only when they cannot see their regular family doctor quickly enough, up from 70% in 2025 (+8%).

21% use walk-in clinics exclusively because they have been unable to find a family doctor accepting new patients, down from 27% in 2025 (-6%).

5% use walk-in clinics exclusively for convenience, down from 7% in 2025 (-2%).

4% of all Albertans rely on walk-in clinics as their primary source of care.



Timeliness and Continuity of Care

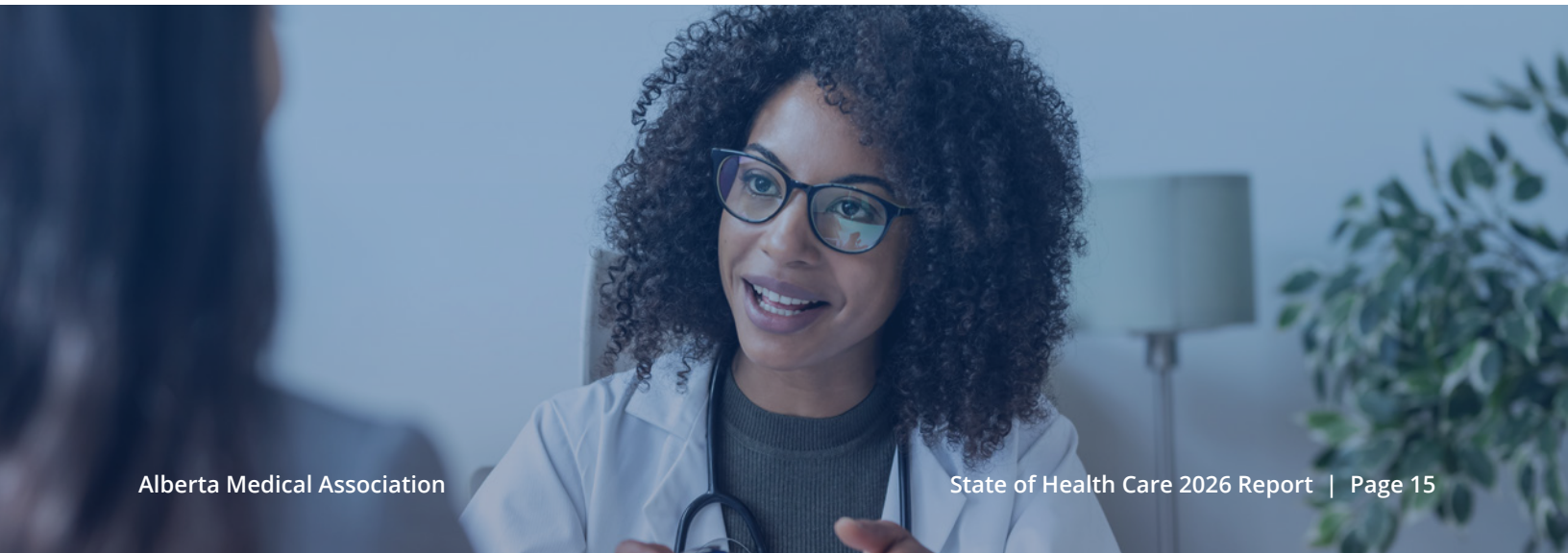
The experience inside a walk-in clinic is one of contrasts. Waiting room times remain a significant source of frustration, with 47% of users rating timeliness as poor. At the same time, 38% rate timeliness as good or excellent, up from 31% in 2025 (+7%), suggesting that some clinics are finding ways to manage demand more effectively. The quality of care once patients are seen tells a more positive story. 53% of users rated the overall quality of care at their last visit as good or excellent, up from 51% in 2025 (+2%), and 26% rated their care as poor, a very significant improvement from 48% in 2025 (-22%). The pattern is consistent with what Albertans report across other parts of the system: getting through the door is the hard part.

38%
rate timeliness of seeing
a physician as good or
excellent

47%
rate timeliness of
seeing a physician
as poor

53%
of walk-in clinic users rated
the overall quality of care as
good or excellent

26%
rated their care
as poor



WALK-IN CLINICS



PatientsFirst Spotlight

Insights from the PatientsFirst.ca community illustrate why walk-in clinics remain an important part of Alberta's primary care landscape. For many respondents, visits to walk-in clinics are not a matter of convenience but reflect difficulty accessing a regular family doctor. Respondents managing chronic conditions or ongoing health concerns noted that seeing a different physician at each visit can make continuity of care more difficult to maintain, as context and history must be re-established at every appointment. These experiences are consistent with the survey data and point to the value of stable, ongoing patient-physician relationships in supporting quality primary care.

“I have no family doctor. I have been trying to find one for two years. Walk-in clinics are all I have. Every time I go, I see someone new who knows nothing about me. I have a chronic condition. This is not how it should work.”

— Alberta patient

Emergency Care

Emergency departments across Alberta are under greater pressure in 2026 than at any point in this survey's tracking history.

30% of Albertans visited an emergency department in the past year, up from 27% in 2025 (+3%), and the experiences they report paint a picture of a system that is working hard but struggling to keep pace with demand. For many Albertans, the emergency department has become the default option when other parts of the system are unavailable or too slow — a pattern that places additional strain on already stretched resources.

Timeliness of Care



Wait times remain the defining challenge of the emergency department experience. In 2026, 61% of those who visited an ED rated the timeliness of seeing a physician as poor, up from 58% in 2025 (+3%), while only 27% rated timeliness as good or excellent, up marginally from 26% in 2025 (+1%). These figures reflect a system where the gap between arrival and care continues to widen for a significant share of patients.

61%

of those who visited an ED
rated timeliness of seeing a
physician as poor

27%

rated timeliness as
good or excellent

EMERGENCY CARE

Quality of Care



Despite the pressures on wait times, Albertans continue to speak positively about the care they receive once they are seen. 59% of ED visitors rated the overall quality of care at their last visit as good or excellent, consistent with 60% in 2025 (-1%), while 24% rated their care as poor, up slightly from 22% in 2025 (+2%). The dedication and professionalism of emergency health care workers is a consistent theme across patient feedback, even when the conditions in which they are working are far from ideal.

59%

rated overall quality of care
as good or excellent

24%

rated overall quality
of care as poor

Patient Outcomes and Experiences

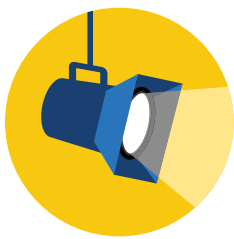
Beyond wait times, the data points to some troubling experiences inside Alberta's emergency departments. In 2026, 35% of ED visitors reported a problematic experience during their visit, up from 33% in 2025 (+2%). Of those, 22% reported being treated or kept overnight in a non-traditional space such as a hallway or storage area, up from 18% in 2025 (+4%), while 15% left the emergency department without receiving care at all, an improvement from 18% in 2025 (-3%). While the decline in patients leaving without care is encouraging, the increase in non-traditional treatment spaces points to overcrowding as an increasingly common feature of the emergency department experience for a large share of patients.

- 35% of ED visitors reported a problematic experience, up from 33% in 2025 (+2%)
- 22% were treated in a non-traditional space such as a hallway, up from 18% in 2025 (+4%)
- 15% left without receiving care, down from 18% in 2025 (-3%)

EMERGENCY CARE

Behind the Numbers

Patient sentiment in 2025 reinforces what the data already suggests: lengthy wait times are the dominant frustration, appearing in approximately 45% of patient comments. For many Albertans, the wait itself has become a barrier to seeking emergency care at all. References to staffing pressures and workload appear in 25% of comments. Patients generally distinguish between their appreciation for individual care providers and their concerns about the conditions those providers are working under. Once seen by a physician or care team, patients are largely satisfied with what they receive, with positive care experiences accounting for 15% of feedback. Patient ratings for quality of care once seen remain considerably more positive than ratings for timeliness and access. Triage and prioritization concerns (6%), overcrowded and uncomfortable facilities (4%) and the presence of non-urgent cases contributing to wait times (2%) are smaller but recurring themes that speak to broader questions of system design and patient flow.



PatientsFirst Spotlight

We asked our PatientsFirst.ca community about their experiences in emergency departments, and the results reflect the pressures visible in the broader data. Wait times were the most consistently cited concern, with many respondents describing waits of several hours before being seen. A recurring theme across responses was the distinction patients drew between their experience of waiting and their experience of care once seen. Staff were frequently described as skilled and professional, with many respondents expressing appreciation for providers working under demanding conditions. Respondents also noted that emergency department visits were not always their first choice. Many described arriving after being unable to access care through other parts of the system, pointing to the role that primary care availability and urgent care access can play in shaping emergency department demand.

“I waited nine hours in a plastic chair before anyone saw me. When the doctor finally came, she was incredible. Thorough, kind, and clearly running on empty. I left grateful for her and furious at the system that put both of us in that position.”

— Alberta patient

Urgent Care

Urgent care facilities are designed to address health concerns that require prompt attention but are not life-threatening emergencies. In 2026, 12% of Albertans reported visiting an urgent care facility in the past year, up from 11% in 2025 (+1%).

While usage has remained relatively stable, the experiences Albertans report inside those facilities tell a more concerning story. Across both timeliness and quality of care, ratings have deteriorated meaningfully since last year, raising important questions about whether urgent care centres are being given the resources they need to meet growing demand.

Timeliness of Care



The decline in timeliness ratings at urgent care centres is one of the more striking findings in this year's report. In 2026, only 19% of recent urgent care patients rated the timeliness of seeing a physician as good or excellent, a troubling drop from 31% in 2025 (-12%). At the same time, 61% rated timeliness as poor, up sharply from 45% in 2025 (+16%).

In a single year, the share of urgent care patients rating timeliness positively has dropped from roughly one in three to approximately one in five. For a service designed around timely access, this shift is among the more notable findings in this year's report and warrants close examination.

19%

rated timeliness of seeing a physician as good or excellent, down from 31% in 2025 (-12%)

61%

rated timeliness as poor, up from 45% in 2025 (+16%)

URGENT CARE

Quality of Care



Quality of care ratings have also declined, and although the shift is less dramatic than the timeliness figures, it is still notable. In 2026, 56% of urgent care patients rated the overall quality of care they received as good or excellent, down from 68% in 2025 (-12%), while 20% rated their care as poor, up from 11% in 2025 (+9%). While most patients still report positive care experiences, the trend is shifting. As wait times grow and resources are stretched, the quality of the experience is starting to decline.

56%

rated overall quality of care as good or excellent, down from 68% in 2025 (-12%)

20%

rated overall quality of care as poor, up from 11% in 2025 (+9%)

Behind the Numbers

Urgent care was built to be the middle ground. The place Albertans could turn to when their concern was too serious for a walk-in clinic but did not warrant an emergency department. That promise is increasingly hard to keep. This year, 61% of Albertans rated the timeliness of urgent care as poor or very poor, a dramatic shift from 45% the year before. Nearly 40% of all urgent care feedback is focused on wait times and overcrowding, and respondents paint a picture of facilities straining under a volume they were never designed to absorb.

As family doctor access declines and walk-in clinics close or reduce their hours, urgent care centres are filling with patients who have nowhere else to go, including many whose needs could have been addressed much earlier in a functioning primary care system. The result is a facility type that is losing its defining purpose. When urgent care begins to feel like emergency care, the entire chain of access breaks down. Once again, the staff inside these centres are not the issue. Quality of care once seen remains the strongest performing measure in urgent care feedback. The problem is getting to that care in an urgent time frame.

URGENT CARE

“Urgent care is supposed to mean something. I waited four hours with my daughter who had a suspected fracture. By the time we were seen the swelling had doubled. The staff were wonderful. But four hours is not urgent. That is just another waiting room with a different name.”

— Alberta patient



Specialty Care

Demand for specialist care in Alberta is growing, and the system is struggling to keep up. In 2026, 47% of Albertans reported seeing a specialist in the past year, up from 44% in 2025 (+3%), reflecting a population with increasingly complex health needs and a growing reliance on specialized medical expertise. Yet as demand rises, the data suggests that access to specialist care has become more difficult to secure over the past year. Nearly one in four Albertans (24%) are now on a waitlist for an initial consultation or procedure, up from 2025, and 84% of those waiting describe their expected wait as too long, including 62% who say it is far too long.

Timeliness of Care



Wait times for specialty care are one of the more complex findings in this year’s report. On the surface, the share of patients rating timeliness as good has edged up slightly to 40%, from 38% in 2025 (+2%). But the share of patients rating timeliness as poor has also increased, rising to 48% from 42% in 2025 (+6%). The divergence suggests that experiences are becoming more polarized: some patients are being seen relatively quickly, while others are facing increasingly unacceptable delays. For those in the latter group, the consequences can be significant.

40%
rated timeliness of seeing a specialist as good, up from 38% in 2025 (+2%)

48%
rated timeliness as poor, up from 42% in 2025 (+6%)

SPECIALTY CARE

Waitlists

In 2026, 24% of Albertans report currently being on a waitlist to see a specialist for either an initial consultation or a specific procedure. Of those waiting, 84% describe their expected wait as too long, unchanged from 84% in 2025, though the intensity of frustration has eased somewhat: 62% describe their wait as far too long, down from 69% in 2025 (-7%), while those calling it “a bit too long” rose from 15% to 22% (+7%). These figures reflect real wait experiences, with many Albertans reporting delays measured in months or, in some cases, years.

- 24% of Albertans are currently on a waitlist for a specialist consultation or procedure
- 84% of those on a waitlist describe their expected wait as too long, unchanged from 2025

Quality of Care



As with other parts of the system, the quality of care Albertans receive once they are seen by a specialist remains a genuine strength. In 2026, 70% of those who saw a specialist rated the overall quality of care at their last visit as good or excellent, consistent with 72% in 2025 (-2%), while 16% rated their care as poor, up from 10% in 2025 (+6%). The skill and expertise of Alberta’s specialists continue to be recognized and appreciated by patients. The challenge is not the care itself, but getting access to it.

70%

rated overall quality of care as good or excellent, down from 72% in 2025 (-2%)

16%

rated overall quality of care as poor, up from 10% in 2025 (+6%)

SPECIALTY CARE

Behind the Numbers

The gap between getting referred to a specialist and being seen by one is where patient frustration is most acutely felt. Long waits dominate feedback (approximately 45% of comments), and for many Albertans the delay is not measured in weeks but in years. Referral and access difficulties account for 10% of comments, with patients describing a process that can be difficult to navigate. Once seen, the experience is largely positive, with quality and thoroughness of care accounting for 20% of comments and reflecting well on Alberta's specialist community.



PatientsFirst Spotlight

The PatientsFirst.ca survey identified access to specialist care as a prominent concern among respondents. Among those who described difficulties within the health system, wait times for specialist appointments ranked among the top issues cited, alongside diagnostic testing, cancer care and surgical procedures. Respondents described waiting for a range of specialist services, including oncology, mental health support, orthopedic surgery and diagnostic imaging. Where respondents were ultimately able to access specialist care, they tended to rate the quality of that care positively, suggesting that the standard of care delivered by specialists remains a strength of the system. The more consistent concern across responses was the length of time required to reach that point, with many respondents describing wait times they felt had a significant impact on their health and wellbeing.

“I have been on a waitlist to see a specialist for two and a half years. In that time my condition has progressed from something manageable to something that will now require a far more serious intervention. I was not waiting because I was not sick enough. I was waiting because there was no room for me. There still isn't.”

— **Alberta patient**

Mental Health and Addictions

Of all the areas examined, mental health and addiction services draw the lowest confidence ratings from Albertans and have remained largely unchanged from 2025. In 2026, only 14% of Albertans rate mental health services as good, while 47% rate them as poor, figures that are unchanged from 2025. This reflects the continued distance between available services and the level of need Albertans are reporting. Addiction services tell a similar story, with 13% of Albertans rating them as good and 40% rating them as poor — also consistent with last year. The similarity in these findings across both years points to a persistent gap between need and available services. It reflects a persistent and unaddressed gap between what Albertans need and what the system is able to provide.

Mental Health Services

The ratings for mental health services are consistently low across all demographic groups, but are particularly pronounced among women, who rate mental health services lower than men across every measure. Regional differences are also notable, with northern Alberta reporting the lowest ratings (11% good, 53% poor) and southern Alberta reporting the least negative assessments (13% good, 39% poor). Regional variation of this kind points to differences in service availability and access across the province that may benefit from targeted attention. The consistency of these findings across regions, age groups and genders speaks to a challenge that is systemic rather than localized.

14% of Albertans rate mental health services as good

47% of Albertans rate mental health services as poor

Addiction Services

Addiction services are similarly poorly rated, with little variation across demographic groups. The data reflects a broader reality: addiction services in Alberta are underfunded, difficult to access and widely perceived as inadequate. For Albertans living with addiction and their families, these ratings point to a system where demand continues to outpace available support.

13% of Albertans rate addiction services as good

40% of Albertans rate addiction services as poor

MENTAL HEALTH AND ADDICTIONS

Behind the Numbers

The low ratings for both mental health and addiction services are not simply a reflection of high demand. They reflect a system where access is difficult, wait times are long and affordability remains a significant barrier for many Albertans. The consistency of these findings across regions, age groups and genders points to a challenge that is structural rather than isolated. For Albertans living with mental health conditions or addiction, and for the families supporting them, the data points to a system that is under significant strain and where the scale of unmet need points to a growing gap between current capacity and demand.



PatientsFirst Spotlight

The PatientsFirst.ca survey identified mental health and addiction services as among the most frequently cited areas of concern. Respondents described significant difficulty accessing psychiatric care, with many noting that no psychiatrists in their region were accepting new patients. For those unable to access specialized support, family physicians were often the next point of contact, though respondents noted that the scope of mental health support available within primary care varied considerably. For those managing addiction, respondents described challenges accessing treatment programs and inconsistent experiences navigating available services. Affordability was also a recurring theme, with the cost of private mental health services cited as a barrier when publicly funded options were unavailable or difficult to access in a timely way. Across both groups, the gap between the level of need respondents described and the support they were able to access was a consistent concern throughout the survey.

MENTAL HEALTH AND ADDICTIONS

“I have been trying to access mental health support for three years. I have been on waitlists, discharged from programs after six sessions, told to call back, put on new waitlists, and sent to the emergency room twice when I reached a point of crisis. I am not an edge case. I am what happens when a system decides that mental health can wait. It cannot. I am proof of what waiting costs.”

— Alberta patient



Pediatric Mental Health

Children’s mental health emerges as one of the most pressing and personal issues in this year’s report. In 2026, 40% of parents with children at home report that their child has a mental health or developmental condition, with ADD/ADHD (22%), anxiety and panic (19%) and learning disorders (12%) being the most commonly identified conditions. These are not rare or isolated experiences. They represent the daily reality of a significant and growing share of Alberta’s families.

Of those 40%, 59% report that their child is currently receiving or actively seeking support. That figure points to a meaningful gap in support, one that may reflect a range of factors including access, affordability and awareness of available services.

How Children Are Being Supported

Among those children who are receiving support, mental health counsellors and therapists are the most common source of care (40%), followed by family physicians (38%) and psychologists (31%). However, 21% of families are still waiting for a referral or appointment with a specialist, and 14% are waiting for a referral or appointment with a counsellor or therapist. Emergency departments account for 4% of support, reflecting the extent to which some families turn to acute care settings when other options are not accessible.

Ratings of Care

All aspects of pediatric mental health care assessed in this survey received negative ratings. The lowest rated areas are: ease of navigating mental health supports (16% good, 59% poor), funding for supportive care (17% good, 56% poor) and supports for parents and guardians (21% good, 52% poor). Even the highest rated attribute (coverage of costs through insurance), receives only 40% good ratings against 41% poor.

Behind the Numbers

The data on pediatric mental health reflects a consistent pattern across the attributes assessed in this section. Access and wait times, affordability and the availability of practitioners are the most commonly cited priorities among parents, pointing to a set of challenges that are both widespread and deeply felt. 49% of parents say pediatric mental health care has gotten worse over the past five years, compared to 8% who say it has improved. This reflects how these challenges have accumulated over time. For families navigating this system, the difficulties are practical: finding a practitioner with availability, managing the cost of care when public options are not accessible in a timely way, and understanding how to navigate a difficult to follow referral process. The data also points to the importance of early access. Parents consistently identified timely support as a priority, reflecting an understanding that mental health challenges that are addressed earlier are generally easier to manage than those that have gone unaddressed for an extended period.

PEDIATRIC MENTAL HEALTH

“We have been waiting for over a year and a half for our son to see a psychiatrist. In that time he has been hospitalized twice, has fallen two grade levels behind in school, and I have had to reduce my hours at work to manage his care. We are not a family in crisis because we did nothing. We are a family in crisis because we did everything right and the system had nothing to offer us. There is no version of this that is acceptable.”

— Alberta patient



We leave you with some questions

We hope that Albertans will find this second annual State of Health Care report card a valuable tool for understanding the current state of our health care system. It reflects our continued commitment to informed reform and underscores why the AMA undertook this initiative. The benchmarking data will help us track progress over time. Through ongoing evaluation and reporting, we aim to drive meaningful change that benefits all Albertans.

This report builds on the foundation laid in 2025 and paints a detailed picture of both the strengths and stresses in Alberta's health care system. From these findings, here are some questions all Albertans should consider for the future:

System Design & Sustainability

What does a sustainable health care workforce look like in Alberta, and what will it take to get there?

How can the system be stabilized and strengthened during a period of significant reorganization without compromising the quality of care Albertans receive today?

Primary Care Gaps

With 29% of those seeking a family doctor reporting no doctors accepting patients in their area, what targeted strategies can address geographic gaps in primary care access?

As the PCPCM continues to roll out, how will its impact on family doctor availability be measured and communicated to Albertans?

Access & Wait Times

With 24% of Albertans on a waitlist and most describing waits as too long, what strategies could improve timely access to specialist care?

What accountability mechanisms can ensure that wait time reduction efforts translate into measurable improvements for patients?

Mental Health and Pediatric Care

How can the path to pediatric mental health care be made simpler, faster and more affordable for Alberta families?

With many children not receiving or seeking support, what barriers to pediatric mental health care need to be addressed most urgently?

Patient Experience and Equity

How can the system better serve younger Albertans, who report the lowest satisfaction and face the greatest barriers to finding a family doctor?

What can be done to ensure that the experience of care, not just access, meets the expectations of Albertans across all demographics and regions?

As leaders and stewards of our health care system, physicians are committed to working with system partners to answer questions such as these. We look forward to reporting to you again one year from now.



PatientsFirst.ca